

NEVADA STATE BOARD
of
DENTAL EXAMINERS



BOARD TELECONFERENCE MEETING

TUESDAY, MAY 18, 2021

6:00 P.M.

PUBLIC BOOK

Agenda Item 4 (a):

Minutes-Continuing Education Meeting 03/02/2021

Nevada State Board of Dental Examiners



6010 S. Rainbow Blvd., Bldg. A, Ste.1 • Las Vegas, NV 89118 • (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

NOTICE OF AGENDA & TELECONFERENCE MEETING FOR THE CONTINUING EDUCATION COMMITTEE

(Ronald Lemon, DDS (Chair); Elizabeth Park, DDS; D. Kevin Moore, DDS; Adam York, DDS; Yamilka Arias, RDH)

Meeting Date & Time

Tuesday, March 2, 2021
6:00 p.m.

**This meeting will be held exclusively through teleconference means,
in accordance with Emergency Directives issued by Governor Sisolak**

DRAFT MINUTES

PUBLIC NOTICE:

**** This meeting will be held via TELECONFERENCE ONLY, pursuant to Section 1 of the DECLARATION OF EMERGENCY DIRECTIVE 006 ("DIRECTIVE 006") issued by the State of Nevada Executive Department and as extended by Directives 016, 018, 021, 026, and 029. There will be no physical location for this meeting****

Public Comment by pre-submitted email/written form, only, is available after roll call (beginning of meeting); **Live Public Comment by teleconference** is available prior to adjournment (end of meeting). Live Public Comment is limited to three (3) minutes for each individual.

Pursuant to Section 2 of Directive 006, members of the public may participate in the meeting by submitting public comment in written form to: **Nevada State Board of Dental Examiners, 6010 S. Rainbow Blvd, A-1, Las Vegas, Nevada 89118; FAX number (702) 486-7046; e-mail address nsbde@nsbde.nv.gov**. Written submissions received by the Board on or before **Monday, March 1, 2021 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 6010 S Rainbow Blvd, Ste. A-1, Las Vegas, Nevada.

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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66 **1. Call to Order**

67 - Roll call/ Quorum

68 Mr. DiMaggio called the meeting to order approximately 6:05 p.m., and conducted the following roll
69 call:

70 Dr. Ronald Lemon----PRESENT

71 Dr. D. Kevin Moore---PRESENT

72 Dr. Elizabeth Park----PRESENT

73 Dr. Adam York-----PRESENT

74 Yamilka Arias-----PRESENT

75

76 There is quorum.

77 Others Present: Phil Su, General Counsel; Frank DiMaggio; Executive Director.

78

79 **2. Public Comment (By pre-submitted email/written form):** The public comment period is limited to matters
80 specifically noticed on the agenda. No action may be taken upon the matter raised during public comment unless the matter
81 itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3)
82 minutes as a reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson
83 may allow additional time at his/her discretion.

84

85 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
86 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov,
87 or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Monday, March 1,**
88 **2021 by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received
89 prior to the adjournment of the meeting will be included in the permanent record.

90

91 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,
92 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
93 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,
94 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.
95

96

96 There were no written public comments.

97

98 ***3. Chairman's Report:** *Ronald Lemon, DDS* (For Possible Action)

99

100 Dr. Lemon disclosed his professional association as an instructor at UNLV School of Dental Medicine.

101

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

103

104 There were no requests made.

105

106 **(b) Approve Agenda** (For Possible Action)

107

108 MOTION: Committee Member Moore made the motion to approve the agenda. Committee Member
109 York seconded the motion. With no discussion, all were in favor; motion passed.

110

111

112

113

114 ***4. Old Business:** (For Possible Action)

115

116 Mr. Su explained the differences between temporary unrestricted licenses for agenda items (4)(a)-(d)
117 and temporary restricted license for agenda item (4)(e).

118

119 ***a. Review, discussion, and possible recommendations to the Board to extend temporary**
120 **approval and acceptance of the successful completion of non-patient based Western**
121 **Regional Examination Board (WREB) exam for dental licensure, for issuance of a temporary**
122 **unrestricted dentist license, from current June 30, 2021 deadline** – NRS 631.240 (For Possible Action)

123

124 MOTION: Committee member Park made the motion to extend the temporary approval and
125 acceptance of the successful completion of non-patient based Western Regional
126 Examination Board (WREB) exam for dental licensure. Committee Member Arias seconded

127 the motion. Committee Member Moore inquired about the length of the new extension.
 128 Committee Member Park amended her motion to state that the new extension deadline for
 129 issuance of a temporary unrestricted dentist license ends 06/30/2022. The amended motion
 130 was seconded by Chairman Lemon. Motion passes; without discussion.

- 131 /
- 132
- 133 ***b. Review, discussion, and possible recommendations to the Board to extend temporary**
 134 **approval and acceptance of the successful completion of Western Regional Examining**
 135 **Board's (WREB) Objective Structured Clinical Examination (OSCE) exam for dental hygiene**
 136 **licensure, for issuance of a temporary unrestricted dental hygiene license, from current June**
 137 **30, 2021 deadline** – NRS 631.300 (For Possible Action)

139 MOTION: Committee Member Moore made a motion to extend temporary approval and acceptance of
 140 the successful completion of Western Regional Examining Board (WREB) objective structured
 141 Clinical Examination (OSCE) exam for dental hygiene licensure, for issuance of a temporary
 142 unrestricted dental hygiene license, from current date of June 30, 2021 to June 30, 2022.
 143 Committee Member Arias seconded the motion. Motion passes; without discussion.

- 144
- 145 ***c. Review, discussion, and possible recommendations to the Board to extend temporary**
 146 **approval and acceptance of the successful completion of restorative procedures in the**
 147 **American Board of Dental Examiners' (ADEX) exam for dental licensure to be completed**
 148 **either on a live patient or the CompeDont tooth, for issuance of a temporary unrestricted**
 149 **dentist license, from current June 30, 2021 deadline** – NRS 631.240 (For Possible Action)

150

151 Motion: Committee Member Moore made a motion to extend the temporary approval and acceptance
 152 of the successful completion of restorative procedures in the American Board of Dental
 153 Examiners' (ADEX) exam for dental licensure to be completed either on a live patient or the
 154 CompeDont tooth, for issuance of a temporary unrestricted dentist license, from current
 155 June 30, 2021 deadline to June 30, 2022. Committee Member Park seconded the motion.
 156 Chairman Lemmon called for a vote. Motion passed without discussion.

- 157
- 158
- 159 ***d. Review, discussion, and possible recommendations to the Board to extend temporary**
 160 **approval and acceptance of the successful completion of use of manikins by the American**
 161 **Board of Dental Examiners (ADEX) for the Dental Periodontal Scaling Exercise portion of the**
 162 **ADEX dental exam for issuance of a temporary unrestricted dentist license and for the ADEX**
 163 **dental hygiene clinical examination for issuance of a temporary unrestricted dental hygiene**
 164 **license, from current June 30, 2021 deadline** – NRS 631.240 and 631.300
 165 (For Possible Action)

166

167 Motion: Committee Member Moore made a motion to extend temporary approval and acceptance of
 168 the successful completion of use of manikins by the American Board of Dental Examiners
 169 (ADEX) for the Dental Periodontal Scaling Exercise portion of the ADEX dental exam for
 170 issuance of a temporary unrestricted dentist license and for the ADEX dental hygiene clinical
 171 examination for issuance of a temporary unrestricted dental hygiene license, from current
 172 June 30, 2021 deadline to June 30, 2022. Committee Member York seconded the motion.
 173 Committee Member Arias asked if the hygienist took the Manikin exam would the hygienist
 174 have to take the live patient exam. Executive Director DiMaggio responded that after the
 175 pandemic the cost to retake the ADEX exam is \$300 and WREB is at \$0 to retake exam on a
 176 live patient. It is up to the licensee to state they were under the Nevada temporary licensure
 177 when they took the Manikin Exam. Chairman Lemon called for a vote. Motion Passes with no
 178 further discussion.

- 179
- 180 ***e. Review, discussion, and possible recommendation to the Board to supplement, amend,**
 181 **and/or modify the Board's Memorandum dated July 14, 2020, regarding the "Suspension of**
 182 **Certain Licensure Provisions Pursuant to the Governor's Declaration of Emergency Directive**
 183 **011", to allow and permit dental school graduates of the class of 2021 and dental hygiene**
 184 **school graduates of the class of 2021 to apply for a temporary license (subject to supervision**

185 **by supervising dentist** – NRS 631. 240 and 631.300 (For Possible Action)

186
187 Motion: Committee Member Moore made a motion to extend temporary licenses to July 14, 2021.
188 Clarification was made by Mr. Su, General Counsel, that the July 14, 2020 memorandum applied to
189 graduates in 2020 and that they wanted to extend it to class of 2021; also that each student needs to be
190 under the direct supervision of a Nevada dentist who has been licensed for 5 years. Mr. DiMaggio
191 clarified further. Committee Member Moore clarified that the class of 2021 will be included. Mr. Su,
192 General Counsel, clarified that after the Governor's restriction is lifted that these temporary licensees will
193 have 90 days to take the clinical examination or they will have no practice capabilities and the
194 temporary license will not be valid. Committee Member Moore made an amended motion to continue
195 to accept the class of 2020 and include the class of 2021. Committee Member Park seconded the
196 motion. Motion passed. Committee Member Park inquired how far behind the seniors are right now. Dr.
197 Lemon commented that they are pretty far behind especially with crowns.

198
199 ***5. New Business:** (For Possible Action)

200
201 ***a. Discussion, consideration, and possible approval/rejection of changes to examination**
202 **adopted at the 16th Annual 'Virtual' Meeting of the American Board of Dental Examiners**
203 **(ADEX)** (For Possible Action)

204
205 (1) Changes to 2021 and 2022 ADEX Dental Examination

206
207 Chairman Lemon asked for comment from ADEX. ADEX representative Kimber Cobb, Director of Dental
208 licensure portability and acceptance, stated that she sent Mr. DiMaggio updates for 2020-2021 and
209 updates for 2022. Chairman Lemon said that he is impressed with the construction of the typodont and
210 the feedback on the simulation vs patients compared to the patient based exam. ADEX has a current
211 study on the dental patient based/manikin based exams, they are starting one for Dental Hygiene and it
212 should be up soon. Preliminary studies have several varieties of examiners, faculty, patient, on simulations.
213 There were a few limitations, however it was comparative. Chairman Lemon asked on a national scale
214 how she envisioned the future of simulated exams vs. patient based exams? Ms. Cobb did not have an
215 answer to Chairman Lemon's question. Chairman Lemon stated that the state of Connecticut has
216 abandoned the patient based exam. Ms. Cobb confirmed this. Some states have shifted to acceptance
217 of manikin based exams to open ended. Committee Member Park had a question regarding
218 standardization of the of manikin based test. How different will it be state to state? What is the clear
219 objective of a manikin exam? Ms. Cobb replied it is a third party independent evaluation to ensure
220 competency in the profession. Committee Member Park asked the question whether they will be going to
221 standardized exams with manikins. Ms. Cobb replied yes absolutely that is the goal.

222
223 (2) Changes to 2021 and 2022 (if any) ADEX Dental Hygiene Examination
224 No Caller

225
226 Motion: Committee Member Moore made a motion to recommend approval of changes to the
227 ADEX Dental and Dental hygiene examination adopted at the 16th Annual 'Virtual' Meeting
228 of the American Board of Dental Examiners (ADEX). Committee Member Arias second the
229 motion. Chairman Lemon asked for vote and motion passed without further discussion.

230
231
232
233 ***b. Discussion, consideration, and possible recommendations to the Board regarding**
234 **approval/rejection of Laser Proficiency Program** – NAC 631.035 (For Possible Action)

235
236 (1) Dental Laser Coaching – "A Comprehensive Dental Laser Technology Overview
237 with Clinical Keys to Optimize Laser Utilization Safely and Effectively" – (6 units)

238
239 Nick Clausen is the representative for Dental Laser Coaching. Chairman Lemon asked Mr. Clausen how
240 he will be conducting the hands on portion of the Laser safety and Laser training. Mr. Clauson stated he
241 has conducted training for 15 years; it's a 3 step process, laser safety mechanisms, soft/hard tissue

242 chromophores, and what makes it proficient and efficient. They use pig jaws to see the chromophores,
 243 they use extracted teeth also. This is the first part of a 3 part course for laser dentistry certification. This a
 244 foundational course and he has 1:8 instructor student ratio and does not use dentists as instructors.
 245 Chairman Lemon asked Is there any circumstance that you would be doing laser training on a live
 246 patients. Committee member Park asked about sterilization techniques and Mr. Clausen replied that they
 247 go over sterilization in safety section and they use cavicide wipes. They do not use live patients.
 248 Committee Member Moore asked for a list of courses that the board has accepted. Mr. DiMaggio said
 249 that the paperwork for 3 approved courses were sent out and that Dr. Lemon has that paperwork. Ms.
 250 Spilsbury stated that Mr. Clausen is going over safety and mechanics of the laser and proficiency.

251
 252 Motion: Committee member Park moved to table this item until further information is provided. Dr. Lemon
 253 seconded the motion. The motion passed.

254
 255 ***c. Consideration, review, and discussion of cardiopulmonary resuscitation (CPR) certification**
 256 **requirement pursuant to NAC 631.173** (For Informational Purposes)

257
 258 Mr. DiMaggio summarized the requirements for CPR certification pursuant to NAC 631.173

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

267
 268 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
 269 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov,
 270 or by mailing/faxing written messages to the Board office. Written submissions should be received by the Board on or before
 271 **Monday, March 1, 2021 by 4:00 p.m.** in order to make copies available to members and the public.

272
 273 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,
 274 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
 275 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,
 276 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

277
 278 There were no public comments.

279
 280 **7. Announcements**

281
 282 There were no announcements

283
 284 ***8. Adjournment** (For Possible Action)

285
 286 Committee member Lemon called for adjournment.

287
 288 MOTION: Committee Member Park made the motion to adjourn the meeting at approximately 7:15 p.m.
 289 Committee Member Arias seconded the motion. All in favor, motion passed.

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 296 **PUBLIC NOTICE POSTED TO:**

Nevada State Board of Dental Examiners website: www.dental.nv.gov
 Nevada Public Posting Website: www.notice.nv.gov

Agenda Item: 4 (a):
Minutes - DH and DT Committee and Subcommittee
Meeting 03/10/2021

Nevada State Board of Dental Examiners



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NOTICE OF AGENDA & TELECONFERENCE MEETING for the COMMITTEE on DENTAL HYGIENE & DENTAL THERAPY in conjunction with the PUBLIC HEALTH DENTAL HYGIENE & DENTAL THERAPY SUBCOMMITTEE

Meeting Date & Time

Wednesday, March 10, 2021
6:00 p.m.

This meeting will be held exclusively through teleconference means, in accordance with Emergency Directives issued by Governor Sisolak

Teleconference Number: (669) 900 6833
Teleconference ID#: 999 3317 6284
Teleconference Passcode: 938606

DRAFT

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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.

1. Call to Order

- Roll call/ Quorum, Mr. DiMaggio announced roll call.

Chairman Park called the meeting to order at approximately 6:03 P.M. There is a quorum.

Dr. Park-----PRESENT	Dr. West-----PRESENT
Ms. Solie-----PRESENT	Ms. Woods---PRESENT
Mrs. McIntyre---PRESENT	Dr. Talley-----PRESENT
Ms. Arias-----PRESENT	Dr. Capurro-PRESENT
	Dr. Saxe-----PRESENT
	Ms. Taylor----PRESENT
	Dr. Gatan ----PRESENT
	Dr. M. Moore---PRESENT
	Ms. VanGuilder-PRESENT

Other Public Attendees: Phil Su, General Counsel; Frank DiMaggio, Executive Director

- 2. Public Comment (By 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.
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There was no written public comment.

***3. Chairwoman's Report:** *Elizabeth Park, DDS* (For Possible Action) Ms. Borderlove Deputy Attorney General and Mr. Su will follow up regarding the Open Meeting Law and the format of how we are conducting meetings.

(a) Chairwoman's Statement:

- (1) Submission of Committee/Subcommittee written assignment reports to the Chair

Mr. DiMaggio will go over list of assignments.

(b) Request to remove agenda item(s) (For Possible Action)

Chairwoman Park tabled the last item under agenda item 4, that being NRS 631.3124 Dental Therapists: Authorized services; referral of patient to authorizing dentist for certain purposes; supervision of dental assistants and dental hygienists and NRS 631.3124: Points of discussion.

(c) Approve Agenda (For Possible Action)

Motion: Committee Member McIntyre moved to approve the agenda. Committee Member Arias seconded the motion. All in favor of the motion, motion passed.

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105
106 ***4. Review, discussion, and possible recommendations to the Board regarding certain Nevada Revised**
107 **Statutes (NRS) related to the practice of Dental Therapy to Develop Proposed Regulations related to the**
108 **practice of Dental Therapy:** (For Possible Action)

109 a. Dental Therapy Statutes, including, but not limited to, NRS 631.312-.3124

110
111 o **NRS 631.312 Dental Therapists: Eligibility to apply for license.**

112 • **NRS 631.312(1)(c)(1): Points of discussion:**

- 113 • **What schools of Dental Therapy exists that are**
- 114 **accredited by the Commission on Dental**
- 115 **Accreditation of the American Dental Association?**
- 116 • **What are the curriculum requirements?**
- 117 • **What if the program loses CODA approval?**

118
119 Ms. Taylor looked into Alaska and Minnesota, programs as well as CODA, the National Model Act and dental
120 board websites. CODA has curriculum requirement of 3 years of training and they want didactic and
121 classroom 3 full school years. In Minnesota, dental therapists train beside dentists.

122
123 Ms. Woods read a document she had prepared on NRS 631.312 regarding Accreditation by the
124 Commission on Dental Accreditation of the American Dental Association (CODA).

125 Dr. Capurro mentioned that pursuant to NRS 631.312 (1)(d) Special endorsement Hygienist has to apply
126 through an approved PHE program. Dr. Capurro stated that she spoke with the bill's author regarding the
127 PHE issue and it was inadvertently left in the bill per the bill's author.

128 Dr. Capurro wrote regulatory language for hygienists. Dr. Park asked if there are hygienists working for
129 DHHS and what are their qualifications? Dr. Capurro's response was yes they have hygienists working for
130 DHHS using same requirements. Mr. Su asked if the license is being obtained through DHHS, does this mean
131 that DHHS is running a PHE program. The chair tabled the issue concerning NRS 631.312(1)(d).

132 Dr. Capurro would like instruction on what type of data is being requested.

133
134
135 **NRS 631.312(2): Points of discussion:**

- 136 • **Good standing in all states without an NPI is**
- 137 **challenging to track: What methodology should be**
- 138 **used to determine whether a person has good moral**
- 139 **character, the Board may consider whether his or her**
- 140 **license to practice dental therapy or dental hygiene**
- 141 **in another state has been suspended or revoked, or**
- 142 **whether he or she is currently involved with any**
- 143 **disciplinary action concerning his or her license in**
- 144 **another state.**

145
146 Ms. Taylor asked if the board checks other state licensure boards or with NPI for disciplinary actions or do
147 they just check NPI? Dr. Park asked Mr. Su our methodology for checking licensees. Mr. Su went over our
148 process for vetting new applicants. Ms. Woods stated she did not find any mention of NPI in the statute.

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153 o **NRS 631.3121 Dental Therapists: Examination; issuance of certificate of registration.**

154 • **NRS 631.3121(1): Points of discussion:**

- 155 • **What certified examinations are currently available**
- 156 **for Dental Therapy?**

157
158 Ms. Solie: stated, CODA and Central Regional Testing Services (known as CRTS) have clinical
159 examinations for dental therapy. They use manikin and live examinations, WREB is putting together a
160 Dental Therapy exam now. NSBDE has a jurisprudence exam and no need for a new exam. CDCA Dental
161 Therapy exam is going to be held in the fall of 2021.

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- **NRS 631.3122 Dental Therapists: Practice Settings; written practice agreement with authorizing dentist required; limitations on provision of services; qualifications of authorizing dentist.**
 - **NRS 631.3122(1)(a-c): Points of discussion:**
 - **Evaluation of liability burden pursuant to written practice agreement; supervised or indirect supervision;**
 - **Specific nature of clinical practice hours: Observation only? Procedure specific? Type of documentation/proof required?**
 - **Is there a moratorium on time frames to complete the required 500/1000/1500 clinical practice hours; do such hours expire outside of a certain time frame or do they persist indefinitely?**
 - **Safeguards against clinical incompetence by dental therapists; remediation as clinical competency.**

179 Ms. Solie stated that the dentist is the owner of the practice that employs the hygienist, dental therapist
180 and dental assistants and holds the ultimate responsibility. The dentist and therapist are not precluded from
181 having supplemental liability negotiated in their written practice agreement. The Dental Therapist will
182 provide only the services that are written within his or her scope of practice. The therapist has to be under
183 direct supervision of a dentist. There is no moratorium on the hours required which range from 4 months to
184 1 year based off of a 32 hour work week.

185
186
187 Ms. Solie addressed unprofessional conduct and prohibited acts under NRS 631.346 and 631.350.
188 Disciplinary and other actions applicable to licensees also apply to therapists. They are under the same
189 regulations as other licensees.

190
191 Ms. Arias mentioned safeguard requirements of clinical practices hours of 500-1500 hours and supervision
192 by the authorizing dentist. The supervising dentist is to figure out if the therapist has reached competency.
193 e.g. by keeping a log of hours and tasks.

- 194
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- **NRS 631.3122(2): Points of discussion:**
 - **Points of discussion: What are the outer limits of the written protocols and standing orders? If a dental therapist treats a patient who is not first seen by the supervising dentist, could the supervising dentist be subject to claim of unprofessional conduct?**

202 Dr. Gatan stated that the Minnesota statute provides for 2 levels of dental therapy, the dental therapist
203 and the advanced dental therapist. Dr. Gatan compared the Nevada statute and the Minnesota
204 statute. He noted differences between direct supervision and general supervision requirements. Dr.
205 Gatan has concern about vitality testing to differentiate pathology and there was no direct course
206 curriculum for endodontics or orthodontics, and prosthodontics appeared to be minor.

- 207
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213
- **NRS 631.3122(3): Points of discussion:**
 - **Evaluation of HRSA and the Federal Tort Act;**
 - **Who will be responsible for maintaining malpractice insurance? Individual or program/workplace? Dentist or therapist?**

214 Dr. West reviewed HRSA and federal tort act. There is a liability protection through the federal tort act.
215 Federally qualified health centers are immune from lawsuits with the federal government acting as their
216 insurer. Individual Dentist and Therapists are responsible for malpractice. The dentist is ultimately responsible
217 for malpractice and fraud. Insurance companies require insurance coverage to work on their insureds.
218 Ms. Woods stated that dental therapists can get Malpractice insurance through Mercer. Dr. Capurro
219 mentioned insurance is also available through Marsh. Dr. Saxe said Mercer is the only one who does direct
220 policies to dental therapists. Currently there are no specific malpractice insurers that write for dental

221 therapist. No dental insurance companies are underwriting dental therapists.

- 222 • **NRS 631.3122(4):**
- 223 • **Requirements for supervising dentist: active license,**
- 224 **actively practicing dentistry by treating patients.**

227 Dr. Capurro stated there has to be a practice agreement and it has to be signed updated and reviewed
228 on an annual basis. The dentist is responsible for all procedures performed by the therapist. The dentist
229 permits the therapist to perform procedures as per the agreement.

230 The dentist who has practiced dentistry for 3 years is eligible to enter into a practice agreement with a
231 dental therapist.

232 The authorizing dentist must have a clinical place of business for which referrals or treatment outlined in
233 the practice agreement can be provided.

234 The dentist must provide part time weekly services to patients.

- 238 ○ **NRS 631.3123 Dental Therapists: Required provisions of written practice**
- 239 **agreement.**

- 240 • **NRS 631.3123: Points of discussion:**
- 241 • **Special provisions required for corporate dental**
- 242 **settings;**
- 243 • **Lack of individuation of skill set for dental therapist.**

245 Dr. M. Moore stated that there needs to be definitions on full time practice of dental therapy.

247 Dr. Saxe reviewed 12 other states statutes. There are 3 different levels of supervision.

- 249 • Under general direct supervision, the dentist in the office personally diagnoses and personally
250 authorizes the treatment to be performed and before dismissal evaluates the performance of the
251 therapist.
- 252 • Under general supervision, the dentist has authorized the procedures that are being carried out in
253 accordance with standing orders issued to a specific dental healthcare provider.
- 254 • Under indirect supervision, a dentist in a facility authorizes procedures and remains in the dental
255 facility while the procedures are being performed by the dental healthcare provider.

258 Ms. VanGuilder offered her services for future assignments

260 Mr. Su to follow up with Ms. Bordelove regarding training dates pertaining to OML.

- 267 ○ ~~**NRS 631.3124 Dental Therapists: Authorized services; referral of patient to**~~
- 268 ~~**authorizing dentist for certain purposes; supervision of dental assistants and**~~
- 269 ~~**dental hygienists.**~~
- 270 • ~~**NRS 631.3124: Points of discussion:**~~
- 271 • ~~**Capabilities of Dental Therapist; Dental Hygiene care.**~~

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278 **5. Public Comment (Live public comment by teleconference):** This public comment period is for any matter that is
 279 within the jurisdiction of the public body. No action may be taken upon the matter raised during public comment unless the
 280 matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three
 281 (3) minutes as a reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson
 282 may allow additional time at his/her discretion.
 283 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
 284 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov, or
 285 by mailing/faxing written messages to the Board office. Written submissions should be received by the Board on or before
 286 **Tuesday, March 9, 2021 by 4:00 p.m.** in order to make copies available to members and the public.
 287 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,
 288 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
 289 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,
 290 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.
 291

292 Mr. DiMaggio opened public comment

293 Dr. Saxe made a correction regarding NRS 631.312 (1)(c)(1) that ADA is not associated with CODA.

294 No further comments.

295 **6. Announcements**

296 There were no announcements.

298 ***7. Adjournment** (For Possible Action)

299 Mrs. McIntyre made a motion to adjourn the meeting and Ms. Solie seconded the motion. All in favor,
 300 motion passed. Meeting adjourned.
 301
 302
 303

PUBLIC NOTICE POSTED TO:

Nevada State Board of Dental Examiners website: www.dental.nv.gov
 Nevada Public Posting Website: www.notice.nv.gov

Agenda Item 4 (a):

Minutes -Board Meeting - 03/16/2021 (Open Session)

Nevada State Board of Dental Examiners



6010 S. Rainbow Blvd., Bldg. A, Ste.1 • Las Vegas, NV 89118 • (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

NOTICE OF AGENDA FOR BOARD MEETING & PUBLIC HEARING

Meeting Date & Time

Tuesday, March 16, 2021

6:00 p.m.

**This meeting will be held exclusively through teleconference means,
in accordance with Emergency Directives issued by Governor Sisolak**

Teleconference Number: (669) 900 6833

Teleconference ID#: 934 4747 7840

Teleconference Passcode: 273734

DRAFT

PUBLIC NOTICE:

***** This meeting will be held via TELECONFERENCE ONLY, pursuant to Section 1 of the DECLARATION OF EMERGENCY DIRECTIVE 006 ("DIRECTIVE 006") issued by the State of Nevada Executive Department and as extended by Directives 016, 018, 021, 026, and 029. There will be no physical location for this meeting*****

Public Comment by pre-submitted email/written form, only, is available after roll call (beginning of meeting); **Live Public Comment by teleconference** is available prior to adjournment (end of meeting). Live Public Comment is limited to three (3) minutes for each individual.

Pursuant to Section 2 of Directive 006, members of the public may participate in the meeting by submitting public comment in written form to: **Nevada State Board of Dental Examiners, 6010 S. Rainbow Blvd, A-1, Las Vegas, Nevada 89118; FAX number (702) 486-7046; e-mail address nsbde@nsbde.nv.gov**. Written submissions received by the Board on or before **Monday, March 15, 2021 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 6010 S Rainbow Blvd, Ste. A-1, Las Vegas, Nevada.

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.

///

///

47 **1. Call to Order**

48 - Roll call/ Quorum Dr. Moore called the meeting to order 6:09pm

49 Mr. DiMaggio performed roll call

50

51

Dr. Moore-PRESENT	Ms. McIntyre-PRESENT
Dr. Lee-PRESENT	Ms. Arias-PRESENT
Dr. Thompson-PRESENT	Ms. Cioffi-PRESENT
Dr. West-PRESENT	
Dr. Lemon-PRESENT	
Dr. Park-PRESENT	
Dr. York-PRESENT	
Ms. Solie-PRESENT	

52

53

54 **2. Public Comment (By pre-submitted email/written form):** The public comment period is limited to matters

55 specifically noticed on the agenda. No action may be taken upon the matter raised during public comment unless the matter

56 itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3)

57 minutes as a reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson

58 may allow additional time at his/her discretion.

59

60 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may

61 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov,

62 or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Monday, March 15,**

63 **2021 by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received

64 prior to the adjournment of the meeting will be included in the permanent record.

65

66 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,

67 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

68 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,

69 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

70

71 Mr. DiMaggio made a statement regarding Public Comment.

72

73 Public comment submitted by Minette Galura-Boquiren, RDH, BS President, Nevada Dental Hygienists'

74 Association dated 03/15/2021. NDHA supports Agenda (5)(e) Tele dentistry.

75

76 Public Comment from Terri Chandler, RDH Future Smiles Founder and Executive Director: dated 03/04/2021:

77 Urged board not to *Reconsider* or Amend the Advisory Opinion issued by the Board on October 20, 2020

78 regarding whether dental healthcare provider can instruct parent/guardian to apply single unit dose of

79 fluoride varnish to their child's teeth through a synchronous teledentistry platform – NAC 631.279; NAC

80 631.220(2)

81

82 *Public Comment from Janet Crosswhite RDH, BS, PHE: Regarding (5)(e) dated 03/16/2021. Urged the board*

83 *not to eliminate or amend its October 8, 2020 advisory opinion.*

84

85 Public Comment from Antonio Ventura, BSDH, RDH Immediate Past-President, Southern Nevada Dental

86 Hygienists' Association asked that NSBDE **NOT** reconsider, or Amend the Advisory Opinion issued by the

87 Board on October 20, 2020 Agenda item 5 (E).

88

89 Public Comment from Annette Lincicome, BS, RDH Member, NDHA Legislative Committee: RE: Agenda item

90 #5(e) The NDHA supports the Advisory Opinion handed down by the board on October 8, 2020 (listed as

91 October 20,2020 in tonight's agenda) whereby a Nevada Licensed Dental Practitioner can instruct a

92 parent/guardian to apply a single unit dose of fluoride varnish to their child's teeth through a synchronous

93 teledentistry platform.

94

95 Public Comment from Jessica L. Woods, MPH, RDH regarding agenda item (5)(e) asked that the members of

96 the Board **NOT** to amend or eliminate the advisory opinion approved on October 8, 2020 (the agenda

97 reflects the incorrect date).

99 Public Comment from Nichelle Venable, BSDH, RDH regarding item 5e, requests that the board **NOT**
 100 reconsider or amend the advisory opinion issued on October 8th,2020 (correct date).

101
 102 Public Comment: Lancette VanGuilder, RDH, BS NDHA Legislative Chair Nevada Dental Hygienists
 103 Association and Dr. Mark Funke, DDS, Nevada Dental Association. On behalf of the Nevada Dental
 104 Association and the Nevada Dental Hygienists Association, we respectfully ask the members of the Nevada
 105 Board of Dental Examiners to perform their due diligence and ask on the record for an official Attorney
 106 General Opinion regarding Item 5.b and item 7 (j) of the March 16, 2021 Nevada State Board of Dental
 107 Examiners public board meeting. Specifically, Item 5.b is a return to the former way of doing business.

108
 109
 110 Second, Item 5.c is another power grab, like boards of the past, that delegates all subpoena authority to
 111 one member of the board. This lacks transparency and public engagement. Moreover, we do not believe
 112 that this delegation has statutory authority, nor follows Open Meeting Laws.

113
 114 As the professional associations that jointly represent all professionals governed by this board, we would like
 115 to thank you for your time and attention to this matter, and take steps to not return to the practices of past
 116 boards that overreached in their authority and violated multiple Open Meeting Laws. The board's
 117 delegation for the Secretary to issue subpoenas is outside of NRS 631.360(4) which states that only the
 118 Executive Director may issue subpoenas. This is an attempt not of delegation, but of legislation.

119
 120 Public Comment from Jennifer Henderson, RDH, BSDH According to the Agenda for the Board Meeting
 121 scheduled for Tuesday, March 16, 2021 Section "5. e. Request to Reconsider or Amend the Advisory Opinion
 122 issued by the Board on October 20, 2020 regarding whether dental healthcare provider can instruct
 123 parent/guardian to apply single unit dose of fluoride varnish to their child's teeth through a synchronous
 124 teledentistry platform – NAC 631.279; NAC 631.220(2)" is up for reconsideration and requested the Board
 125 **NOT** to amend its October 8, 2020 advisory opinion.

126
 127 Public Comment from Jacqueline Wiebe Washoe County Educator: Maintaining the preventive public
 128 dental health measures allowed through the Advisory Opinion of October 8, 2020 is good public health
 129 science. Allowing synchronous application of fluoride varnish by a parent under the direction of a licensed
 130 dental practitioner during a tele dentistry visit is an opportunity to combat some of the health disparities
 131 Nevada's most at-risk children have experienced during this pandemic by preventing cavities.

132
 133
 134 Public Comment from Lancette VanGuilder, NDAA, asked the Board to get an Attorney General advisory
 135 opinion regarding agenda items 5(c) and (e) and 7 (j). She requested the Board uphold the Board's
 136 October 8, 2020 advisory opinion and regarding item 7 (a), the NDHA supports vaccine administration by
 137 licensed dental practitioners.

138 Public comment from Drs. Tyre Davis and Bryce Putnam of Nevada health Centers, Support dental
 139 healthcare providers ability to provide fluoride varnish to patient's teeth utilizing synchronous tele dentistry.

140 Public comment from Ashley Yuill urged the Board to vote **No** to the request in Item # 5(b) and (c).

141
 142
 143
 144 ***3. President's Report:** (For Possible Action)
 145

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

147 Corrections agenda item 5(b) NRS 631.630 should have been 631.360(4), Agenda Item 5 (e) should have
 148 been Advisory opinion issued October 8th, 2020.

149 **(b) Approve Agenda** (For Possible Action)

150 Dr. Thompson motioned to approve agenda as corrected, Dr. Park seconded the motion. All in favor,
 151 Motion passes.
 152

153 ***4. Secretary - Treasurer's Report:** (For Possible Action)
154

155 ***a. Minutes** (For Possible Action)
156

- 157 (1) Board Meeting – 01/05/2021
158 (2) Regulation Workshop – 01/07/2021
159 (3) Board Regulation Workshop – 01/12/2021
160 (4) Anesthesia Committee & Subcommittee Meeting (Open & Closed Sessions) – 01/12/2021
161 (5) Employment Committee Meeting – 01/20/2021
162 (6) Board Meeting – 01/20/2021
163 (7) Board Meeting – 02/02/2021
164
165

166 Dr. West made a Motion to accept the minutes as given, Ms. McIntyre seconded the motion, all in favor,
167 Motion passes. No Discussion
168

169 ***5. General Counsel's Report:** (For Possible Action)

170 ***a. Review Panel – NRS 631.3635** (For Possible Action)

171 **(1) Discussion and consideration of proposed findings and recommendations for matters by**
172 **Review Panel** (For Possible Action)
173

174 Mr. Su: Review Panel recommended 31 of its cases reviewed from August through December 2020 be
175 remanded /dismissed. The board is under no obligation to follow the review panels request. These materials
176 are confidential.

177 Dr. Moore made a Motion to accept the recommendations of the review panel, Dr. West seconded the
178 motion, No discussion, All in favor, Dr. Lee recused, Ms. McIntyre recused, Motion passes.
179
180

181 ***b. Review, consideration, and possible approval/rejection of a request that the Board issue three**
182 **subpoenas to entities A, B, and C, pursuant to the Board's previously Authorized Investigation**
183 **of Dr. Z regarding whether Dr. Z met the requirements of NRS 631.271 for limited licensure –**
184 **NRS 631.630(4); NAC 631.355** (For Possible Action)
185

186
187 Reviewing the case of Dr. Z with a limited licensure, Dr. Z's license was returned to active status per court
188 order from December 2020.

189 Dr. Lee made a statement that the judge wants the Board to approve any subpoenas.

190 Dr. Lemon asked what information that is missing.

191 Dr. West made a motion to move to close session to discuss 5(b) and (c), Dr. Park seconded the motion, All
192 in Favor, motion passes. ----Closed Session begins.
193

194 Motion: Dr. Moore made a motion to come back into session, Dr. Lee seconded, Comment Mr. Su made a
195 preliminary statement the board went into closed session pursuant to NRS 241.015, No further discussion, All in
196 favor, Motion passes and the meeting is back in open session.
197

198 Mr. DiMaggio took Roll Call, all board members are present.

199 Motion was made by Dr. Lee to approve issuance by the Board of the three subpoenas to entities A,B, and
200 C pursuant to the Board's previous authorized investigation of Dr. Z. and Ms. Arias seconded, no discussion,
201 all in favor, Motion passes.
202

203 Dr. Park made comment that there has been inappropriate communications directly to board members
204 regarding Dr. Z case trying to influence individual board members.

205 Mr. Su has stated it is highly inappropriate for these types of communication and asked for it to stop.
206
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219 *c. **Review, consideration, and possible approval/rejection of the Board's delegation of authority**
 220 **to the Secretary-Treasurer to authorize the issuance of, and sign on behalf of the Board, any**
 221 **additional subpoenas, as needed, pursuant to the Board's previously Authorized Investigation**
 222 **of Dr. Z regarding whether Dr. Z met the requirements of NRS 631.271 for limited licensure**
 223 **and/or to authorize the issuance of, and sign on behalf of the Board, any additional**
 224 **subpoenas pertaining to any future hearing that may be held as a result of the Board's**
 225 **previously Authorized Investigation of Dr. Z – NRS 631.630(4); NRS 631.190(2)**

226 (For Possible Action)

227
 228 Mr. Su states that the board can delegate its authority in this agenda item regarding Dr. Z for this authorized
 229 investigation.

230
 231 Dr. Moore asked does the Board require a statute or regulation on who can do subpoenas; do we have the
 232 authority to issue subpoenas?

233
 234 Mr. Su responded that is permissible for the board to approve subpoenas regarding this matter in the future.

235
 236 Motion: Dr. Thompson made a motion to approve the Board's delegation of authority to the Board's
 237 Secretary-Treasurer as more specifically set forth in Agenda Item (5)(c). Ms McIntyre seconded the motion,
 238 no discussion, all in favor, Motion passes.

239
 240 Mr. DiMaggio clarified the vote.
 241

242 *d. **Consideration, review, and possible approval/rejection of Stipulation Agreements – NRS**
 243 **622A.170; 622.330** (For Possible Action)

244
 245 (1) Wyatt Dannels, DDS

246
 247 Mr. Su went over stipulation agreement.

248 Motion: Dr. West to approve the stipulation regarding Wyatt Dannels, DDS, Dr. Lemon seconded the motion,
 249 Dr. Lee recuse, Ms. McIntyre recuse. Motion passes.

250
 251 *e. **Request to Reconsider or Amend the Advisory Opinion issued by the Board on October 20,**
 252 **2020 regarding whether dental healthcare provider can instruct parent/guardian to apply**
 253 **single unit dose of fluoride varnish to their child's teeth through a synchronous teledentistry**
 254 **platform – NAC 631.279; NAC 631.220(2)** (For Possible Action)

255
 256 (1) David Lee, DMD

257 Advisory opinion issuance date was corrected to October 8, 2020.

258 Dr. Lee made a statement regarding (5)(e). Fluoride is prescription strength and needs to be administered by
 259 a healthcare professional. Dr. Lee is looking for clarification on tele health and tele dentistry. Does the tele
 260 health umbrella under NRS 629 suffice for tele dentistry?

261 Dr. West has concerns re fluoride application to patients with decay issues.

262 Dr. Thompson agrees there needs to be more clarification. The Board needs to have more regulations, and
 263 Dr. Thompson is in favor with letting the advisory opinion stand and working on more details.

264 Ms. Arias agrees that there needs to be more clarification.

265 Dr. Lee states allergies are a concern.

266 Motion: Dr. West made a motion to continue on with the advisory opinion as it is stated right now and
 267 forward the matter to the Legislative Committee to look into tele dentistry as a whole and forming up the
 268 regulations so that it is more clear.

269 Dr. Moore read MSDS stating that fluoride needs to be administered by healthcare provider and asked
 270 whether to address this in the motion?

271 Dr. West would like to keep his motion as stated, with the advisory opinion standing as is until June 2022.

272 Mr. DiMaggio clarified the motion.

273 Dr. West confirms his motion as stated, with advisory opinion standing as is until June 2022.

274 Dr. Moore seconded the motion.

275 Dr. Lemon says we need to listen to the healthcare providers that are using the tele dentistry.

276 All in favor, Motion passes

277 ***6. Old Business:** (For Possible Action)

278
279 ***a. Review and discussion for possible decision regarding Dr. Craig Morris' request for**
280 **reactivation of suspended/revoked license, including, but not limited to, review and**
281 **discussion of terms and conditions of, and compliance with, the January 24, 2014 Stipulation**
282 **Agreement**

283 (For Possible Action)

284
285 (1) Craig S. Morris, DDS

286
287 Mr. Su went over item (6)(a) giving a brief history of the case. Dr. Morris did not fulfill his January 24, 2014
288 stipulations in full. i.e CE units.

289 Dr. Park asked Mr. DiMaggio if he checked if Dr. Morris was in good standing in other states?

290 Mr. DiMaggio said in short No. he stated that Dr. Morris is licensed in California and was licensed In the state
291 of Texas and checked with Texas dental board and that he surrendered his license in 2016. Dr. Morris
292 notified California that his license had been suspended and re-instated, however they are not aware that his
293 license had been revoked for non-renewal.

294
295 Dr. Morris was invited to participate in the meeting.

296 Board members were invited to ask questions.

297
298
299 Dr. Thompson asked if Dr. Morris informed the State of Texas of the incidents. Dr. Morris said the state of Texas
300 let him know that an investigation could be brought upon him. He ultimately surrendered his license to avoid
301 investigation.

302 Ms. Solie asked if he had been practicing currently in the area? Dr. Morris said he is practicing in a very
303 limited capacity in California. Dr. Morris said he holds a general anesthesia license in California.

304 Dr. Lee asked Dr. Morris if he took all his CE's and if he had documentation to support his claim.

305 Mr. Su read the stipulation to Dr. Morris and asked if he met his requirements? Dr. Morris said he did his best to
306 meet the requirement and has tried to comply with every request. Dr. Morris said he will do anything the
307 Board requests.

308 Dr. Thompson said this is as serious as it gets; it was all spelled out in the written stipulation and Dr. Morris did
309 not comply.

310 Motion Dr. Thompson made a motion to deny the request of reactivation of Dr. Morris' dental License, Dr.
311 West seconded the motion, no further discussion, all in favor, no opposition, motion passes.

312
313 ***7. New Business:** (For Possible Action)

314
315 ***a. Public Hearing: Notice of Intent to Act Upon – NAC 631.2270, et seq.** (For Possible Action)

316
317 **The purpose of the Hearing is to receive comments from all interested persons regarding the**
318 **adoption of the following proposed temporary regulations that pertain to Chapter 631 of the**
319 **Nevada Administrative Code. The topics and revisions are regarding the following:**

320
321 (1) Administration of Vaccinations by Licensed Dental Professionals (NAC 631.2270, et seq.)

322
323 Mr. Su invites public comment:

324 Jessica Woods RDH asked how does this relate to bill AB 269?

325 No further public comment
 326 Motion: Dr. Lee made a motion to approve and adopt temporary regulations regarding administration of
 327 vaccinations by licensed dental professionals, Ms. Arias seconded the motion, no further discussion, all in
 328 favor, motion passes.
 329 //
 330 //

331 ***b. Discussion, consideration and possible appointments of Dental Review Panel alternate**
 332 **members** – (NRS 631.3635) (For Possible Action)
 333

- 334 (1) Yamilka Arias, RDH
 335 (2) Joan Landron, DMD
 336

337 Dr. Lee made the motion to approve and appointment of Yamilka Arias RDH and Joan Landron DMD as
 338 Review Panel alternate members. Dr. Moore seconded the motion, there was no further discussion, all in
 339 favor, motion passes.

340 ***c. Review, discussion, and possible approval/rejection of the Continuing Education**
 341 **Committee's recommendation to extend temporary approval and acceptance of the**
 342 **successful completion of non-patient based Western Regional Examination Board (WREB)**
 343 **exam for dental licensure, for issuance of a temporary unrestricted dentist license, from**
 344 **current June 30, 2021 deadline to June 30, 2022** – NRS 631.240 (For Possible Action)
 345

346 Mr. DiMaggio briefly went over item (7)(c).
 347 Dr. Moore made a motion to approve item # (7)(c) as it is written. Dr. Park seconded the motion, there was
 348 no further discussion, all in favor, motion passes.

349 ***d. Review, discussion, and possible approval/rejection of the Continuing Education**
 350 **Committee's recommendation to extend temporary approval and acceptance of the**
 351 **successful completion of Western Regional Examining Board's (WREB) Objective Structured**
 352 **Clinical Examination (OSCE) exam for dental hygiene licensure, for issuance of a temporary**
 353 **unrestricted dental hygiene license, from current June 30, 2021 deadline to June 30, 2022** –
 354 NRS 631.300 (For Possible Action)

355 Mr. DiMaggio gave a brief description of item (7)(d).
 356 Dr. Moore made a motion to approve item (7)(d) as written, Dr. Lemon seconded the motion, all in favor,
 357 motion passes.
 358

359 ***e. Review, discussion, and possible approval/rejection of the Continuing Education Committee's**
 360 **recommendation to extend temporary approval and acceptance of the successful completion of**
 361 **restorative procedures in the American Board of Dental Examiners' (ADEX) exam for dental licensure to be**
 362 **completed either on a live patient or the CompeDonttooth, for issuance of a temporary unrestricted dentist**
 363 **license, from current June 30, 2021 deadline to June 30, 2022** – NRS 631.240 (For Possible Action)
 364

365 Mr. DiMaggio gave a brief description of item (7)(e).
 366 Dr. Moore made a motion to approve (7)(e) as it is written, Dr. Lee seconded the motion, all in favor, no
 367 further discussion, motion passes.
 368
 369

370 ***f. Review, discussion, and possible approval/rejection of the Continuing Education**
 371 **Committee's recommendation to extend temporary approval and acceptance of the**
 372 **successful completion of use of manikins by the American Board of Dental Examiners (ADEX)**
 373 **for the Dental Periodontal Scaling Exercise portion of the ADEX dental exam for issuance of a**
 374 **temporary unrestricted dentist license and for the ADEX dental hygiene clinical examination**
 375 **for issuance of a temporary unrestricted dental hygiene license, from current June 30, 2021**
 376 **deadline to June 30, 2022** – NRS 631.240 and 631.300 (For Possible Action)

377 Mr. DiMaggio gave a brief description of item (7)(f).

378 Dr. Moore made a motion to approve (7)(f) as it is written, Ms. Arias seconded the motion, no further
 379 discussion, all in favor, motion passes.

380 //

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 383 //
 384 //
 385 //

***g. Review, discussion, and possible approval/rejection of the Continuing Education Committee's recommendation to supplement, amend, and/or modify the Board's Memorandum dated July 14, 2020, regarding the "Suspension of Certain Licensure Provisions Pursuant to the Governor's Declaration of Emergency Directive 011", to allow and permit dental school graduates of the class of 2020 and 2021 and dental hygiene school graduates of the class of 2020 and 2021 to apply for a temporary license (subject to supervision by supervising dentist) – NRS 631.240 and 631.300 (For Possible Action)**

393
 394 Mr. DiMaggio gave a brief description of item (7)(g).

395 Dr. Moore made a motion to approve (7)(g) as written, Dr. Lee seconded the motion, no further discussion,
 396 all in favor, motion passes.
 397
 398

***h. Review, discussion, and possible approval/rejection of the Continuing Education Committee's recommendation to approve changes to examination adopted at the 16th Annual 'Virtual' Meeting of the American Board of Dental Examiners (ADEX) – NRS 631.240 and NAC 631.090 (For Possible Action)**

- 399
 400
 401
 402
 403
 404 (1) Changes to 2021 and 2022 ADEX Dental Examination
 405 (2) Changes to 2021 and 2022 (if any) ADEX Dental Hygiene Examination
 406

407 Mr. DiMaggio gave a brief description of item (7)(h).

408 Dr. Moore made a motion to approve (7)(h) as written, Dr. Lee seconded the motion, no further discussion,
 409 all in favor, motion passes.

***i. Review, discussion, and possible approval/rejection of Nevada licensed dentists and hygienists being allowed to fulfill Continuing Education requirements live or on-line from March 1, 2020 through ninety (90) days after the Governor of the State of Nevada rescinds the declared state of emergency an end of the pandemic for Covid-19 – NAC 631.173:**
 (For Possible Action)

410
 411
 412
 413
 414
 415
 416 Mr. DiMaggio gave a brief description of item (7)(i).

417 Dr. Moore made a motion to approve (7)(i) as written, Dr. Lee seconded the motion, no further discussion,
 418 all in favor, motion passes.

419 Ms. Spilsbury wanted clarification regarding time/date limits for the CE extension. Dr. Moore gave
 420 clarification he stated that courses can be live or online. This includes dentists also.

421 Dr. Park asked to have this posted on the Board's website.
 422

***j. Consideration, discussion, and possible approval/rejection to authorize the Board's Executive Director to interview and hire a full-time Deputy General Counsel at a salary range determined by the Board – NRS 631.190 (For Possible Action)**

423
 424
 425
 426
 427 Mr. DiMaggio gave a brief description of item (7)(j).

428 Dr. Lee made a motion to approve (7)(j) as written with a salary range of \$63,000 to \$73,000. Dr. West
 429 seconded the motion, no further discussion, all in favor, motion passes.

430 Dr. Thompson voiced concern of having 3 attorneys and its effect on the budget.

431 Dr. West agrees that we need to be caught up.

432 Dr. Park asked how far backlogged are we?

433 Mr. Su replied there a lot of regulations that need to done.

434 Ms. Solie asked do we need to hire additional investigators or can another deputy general counsel do this?

435 Mr. Su replied another Deputy General Counsel would be able to support that aspect as well.

436 No further discussion, all in favor, Motion passes.

437
438 ***k. Approval/rejection of Temporary Anesthesia Permits – NAC 631.2254** (For Possible Action)
439

440 (1) Jerome C Cutler, DDS – Moderate Sedation (patients 13 years of age & older)

441 Dr. Moore made a motion to approve the temporary anesthesia permit for Dr. Cutler. Dr. Thompson
442 seconded the motion, all in favor, motion passes.

443
444 ***i. Approval/rejection of Permanent Anesthesia Permits – NAC 631.2235** (For Possible Action)
445

446 (1) Arlisha J Hicks, DDS – Moderate Sedation (pediatric specialty)

447 (2) Jacqueline A Alford, DDS – Moderate Sedation (pediatric specialty)

448 (3) David S Stoker, DDS – General Anesthesia

449 (4) Sudheer J Surpure, DDS, MD – General Anesthesia

450
451
452 Dr. Moore made a motion to approve permanent anesthesia Permits for Dr. Alisha Hicks, Dr. Jaqueline
453 Alford, Dr. David Stoker and Dr. Sudheer Surpure, Dr. Lee seconded the motion, no further discussion, all in
454 favor , motion passes.

455
456 **m. Consideration, review, and discussion of cardiopulmonary resuscitation (CPR) certification**
457 **requirement pursuant to NAC 631.173** (For Informational Purposes)
458

459 Mr. DiMaggio gave a brief description of item (7)(m) . (This is Informational only)

460 Dr. Thompson asked if this applies to ACLS?

461 Dr. Moore stated that the agenda item being discussed was for CPR only. On the next meeting ACLS and
462 PALS will be added to the Board agenda as action items.
463

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

469
470 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
471 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov,
472 or by mailing/faxing written messages to the Board office. Written submissions should be received by the Board on or before
473 **Monday, March 15, 2021 by 4:00 p.m.** in order to make copies available to members and the public.
474

475 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,
476 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
477 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,
478 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.
479

480 Mr. DiMaggio read live public comment guidelines.

481
482 Public comment from: Ms. Chandler, Future Smiles, wanted to thank Dr. Lemon for suggesting reaching out
483 to providers currently utilizing tele health and wanted the board to know the uptick in decay rate and
484 endodontic care for children during the pandemic.
485

486 Public comment from phone number ending in 9461: Dr. Joseph Wineman said that there is a typographical
487 error for item (7)(e). and referenced Governor Sisolak directive 011
488

489 Public comment from Jennifer Henderson RDH: appreciates all the comments regarding tele health.
490

491 Public comment from AntonioVentura: Minutes of January 5th meeting have a typo; under new business,
492 CDC recommendation Level 3 mask and a face shield not a level 3 face mask or face shield .

493 Mr. Ventura is concerned some of the motions are unclear and asked that Mr. DiMaggio clarify some of the
494 motions for the public.

495 **9. Announcements**

496 There were no announcements to be made.

497 //

498
499 ***10. Adjournment** (For Possible Action)
500

501 Dr. Thompson made a motion to adjourn, Ms. Cioffi seconded the motion, all in favor, motion passes.
502

PUBLIC NOTICE POSTED TO:

Nevada State Board of Dental Examiners website: www.dental.nv.gov

Nevada Public Posting Website: www.notice.nv.gov

Legislative Counsel Bureau website: www.leg.state.nv.us

DRAFT

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506

Agenda Item 4 (a):

Minutes - Infection Control Committee Meeting 03/31/2021

Nevada State Board of Dental Examiners



6010 S. Rainbow Blvd., Bldg. A, Ste.1 • Las Vegas, NV 89118 • (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

NOTICE OF AGENDA & TELECONFERENCE MEETING for the INFECTION CONTROL COMMITTEE

(Elizabeth Park, DDS (Chair); Ronald Lemon, DDS; Caryn Solie, RDH; Adam York, DDS)

Meeting Date & Time

Wednesday, March 31, 2021
6:00 p.m.

**This meeting will be held exclusively through teleconference means,
in accordance with Emergency Directives issued by Governor Sisolak**

Teleconference Number: (669) 900 6833

Teleconference ID#: 971 4555 6430

Teleconference Passcode: 256293

PUBLIC NOTICE:

**** This meeting will be held via TELECONFERENCE ONLY, pursuant to Section 1 of the DECLARATION OF EMERGENCY DIRECTIVE 006 ("DIRECTIVE 006") issued by the State of Nevada Executive Department and as extended by Directives 016, 018, 021, 026, and 029. There will be no physical location for this meeting****

Public Comment by pre-submitted email/written form, only, is available after roll call (beginning of meeting); **Live Public Comment by teleconference** is available prior to adjournment (end of meeting). Live Public Comment is limited to three (3) minutes for each individual.

Pursuant to Section 2 of Directive 006, members of the public may participate in the meeting by submitting public comment in written form to: **Nevada State Board of Dental Examiners, 6010 S. Rainbow Blvd, A-1, Las Vegas, Nevada 89118; FAX number (702) 486-7046; e-mail address nsbde@nsbde.nv.gov**. Written submissions received by the Board on or before **Tuesday, March 30, 2021 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 6010 S Rainbow Blvd, Ste. A-1, Las Vegas, Nevada.

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.

///

///

48 **1. Call to Order**

49 - Roll call/Quorum

50
51 Mr. DiMaggio performed roll call and all were present. There is a quorum.

Dr. Park-----PRESENT	
Dr. Lemon-PRESENT	
Ms. Solie---PRESENT	
Dr. York-----PRESENT	

52
53
54 Other individuals present at meeting, Executive Director Mr. DiMaggio, General Counsel Mr. Su

55
56 **2. Public Comment (By pre-submitted email/written form):** The public comment period is limited to matters
57 specifically noticed on the agenda. No action may be taken upon the matter raised during public comment unless the matter
58 itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3)
59 minutes as a reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson
60 may allow additional time at his/her discretion.

61
62 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
63 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov,
64 or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Tuesday, March 30,**
65 **2021 by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received
66 prior to the adjournment of the meeting will be included in the permanent record.

67
68 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual,
69 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
70 Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious,
71 slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

72
73 There was no written public comment.

74
75 ***3. Chairwoman's Report:** *Elizabeth Park, DDS* (For Possible Action)

76 There was no Chairwomen's report.

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

78 There were no items to be removed from the agenda.

79
80 ***b. Approve Agenda** (For Possible Action)

81 Chairwoman Park called for a motion to approve the agenda. Dr. Lemon made a motion to approve the
82 agenda, Dr. York seconded the motion, there was no discussion, all in favor, and motion passes.

83
84
85 ***4. New Business:** (For Possible Action)

86 ***a. Consideration and Discussion to recommend Approval/Rejection of part-time Infection**
87 **Control Inspector Employee to the Board** (For Possible Action)

88 (1) Chi P Wu, RDH

89 Dr. Wu was not initially on the phone call to participate in the committee meeting.

90 Dr. Wu joined the meeting later.

91 Chairwoman Park asked about Dr. Wu's background in infection control

92 Mr. DiMaggio stated that the board had checked all databases regarding Dr. Wu and there were no
93 complaints and prior disciplinary actions against him.

94 Dr. Park asked how long he had been practicing in Southern Nevada and asked if it was 5 years.

95 Dr. Wu stated that he has been practicing chiropractic for 7 years and dental hygiene since 2009.

96 Mr. Su asked Dr. Wu if he is under investigation in any other jurisdiction at this time?

97 Dr. Wu replied no.

98 Chairwoman Park asked if Dr. Wu had read the board material regarding OSAP training.

99 Dr. Wu replied he had not.

100 Ms. Solie made a motion to approve Dr. Wu as a part-time infection control inspector of the board.

101 Chairwoman Park seconded the motion. Chairwomen Park asked why he switched his profession from
102 chiropractic to dental hygiene and Dr. Wu stated that he likes to do different things and that he get bored
103 doing the same things over and over.

104 Chairwoman Park asked how many days a week he practices hygiene and Dr. Wu replied that he temps so
105 not a lot. He does not have a set schedule. Chairwoman Park called for a vote. All in favor, motion passes.

106

107

108 ***b. Consideration and Discussion of training/costs regarding training offered by the Organization**
109 **for Safety Asepsis and Prevention (OSAP)-DALE and whether to recommend**
110 **Approval/Rejection of the OSAP-DALE training as part of the Calibration Process for Infection**
111 **Control Inspectors Employees to the Board** (For Possible Action)

112

113 Chairwoman Park stated that she attended the OSAP Boot Camp.

114 Chairwoman Park asked how old is our video. Mr. DiMaggio stated that the video was made in
115 2011.

116 Ms. Spilsbury verified that the video is from 2011.

117 Dr. York asked if OSAP would replace our video. Dr. Park said yes.

118 Chairwoman Park stated that we don't have a calibration for infection control.

119 Ms. Solie agrees with Dr. Park regarding shortcomings of infection control.

120 Chairwoman Park read a statement regarding OSAP.

121 Ms. Solie asked about a group discount for boards as a possibility.

122 Dr. Lemon asked if the training was specific to dentistry.

123 Chairwoman Park said that the training was specific to dentistry.

124 Ms. Solie asked if the Board could consider sending a group of inspectors to go every year to
125 OSAP training.

126 Ms. Spilsbury stated that the training was informative.

127 Dr. York stated that he was totally in favor of the OSAP training and also asked how many
128 inspectors we have at the present time.

129 Ms. Spilsbury stated that we currently have 17 inspectors and possibly 18 if Chi P. Wu, RDH was
130 approved from the agenda. There are a few part time inspectors who are not actively doing
131 inspections due to COVID-19.

132 Dr. Lemon asked a ball park figure of the cost per employee to attend the OSAP training.

133 Mr. DiMaggio replied it is \$305 per inspector, if we did 17 inspectors it would be \$5185.

134 What is the calibration assurance that they would calibrated after taking the OSAP course.

135 Chairwoman Park stated she was not tested on the course when she attended it.

136 There are 8 inspectors in southern Nevada and 9 in Northern Nevada and 2 non active.

137 Dr. York made a motion to recommend to the full board the OSAP training course. Ms. Solie
138 seconded the motion. There were no additional questions or comments. All in favor, the motion
139 passes.

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144 //

145
 146 **5. Public Comment (Live public comment by teleconference):** This public comment period is for any matter that is
 147 within the jurisdiction of the public body. No action may be taken upon the matter raised during public comment unless the matter itself
 148 has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a
 149 reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson may allow additional
 150 time at his/her discretion.

151 Pursuant to Section 2 of Directive 006, and extended by Directives 016, 018, 021, 026, and 029, members of the public may
 152 participate in the meeting without being physically present by submitting public comment via email to nsbde@nsbde.nv.gov, or by
 153 mailing/faxing written messages to the Board office. Written submissions should be received by the Board on or before **Tuesday,**
 154 **March 30, 2021 by 4:00 p.m.** in order to make copies available to members and the public.

155 In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual, the
 156 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
 157 State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous,
 158 offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.
 159

160 Ms. Ledena Brooke made a public comment that she in favor of doing OSAP training.
 161

162 There are no further public comments.
 163

164 **6. Announcements**

165 There were no announcements made.
 166
 167
 168

169 ***7. Adjournment** (For Possible Action)

170 Dr. Lemon moved to adjourn the meeting, Dr. York seconded the motion. All in favor, motion passes
 171
 172
 173

174 **PUBLIC NOTICE POSTED TO:**

175 Nevada State Board of Dental Examiners website: www.dental.nv.gov
 176 Nevada Public Posting Website: www.notice.nv.gov

Agenda Item 6 (a) and (b):

Contract Amendment Form - Lewis Roca Rothgerber LLC

CETS #:	
Solicitation #:	

AMENDMENT # 1**TO CONTRACT FOR SERVICES OF INDEPENDENT CONTRACTOR**

Between the State of Nevada
Acting By and Through Its

Agency Name:	Nevada State Board of Dental Examiners
Address:	6010 S. Rainbow Blvd., Ste. A-1
City, State, Zip Code:	Las Vegas, NV 89118
Contact:	Frank DiMaggio, Executive Director
Phone:	(702)486-7044
Fax:	(702)486-7046
Email:	fdimaggio@nsbde.nv.gov

Contractor Name:	Lewis Roca Rothgerber Christie, LLP
Address:	3993 Howard Hughes Parkway, Suite 600
City, State, Zip Code:	Las Vegas, NV 89169
Contact:	Ogonna M. Brown, Esq.
Phone:	(702)474-2622
Fax:	(702)949-8398
Email:	obrown@lrrc.com

1. **AMENDMENTS.** For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract approved by the Board of Examiners on January 26, 2021, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:
- A. Provide a brief explanation for contract amendment.**
Additional legal work is required which will exceed the previously approved contract amount due to the recent issuance of subpoenas, scheduled depositions, responses to discovery requests, and preparation for and participation in an upcoming formal Board hearing as well as for matters pertaining to a related District Court case.
- B. Current Contract Language:**
In relevant part, Paragraph 6. Consideration
Total Contract Not to Exceed: \$45,425.00
- C. Amended Contract Language:**
In relevant part, Paragraph 6. Consideration
Total Contract Not to Exceed: \$73,925.00

CETS #:	
Solicitation #:	

2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.
3. **REQUIRED APPROVAL.** This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

DRAFT

CETS #:	
Solicitation #:	

Independent Contractor's Signature

Date

Independent Contractor's Title

State of Nevada Authorized Signature

Date

Title

State of Nevada Authorized Signature

Date

Title

State of Nevada Authorized Signature

Date

Title

APPROVED BY BOARD OF EXAMINERS

Signature – Board of Examiners

On: _____

Date

Approved as to form by:

On: _____

Deputy Attorney General for Attorney General

Date

Agenda Item 6 (d)

Statutes and Regulations:

NRS 631.265 & NAC 631.2211-NAC 631.2256

NRS 631.265 Permit to administer or supervise administration of general anesthesia, minimal sedation, moderate sedation or deep sedation; regulations.

1. No licensed dentist or person who holds a restricted license issued pursuant to [NRS 631.275](#) may administer or supervise directly the administration of general anesthesia, minimal sedation, moderate sedation or deep sedation to dental patients unless the dentist or person has been issued a permit authorizing him or her to do so by the Board.

2. The Board may issue a permit authorizing a licensed dentist or person who holds a restricted license issued pursuant to [NRS 631.275](#) to administer or supervise directly the administration of general anesthesia, minimal sedation, moderate sedation or deep sedation to dental patients under such standards, conditions and other requirements as the Board shall by regulation prescribe.

(Added to NRS by [1983, 278](#); A [1989, 1740](#); [2001, 2692](#); [2015, 3876](#))

NAC 631.2211 Scope; restrictions on administration of oral medication. ([NRS 631.190, 631.265](#))

1. [NAC 631.2213](#) to [631.2256](#), inclusive, do not apply to the administration of:

(a) Local anesthesia;

(b) Nitrous oxide-oxygen analgesia, if the delivery system for the nitrous oxide-oxygen contains a mechanism which guarantees that an oxygen concentration of at least 25 percent will be administered to the patient at all times during the administration of the nitrous oxide; and

(c) Oral medication that is administered to a patient to relieve anxiety in the patient, if the medication is not given in a dosage that is sufficient to induce in a patient a controlled state of depressed consciousness or unconsciousness similar to the state produced pursuant to the administration of general anesthesia, deep sedation or moderate sedation.

2. Any oral medication administered as described in paragraph (c) of subsection 1 must not be combined with the administration of any other method of sedation, including, without limitation, nitrous oxide-oxygen analgesia. A single dosage of a single sedative agent administered must be appropriate for anxiolysis. The dosage of enteral drugs must not be more than the maximum recommended dosage that can be prescribed for unmonitored home use.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2212 Board to determine degree of sedation. ([NRS 631.190, 631.265](#)) In a proceeding of the Board at which the Board must determine the degree of sedation or level of consciousness of a patient, the Board will base its findings on:

1. The type and dosage of medication that was administered or is proposed for administration to the patient; and

2. The degree of sedation or level of consciousness that should reasonably be expected to result from that type and dosage of medication.

(Added to NAC by Bd. of Dental Exam'rs by R005-99, eff. 9-7-2000)

NAC 631.2213 Permit required; qualifications of applicants. ([NRS 631.190, 631.265](#))

1. Except as otherwise set forth in [NAC 631.2211](#) to [631.2256](#), inclusive, no dentist may:

(a) Use general anesthesia or deep sedation for dental patients, except in a facility for which a permit is held as required by [NRS 449.442](#), unless he or she first:

(1) Obtains a general anesthesia permit; or

(2) Employs a dentist who is licensed in this State and who holds a general anesthesia permit to administer general anesthesia to his or her patients, and obtains a certificate of site approval for each location at which general anesthesia, deep sedation or moderate sedation is administered to his or her patients;

(b) Use moderate sedation for dental patients who are 13 years of age or older, except in a facility for which a permit is held as required by [NRS 449.442](#), unless he or she first:

(1) Obtains a general anesthesia permit or a moderate sedation permit pursuant to paragraph (a) of subsection 2; or

(2) Employs a dentist who is licensed in this State and who holds a general anesthesia permit or a moderate sedation permit pursuant to paragraph (a) of subsection 2 to administer moderate sedation to his or her patients who are 13 years of age or older, and obtains a certificate of site approval for each location at which moderate sedation is administered to his or her patients who are 13 years of age or older; or

(c) Use moderate sedation for dental patients who are 12 years of age or younger, except in a facility for which a permit is held as required by [NRS 449.442](#), unless he or she first:

(1) Obtains a moderate sedation permit pursuant to paragraph (b) of subsection 2; or

(2) Employs a dentist who is licensed in this State and who holds a general anesthesia permit or a moderate sedation permit pursuant to paragraph (b) of subsection 2 to administer moderate sedation to his or her patients who are 12 years of age or younger, and obtains a certificate of site approval for each location at which moderate sedation is administered to his or her patients who are 12 years of age or younger.

2. To obtain a general anesthesia permit or moderate sedation permit, a dentist must apply to the Board for such a permit on a form prescribed by the Board, submit any fees that are set by the Board pursuant to [NRS 631.345](#) and produce evidence showing that he or she is a dentist who is licensed in this State, and:

(a) For a moderate sedation permit to administer moderate sedation to a patient 13 years of age or older, the applicant must show evidence of:

(1) The completion of a course of study, subject to the approval of the Board, of not less than 60 hours dedicated exclusively to the administration of moderate sedation, and the successful administration as the operator of moderate sedation to not less than 20 patients; or

(2) The completion of a program for specialty training which is approved by the Commission on Dental Accreditation of the American Dental Association and which includes education and training in the administration of moderate sedation that is equivalent to the education and training described in subparagraph (1) and:

(I) Valid certification in Advanced Cardiac Life Support by the American Heart Association; or

(II) The completion of a course approved by the Board that provides instruction on medical emergencies and airway management.

(b) For a moderate sedation permit to administer moderate sedation to a patient 12 years of age or younger, the applicant must show evidence of:

(1) The completion of a course of study, subject to the approval of the Board, of not less than 60 hours dedicated exclusively to the administration of moderate sedation to patients 12 years of age or younger, and the successful administration as the operator of moderate sedation to not less than 25 patients who are 12 years of age or younger; or

(2) The completion of a program for specialty training which is approved by the Commission on Dental Accreditation of the American Dental Association and which includes education and training in the administration of moderate sedation that is equivalent to the education and training described in subparagraph (1) and:

(I) Valid certification in Pediatric Advanced Life Support by the American Heart Association; or

(II) The completion of a course approved by the Board that provides instruction on medical emergencies and airway management.

(c) For a general anesthesia permit, the applicant must show evidence of the completion of an Advanced Cardiac Life Support course given by the American Heart Association or a course providing similar instruction that is approved by the Board, and:

(1) The completion of a program, subject to the approval of the Board, of advanced training in anesthesiology and related academic subjects beyond the level of undergraduate dental school in a training program as described in the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, published by the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611, and available, free of charge, at the Internet address

http://www.ada.org/~media/ADA/Education%20and%20Careers/Files/ADA_Sedation_Teaching_Guidelines.pdf?la=en; or

(2) The completion of a graduate program in oral and maxillofacial surgery or dental anesthesiology which has been approved by the Commission on Dental Accreditation of the American Dental Association.

3. A holder of a general anesthesia permit may administer general anesthesia, deep sedation or moderate sedation to a patient of any age.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R159-08, 4-23-2009; R004-17, 5-16-2018)

NAC 631.2217 Review of holder of permit; renewal of permit. ([NRS 631.190](#), [631.265](#))

1. The holder of a general anesthesia permit or moderate sedation permit is subject to review by the Board at any time.

2. Each general anesthesia permit and moderate sedation permit must be renewed annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the permit.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R158-08, 12-17-2008; R004-17, 5-16-2018)

NAC 631.2219 Inspection and evaluation; renewal of permit; reevaluation of credentials. ([NRS 631.190](#), [631.265](#))

1. The Board will require an inspection and evaluation of the facility, equipment, personnel, records of patients and the procedures used by every dentist who seeks or holds a general anesthesia permit or moderate sedation permit, and of the dentist himself or herself, before issuing such an original permit to the dentist, and at least once in every 5-year period thereafter.

2. The Board will renew general anesthesia permits and moderate sedation permits annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the permit, unless the holder is informed in writing, 60 days before the date for renewal, that a reevaluation of his or her credentials is required. In determining whether reevaluation is necessary, the Board will consider, among other factors, complaints by patients and reports of adverse occurrences. A reevaluation will, if appropriate, include an inspection of the facility, equipment, personnel, records of patients and the procedures used by the holder, and an examination of his or her qualifications.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A 7-30-84; R005-99, 9-7-2000; R158-08, 12-17-2008; R004-17, 5-16-2018)

NAC 631.2221 Inspections and evaluations: Qualifications of inspectors and evaluators; authorized participation by members of Board. ([NRS 631.190](#), [631.265](#))

1. When an inspection or evaluation is required to issue or renew a general anesthesia permit or moderate sedation permit, the Board may designate two or more persons, each of whom holds a general anesthesia permit or moderate sedation permit and has practiced general anesthesia, deep sedation or moderate sedation, as applicable, for a minimum of 3 years preceding his or her appointment, exclusive of his or her training in the administration of

anesthesia or sedation. At least one of the inspectors or evaluators must have had experience in the evaluation of dentists using general anesthesia, deep sedation or moderate sedation, as applicable. At least one member of the inspection or evaluation team must have had substantial experience in the administration of the type of anesthesia or sedation contemplated for use by the dentist being evaluated and must hold the type of permit for which the dentist is applying.

2. Any member of the Board who is a dentist may observe or consult in any inspection or evaluation. A member of the Board who is not a dentist may be present at an observation but may not participate in any grading or evaluation resulting from the inspection or evaluation.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A 7-30-84; R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2223 Inspections and evaluations: General requirements. ([NRS 631.190](#), [631.265](#)) An inspection or evaluation ordered by the Board must be conducted in all offices where general anesthesia, deep sedation or moderate sedation is to be administered and, except as otherwise required in [NAC 631.2236](#), must consist of:

1. An evaluation of the office's facilities and equipment, records and emergency medications; and
2. A demonstration of:
 - (a) The administration to a patient who is receiving dental treatment of the type of anesthesia or sedation for which the dentist is applying for a permit;
 - (b) Simulated emergencies in the surgical area of the dental office with participation by the members of the staff who are trained to handle emergencies;
 - (c) A dental procedure utilizing the type of anesthesia or sedation for which the dentist is applying for a permit;
 - (d) Any anesthesia or sedation technique that is routinely employed during the administration of anesthesia or sedation;
 - (e) The appropriate monitoring of a patient during anesthesia or sedation; and
 - (f) The observation of a patient during recovery and the time allowed for recovery.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2225 Inspections and evaluations: Minimum standards for simulated emergencies. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit or moderate sedation permit must meet the following minimum standards with regard to simulated emergencies. The dentist and his or her

staff must demonstrate a knowledge of and a method of treatment for the following types of emergencies:

1. Airway obstruction laryngospasm;
2. Bronchospasm;
3. Emesis and aspiration of foreign material under anesthesia;
4. Angina pectoris;
5. Myocardial infarction;
6. Hypotension;
7. Hypertension;
8. Cardiac arrest;
9. Allergic reaction;
10. Convulsions;
11. Hypoglycemia;
12. Asthma;
13. Respiratory depression;
14. Overdose from local anesthesia;
15. Hyperventilation syndrome; and
16. Syncope.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2227 Inspections and evaluations: Minimum standards for 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, 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;

(i) A pulse oximeter; and

(j) A capnography monitor.

↳ Except as otherwise provided in subsection 8, a dentist's office inspected or evaluated for the issuance or renewal of a moderate sedation permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e), (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.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2229 Inspections and evaluations: Minimum standards for records of patients. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, 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, records of physical evaluation and American Society of Anesthesiologists acuity classification.
2. Records of the administration of anesthesia must include:
 - (a) The patient's 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.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2231 Inspections and evaluations: Maintenance of emergency drugs. ([NRS 631.190](#), [631.265](#))

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, 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:

- (a) Vasopressor;
- (b) Corticosteroid;
- (c) Bronchodilator;
- (d) Muscle relaxant;
- (e) Intravenous medication for the treatment of cardiopulmonary arrest;
- (f) Appropriate drug antagonist;
- (g) Antihistaminic;
- (h) Anticholinergic;
- (i) Antiarrhythmic;
- (j) Coronary artery vasodilator;
- (k) Anti-hypertensive; and
- (l) Anti-convulsive.

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 moderate sedation permit is not required to maintain the emergency drugs described in paragraphs (d), (e), (i) and (k) of subsection 1.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2235 Inspections and evaluations: Grading; report of recommendation of evaluator; issuance of permit for passing; failure to pass; request for reevaluation; issuance of order for summary suspension. ([NRS 631.190](#), [631.265](#))

1. The persons performing an inspection or evaluation of a dentist and his or her office for the issuance or renewal of a general anesthesia permit or moderate sedation permit shall grade the dentist as passing or 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 pursuant to subsection 3:

(a) Must cease the administration of any general anesthesia, deep sedation or moderate sedation until the dentist has obtained the general anesthesia permit or moderate sedation permit, as applicable; and

(b) May, within 15 days after receiving the notice, request the Board in writing for a reevaluation. The request for a reevaluation must state specific grounds supporting it.

5. If the reevaluation is granted by the Board, it will be conducted by different persons in the manner set forth by [NAC 631.2219](#) to [631.2231](#), inclusive, for an original evaluation.

6. No dentist who has received a notice of failing an inspection or evaluation from the Board may request more than one reevaluation within any period of 12 months.

7. Pursuant to subsection 3 of [NRS 233B.127](#), if an inspection or evaluation of a dentist or his or her office indicates that the public health, safety or welfare imperatively requires emergency action, the President of the Board may, without any further action by the Board, issue an order of summary suspension of the license of the dentist pending proceedings for revocation

or other action. An order of summary suspension issued by the President of the Board must contain findings of the exigent circumstances which warrant the issuance of the order of summary suspension. The President of the Board shall not participate in any further proceedings relating to the order.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2236 Certificate of site approval: Application; inspection; report of determination of inspector; issuance of certificate for passing; failure to pass; request for reevaluation; issuance of order for summary suspension. ([NRS 631.190](#), [631.265](#))

1. A dentist who is licensed in this State may employ a dentist who is licensed in this State and who holds a general anesthesia permit or moderate sedation permit to administer general anesthesia, deep sedation or moderate sedation, as appropriate, to his or her patients at his or her office if he or she holds a certificate of site approval issued pursuant to this section.

2. A dentist who is licensed in this State and who desires to receive or renew a certificate of site approval must submit to the Board:

(a) An application for a certificate or for the renewal of a certificate, in a form approved by the Board;

(b) The fee for the inspection of a facility which is established by the Board pursuant to [NRS 631.345](#); and

(c) Written documentation which demonstrates that the dentist who is to be employed to administer the general anesthesia, deep sedation or moderate sedation holds an appropriate permit issued by the Board to administer such anesthesia or sedation.

3. Upon receipt of an application pursuant to this section, the Board will appoint one of its members or a representative of the Board to inspect the office of the applicant to determine whether the office complies with the requirements set forth in [NAC 631.2227](#), [631.2229](#) and [631.2231](#). The person conducting the inspection shall report his or her determination to the Board.

4. If the person conducting the inspection determines that the office of the applicant complies with the requirements of [NAC 631.2227](#), [631.2229](#) and [631.2231](#) and the applicant has otherwise met the requirements of this section, the Executive Director shall issue a certificate of site approval to the applicant.

5. A holder of a certificate of site approval shall maintain the information described in paragraph (c) of subsection 2 at his or her office at all times.

6. If the office of the applicant does not meet the requirements set forth in [NAC 631.2227](#), [631.2229](#) and [631.2231](#), the Executive Director shall issue a written notice to the licensed dentist

who owns the dental practice conducted at the office that identifies the reasons the office failed the inspection.

7. A dentist who has received a notice of failure from the Executive Director pursuant to subsection 6:

(a) Must cease the administration of any general anesthesia, deep sedation or moderate sedation at his or her office until the Board has issued a certificate of site approval for the office; and

(b) May, within 15 days after receiving the notice, request the Board in writing for a reevaluation.

8. If the reevaluation is granted by the Board, it will be conducted by different persons in the manner set forth by [NAC 631.2227](#), [631.2229](#) and [631.2231](#) for an original inspection.

9. Pursuant to subsection 3 of [NRS 233B.127](#), if an evaluation or inspection of a dentist's office indicates that the public health, safety or welfare imperatively requires emergency action, the President of the Board may, without any further action by the Board, issue an order of summary suspension of the license of the dentist who owns the dental practice conducted at the office and the licenses of any or all of the other licensees employed at the office pending proceedings for revocation or other action. An order of summary suspension issued by the President of the Board must contain findings of the exigent circumstances which warrant the issuance of the order of summary suspension. The President of the Board shall not participate in any further proceedings relating to the order.

10. Each certificate of site approval issued by the Board must be renewed annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the certificate.

11. The Board may reinspect the office of the holder of a certificate of site approval at any time.

(Added to NAC by Bd. of Dental Exam'rs by R005-99, eff. 9-7-2000; A by R231-03, 5-25-2004; R158-08, 12-17-2008; R159-08, 4-23-2009; R004-17, 5-16-2018)

NAC 631.2237 Written consent and medical history of patient required before administration of anesthetic or sedation. ([NRS 631.190](#), [631.265](#))

1. Written consent of the patient must be obtained before the administration of a general anesthetic, deep sedation or moderate sedation, unless the dentist determines that an emergency situation exists in which delaying the procedure to obtain the consent would likely cause permanent injury to the patient. 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 taken before the administration of a general anesthetic, deep sedation or moderate sedation. 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 to give other information that may be helpful to the person administering the anesthetic or sedation. The dentist is not required to make a complete medical examination of the patient and draw medical diagnostic conclusions. If a dentist 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 any general anesthetic, deep sedation or moderate sedation, and this record must be a permanent part of the patient's record of treatment.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2239 Properly equipped facility required; qualifications of auxiliary personnel. ([NRS 631.190](#), [631.265](#))

1. A dentist using general anesthesia, deep sedation or moderate sedation shall maintain a properly equipped facility for the administration of the anesthesia or sedation which is staffed with supervised auxiliary personnel who are capable of reasonably handling procedures, problems and emergencies incident thereto.

2. A dentist using general anesthesia, deep sedation or moderate sedation shall ensure that his or her auxiliary personnel are certified in basic cardiopulmonary resuscitation by the American Heart Association or a course providing similar instruction approved by the Board.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.224 Employment of certified registered nurse anesthetist to administer anesthesia or sedation; restrictions on allowing persons to administer treatment. ([NRS 631.190](#), [631.265](#))

1. Any dentist who holds a general anesthesia permit pursuant to the provisions of [NAC 631.2211](#) to [631.2256](#), inclusive, may employ a certified registered nurse anesthetist to administer the general anesthesia, deep sedation or moderate sedation to a patient if the dentist is physically present and directly supervises the administration of the general anesthesia, deep sedation or moderate sedation to the patient. The holder of the permit must maintain at his or her office evidence in writing that the certified registered nurse anesthetist is licensed to practice in the State of Nevada and maintains unrestricted active staff privileges within the department of anesthesiology at a hospital or surgical center for which a permit is held as required by [NRS 449.442](#).

2. Except as otherwise provided in [NAC 631.2236](#), a dentist who does not hold a general anesthesia permit may not allow any person to administer general anesthesia, deep sedation or

moderate sedation to his or her patients unless the treatment is rendered within a facility for which a permit is held as required by [NRS 449.442](#).

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-7-85; A by R005-99, 9-7-2000; R159-08, 4-23-2009; R004-17, 5-16-2018)

NAC 631.2241 Submission of report of injuries to patients; revocation of permit authorized for failure to report. ([NRS 631.190](#), [631.265](#)) Each holder of a general anesthesia permit, moderate sedation permit or certificate of site approval shall submit to the Board a complete report regarding any mortality or unusual incident which occurs outside a facility for which a permit is held as required by [NRS 449.442](#) and which results in permanent physical or mental injury to a patient or requires the hospitalization of a patient, as a direct result of the administration of general anesthesia, deep sedation or moderate sedation. The report must be submitted within 30 days after the date of the incident. If a dentist fails to report any incident as required by this section, his or her permit may be revoked.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R159-08, 4-23-2009; R004-17, 5-16-2018)

NAC 631.2254 Temporary permits. ([NRS 631.190](#), [631.265](#))

1. The Board may grant a temporary permit to administer general anesthesia and deep sedation or a temporary permit to administer moderate sedation to an applicant who meets the qualifications for a permit to administer that type of anesthesia or sedation pursuant to [NAC 631.2213](#).

2. A temporary permit is valid for not more than 90 days, but the Board may, in any case it deems appropriate, grant a 90-day extension of the permit.

3. The Board may require the holder of a temporary permit to pass an on-site inspection as a condition of retaining the permit. If the holder fails the inspection, his or her permit will be revoked. In case of revocation, the holder of a temporary permit may apply to be reinspected in accordance with the procedures set forth in [NAC 631.2235](#).

(Added to NAC by Bd. of Dental Exam'rs, eff. 11-28-90; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

NAC 631.2256 Continuing education required. ([NRS 631.190](#), [631.265](#), [631.342](#)) Every 2 years, the holder of a general anesthesia permit or moderate sedation permit must complete at least 6 hours in courses of study that specifically relate to anesthesia or sedation, as applicable, before the permit may be renewed. This training will be credited toward any continuing education required by [NAC 631.173](#).

(Added to NAC by Bd. of Dental Exam'rs, eff. 11-28-90; A by R005-99, 9-7-2000; R004-17, 5-16-2018)



Nevada State Board of Dental Examiners

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GENERAL ANESTHESIA INSPECTION AND EVALUATION REPORT

<input type="checkbox"/> SITE/ADMINISTRATOR EVALUATION <input type="checkbox"/> SITE ONLY INSPECTION			
Name of Practitioner:	Proposed Dates:		
Location to be Inspected:	Telephone Number:		
Date of Evaluation:	Time of Evaluation:		
	<table border="1"> <tr> <td>Start Time:</td> <td>Finish Time:</td> </tr> </table>	Start Time:	Finish Time:
Start Time:	Finish Time:		

Evaluators

1.
2.
3.

INSTRUCTIONS FOR COMPLETING GENERAL ANESTHESIA INSPECTION AND EVALUATION FORM:

1. Prior to inspection/evaluation, review criteria and guidelines for General Anesthesia (GA) Inspection and Evaluation in the Examiner Manual.
2. Each evaluator should complete a GA Site/Administrator Evaluation or Site Only Inspection form independently by checking the appropriate answer box to the corresponding question or by filling in a blank space.
3. After answering all questions, each evaluator should make a separate overall "pass" or "fail" recommendation to the Board. "Fail" recommendations must be documented with a narrative explanation.
4. Sign the inspection/evaluation report and return to the Board office within **72 hours** after inspection/evaluation has been completed.

SITE INSPECTION

OFFICE FACILITIES AND EQUIPMENT (NAC 631.2227) <u>ALL</u> operatories used must meet criteria	YES	NO
1. Operating Room		
a. Is operating room large enough to adequately accommodate the patient on a table or in an operating chair?		
b. Does operating room permit an operating team consisting of at least three individuals to freely move about the patient?		
2. Operating Chair or Table		
a. Does operating chair or table permit the patient to be positioned so the operating team can maintain the airway?		
b. Does operating chair or table permit the team to quickly alter the patient's position in an emergency?		
c. Does operating chair or table provide a firm platform for the management of cardiopulmonary resuscitation?		
3. Lighting System		
a. Does lighting system permit evaluation of the patient's skin and mucosal color?		
b. Is there a battery powered backup lighting system?		
c. Is backup lighting system of sufficient intensity to permit completion of any operation underway at the time of general power failure?		
4. Suction Equipment		
a. Does suction equipment permit aspiration of the oral & pharyngeal cavities airway?		
b. Is there a backup suction device available which can operate at the time of general power failure?		
5. Oxygen Delivery System		
a. Does oxygen delivery system have adequate full face masks and appropriate connectors and is capable of delivering oxygen to the patient under positive pressure?		
b. Is there an adequate backup oxygen delivery system which can operate at the time of general power failure?		
6. Recovery Area (Recovery area can be operating room)		
a. Does recovery area have available oxygen?		
b. Does recovery area have available adequate suction?		
c. Does recovery area have adequate lighting?		
d. Does recovery area have available adequate electrical outlets?		

SITE INSPECTION

OFFICE FACILITIES AND EQUIPMENT (NAC 631.2227) <u>ALL</u> operatories used must meet criteria (continued)	YES	NO
7. Ancillary Equipment <i>Must be</i> in Good Operating Condition?	YES	NO
a. Are there oral airways?		
b. Is there a tonsillar or pharyngeal type suction tip adaptable to all office <i>suction</i> outlets?		
c. Is there a sphygmomanometer and stethoscope?		
d. Is there adequate equipment for the establishment of an intravenous infusion?		
e. Is there a pulse oximeter?		
f. A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs?		
g. Endotracheal tubes and appropriate connectors?		
h. An endotracheal tube type forcep?		
i. An electrocardioscope and defibrillator?		
j. A capnography monitor		

DRUGS	DRUG NAME	EXPIRES	YES	NO
1. Vasopressor drug available?				
2. Corticosteroid drug available?				
3. Bronchodilator drug available?				
4. Appropriate drug antagonists available?				
5. Antihistaminic drug available?				
6. Anticholinergic drug available?				
7. Coronary artery vasodilator drug available?				
8. Anticonvulsant drug available?				
9. Oxygen available?				
10. Muscle relaxant?				
11. Antiarrhythmic?				
12. Antihypertensive?				
13. Intravenous medication for the treatment of cardiopulmonary arrest?				

SITE INSPECTION

RECORDS – Are the following records maintained?	YES	NO
1. An adequate medical history of the patient?		
2. An adequate physical evaluation of the patient?		
3. Includes American Society of Anesthesiologist physical status classification?		
4. Anesthesia records show patient's vital signs?		
5. Anesthesia records listing the drugs administered, amounts administered, and time administered?		
6. Anesthesia records reflecting the length of the procedure?		
7. Anesthesia records reflecting any complications of the procedure, if any?		
8. Written informed consent of the patient, or if the patient is a minor, his or her parent or guardian's consent for administration of anesthesia?		
	YES	NO
Is there general anesthesia or moderate sedation administered at the dentist office to a patient of 12 years of age or younger (if yes, complete section below)		
ADDITIONAL EQUIPMENT FOR 12 YEARS OF AGE AND YOUNGER	YES	NO
1. Bag valve mask with appropriate size masks		
2. Appropriate size blood pressure cuffs		
3. A laryngoscope complete with an adequate selection of blades for use on patients 12 years of age and younger		
4. Appropriately sized endotracheal tubes and appropriate connectors		
5. Appropriate pads for use with an electrocardioscope and defibrillator		
6. Small oral and nasal airways		
ADDITIONAL EMERGENCY DRUGS FOR 12 YEARS OF AGE AND YOUNGER	Yes	NO
1. Appropriate dosages of epinephrine or a pediatric epinephrine auto-injector		
ADDITIONAL RECORDS FOR 12 YEARS OF AGE AND YOUNGER	Yes	NO
1. Anesthesia/Sedation Records reflecting monitoring of patient that is consistent with the guidelines of the American Academy of Pediatric Dentistry		

SITE INSPECTION RESULTS

Evaluator Overall Recommendation of Site Inspection <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Pass Pending*

**If Pass Pending, please list all deficiencies*

Comments: _____

Signature of Evaluator

Date

THIS CONCLUDES THE SITE INSPECTION REPORT.

FOR AN EVALUATION OF AN ADMINISTERING PERMIT, CONTINUE TO NEXT SECTION.

EVALUATION

<i>DEMONSTRATION OF GENERAL ANESTHESIA / DEEP SEDATION</i>	YES	NO
1. Who administered General Anesthesia? Dentist's Name: _____		
2. Was case demonstrated within the definition of general anesthesia?		
3. While anesthetized was patient continuously monitored during the procedure with a pulse oximeter and other appropriate monitoring equipment?		
4. Was the patient monitored while recovering from anesthesia? Monitored by whom: _____ Title: _____		
5. Is this person a licensed health professional experienced in the care and resuscitation of patients recovering from general anesthesia?		
6. Were personnel competent <i>and knowledgeable of equipment operation and location</i> ?		
7. Are all personnel involved with the care of patients certified in basic cardiac life support?		
8. Was dentist able to perform the procedure without any action or omission that could have resulted in a life threatening situation to the patient?		
4. What was the length of the case demonstrated? _____		

<i>SIMULATED EMERGENCIES</i> – Was dentist and staff able to demonstrate knowledge and ability in recognition and treatment of:	YES	NO
1. Laryngospasm?		
2. Bronchospasm?		
3. Emesis and aspiration of foreign material under anesthesia?		
4. Angina pectoris?		
5. Myocardial infarction?		
6. Hypotension?		
7. Hypertension?		
8. Cardiac arrest?		
9. Allergic reaction?		
10. Convulsions?		

<i>SIMULATED EMERGENCIES</i> – Was dentist and staff able to demonstrate knowledge and ability in recognition and treatment of: (continued)	YES	NO
11. Hypoglycemia?		
12. Asthma?		
13. Respiratory depression?		
14. Local anesthesia overdose?		
15. Hyperventilation syndrome?		
16. Syncope?		

Evaluator Overall Recommendation of Evaluation	
<input type="checkbox"/> Pass	<input type="checkbox"/> Fail

Comments: _____

Signature of Evaluator

Date



Nevada State Board of Dental Examiners

6010 S. Rainbow Blvd., Bldg. A, Ste. 1
Las Vegas, NV 89118
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

MODERATE SEDATION INSPECTION AND EVALUATION REPORT

<input type="checkbox"/> ON-SITE/ADMINISTRATOR EVALUATION	<input type="checkbox"/> SITE ONLY INSPECTION
Name of Practitioner:	Proposed Dates:
Location to be Inspected:	Telephone Number:
Date of Evaluation:	Time of Evaluation/Inspection: Start Time: _____ Finish Time: _____

Evaluators

1.
2.
3.

INSTRUCTIONS FOR COMPLETING MODERATE SEDATION ON-SITE INSPECTION AND EVALUATION FORM:

1. Prior to evaluation, review criteria and guidelines for Moderate Sedation (MS) On-Site/Administrator and Site Only Inspection in the Examiner Manual.
2. Each evaluator should complete a MS On-Site/Administrator or Site Only Inspection report independently by checking the appropriate answer box to the corresponding question or by filling in a blank space.
3. After answering all questions, each evaluator should make a separate overall "pass" or "fail" recommendation to the Board. "Fail" recommendations must be documented with a narrative explanation.
4. Sign the report and return to the Board office within **72 hours** after evaluation has been completed.

SITE INSPECTION

OFFICE FACILITIES AND EQUIPMENT	YES	NO
1. Operating Room		
a. Is operating room large enough to adequately accommodate the patient on a table or in an operating chair?		
b. Does the operating theater permit an operating team consisting of at least three individuals to freely move about the patient?		
2. Operating Chair or Table		
a. Does operating chair or table permit the patient to be positioned so the operating team can maintain the airway?		
b. Does operating chair or table permit the team to quickly alter the patient's position in an emergency?		
c. Does operating chair or table provide a firm platform for the management of cardiopulmonary resuscitation?		
3. Lighting System		
a. Does lighting system permit evaluation of the patient's skin and mucosal color?		
b. Is there a battery powered backup lighting system?		
c. Is backup lighting system of sufficient intensity to permit completion of any operation underway at the time of general power failure?		
4. Suction Equipment		
a. Does suction equipment permit aspiration of the oral and pharyngeal cavities?		
b. Is there a backup suction device available which can operate at the time of General power failure?		
5. Oxygen Delivery System		
a. Does oxygen delivery system have adequate full face masks and appropriate connectors and is capable of delivering oxygen to the patient under positive pressure?		
b. Is there an adequate backup oxygen delivery system which can operate at the time of general power failure?		
6. Recovery Area (Recovery area can be operating room)		
a. Does recovery area have available oxygen?		
b. Does recovery area have available adequate suction?		
c. Does recovery area have adequate lighting?		
d. Does recovery area have available adequate electrical outlets?		
7. Ancillary Equipment <i>Must be</i> in Good Operating Condition		
a. Are there oral airways?		
b. Is there a tonsillar or pharyngeal type suction tip adaptable to all office suction outlets?		
c. Is there a sphygmomanometer and stethoscope?		
d. Is there adequate equipment for the establishment of an intravenous infusion?		
e. Is there a pulse oximeter?		

SITE INSPECTION

<i>DRUGS</i>	DRUG NAME	EXPIRES	YES	NO
1. Vasopressor drug available?				
2. Corticosteroid drug available?				
3. Bronchodilator drug available?				
4. Appropriate drug antagonists available?				
5. Antihistaminic drug available?				
6. Anticholinergic drug available?				
7. Coronary artery vasodilator drug available?				
8. Anticonvulsant drug available?				
9. Oxygen available?				

<i>RECORDS</i> – Are the following records maintained?	YES	NO
1. An adequate medical history of the patient?		
2. An adequate physical evaluation of the patient?		
3. Sedation records show patient's vital signs?		
4. Includes American Society of Anesthesiologists physical status classification?		
5. Sedation records listing the drugs administered, amounts administered, and time administered?		
6. Sedation records reflecting the length of the procedure?		
7. Sedation records reflecting any complications of the procedure, if any?		
8. Written informed consent of the patient, or if the patient is a minor, his or her parent or guardian's consent for sedation?		

	YES	NO
Is there moderate sedation administered at the dentist office to a patient of 12 years of age or younger (if yes, complete section below)		
ADDITIONAL EQUIPMENT FOR 12 YEARS OF AGE AND YOUNGER	YES	NO
1. Bag valve mask with appropriate size masks		
2. Appropriate size blood pressure cuffs		
3. Appropriate size oral and nasal airways		
ADDITIONAL EMERGENCY DRUG FOR 12 YEARS OF AGE AND YOUNGER	Yes	NO
1. Appropriate dosages of epinephrine or a pediatric epinephrine auto-injector		
ADDITIONAL RECORDS FOR 12 YEARS OF AGE AND YOUNGER	Yes	NO
1. Sedation records reflecting monitoring of patient that is consistent with the guidelines of the American Academy of Pediatric Dentistry		

Evaluator Overall Recommendation of Site Inspection <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Pass Pending*		
--	--	--

****If Pass Pending, please list all deficiencies***

Comments: _____

 Signature of Evaluator

 Date

THIS CONCLUDES THE SITE INSPECTION REPORT.

FOR AN EVALUATION OF AN ADMINISTERING PERMIT, CONTINUE TO NEXT SECTION.

EVALUATION

<i>DEMONSTRATION OF MODERATE SEDATION</i>	YES	NO
1. Who administered moderate sedation? Dentist's Name: _____		
2. Was sedation case demonstrated within the definition of moderate sedation?		
3. While sedated, was patient continuously monitored during the procedure with a pulse oximeter?		
4. Was the patient monitored while recovering from sedation? Monitored by whom: _____		
5. Is this person a licensed health professional experienced in the care and resuscitation of patients recovering from moderate sedation?		
6. Were personnel competent?		
7. Are all personnel involved with the care of patients certified in basic cardiac life support?		
8. Was dentist able to perform the procedure without any action or omission that could have resulted in a life threatening situation to the patient?		
9. What was the length of the case demonstrated? _____		
<i>SIMULATED EMERGENCIES</i> – Was dentist and staff able to demonstrate knowledge and ability in recognition and treatment of:	YES	NO
1. Laryngospasm?		
2. Bronchospasm?		
3. Emesis and aspiration of foreign material under anesthesia?		
4. Angina pectoris?		
5. Myocardial infarction?		
6. Hypotension?		
7. Hypertension?		
8. Cardiac arrest?		
9. Allergic reaction?		
10. Convulsions?		
11. Hypoglycemia?		
12. Asthma?		
13. Respiratory depression?		
14. Local anesthesia overdose?		
15. Hyperventilation syndrome?		
16. Syncope?		

Evaluator Overall Recommendation of Evaluation	
<input type="checkbox"/> Pass	<input type="checkbox"/> Fail

Comments: _____

Signature of Evaluator

Date

Agenda Item 6 (e):
Modification of NAC 631.173

NAC 631.173 Continuing education: Required hours; types of courses and activities; approval of provider or instructor. ([NRS 631.190](#), [631.342](#))

1. Each dentist licensed to practice in this State must annually complete at least 20 hours of instruction in approved courses of continuing education or biennially complete at least 40 hours of instruction in approved courses of continuing education, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the dentist. Hours of instruction may not be transferred or carried over from one licensing period to another.
2. Each dental hygienist licensed to practice in this State must annually complete at least 15 hours of instruction in approved courses of continuing education or biennially complete at least 30 hours of instruction in approved courses of continuing education, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the dental hygienist. Hours of instruction may not be transferred or carried over from one licensing period to another.
3. In addition to the hours of instruction prescribed in subsections 1 and 2, each dentist and dental hygienist must maintain current certification in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life. Any course taken pursuant to this subsection must be taught by a certified instructor.
4. Any provider of or instructor for a course in continuing education relating to the practice of dentistry or dental hygiene which meets the requirements of this section must be approved by the Board, unless the course is for training in cardiopulmonary resuscitation or is approved by:
 - (a) The American Dental Association or the societies which are a part of it;
 - (b) The American Dental Hygienists' Association or the societies which are a part of it;
 - (c) The Academy of General Dentistry;
 - (d) Any nationally recognized association of dental or medical specialists;
 - (e) Any university, college or community college, whether located in or out of Nevada; or
 - (f) Any hospital accredited by The Joint Commission.
5. To be approved as a provider of a course in continuing education, the instructor of the course must complete a form provided by the Board and submit it to the Board for review by a committee appointed by the Board not later than 45 days before the beginning date of the course. Upon receipt of the form, the committee shall, within 10 days after receiving the form, approve or disapprove the application and inform the applicant of its decision.

6. Study by group may be approved for continuing education if the organizer of the group complies with the requirements of subsection 5 and furnishes the Board with a complete list of all members of the group, a synopsis of the subject to be studied, the time, place and duration of the meetings of the group, and the method by which attendance is recorded and authenticated.
7. Credit may be allowed for attendance at a meeting or a convention of a dental and dental hygiene society.
8. Credit may be allowed for courses completed via home study, on-line study, self-study or journal study which are taught through correspondence, webinar, compact disc or digital video disc.
9. Credit may be allowed for dental and dental hygiene services provided on a voluntary basis to nonprofit agencies and organizations approved by the Board.

UPDATED: Interim Guidance on Card Extensions during COVID-19 Outbreak



American
Heart
Association.

CPR & EMERGENCY CARDIOVASCULAR CARE

July 23, 2020

Dear Global AHA Training Network,

The AHA continues to monitor the COVID-19 pandemic and the ability of Training Centers to conduct training while providing a variety of flexible options for Training Centers. In addition to blended and virtual options outlined here, we are further clarifying the guidance below on card extensions.

- AHA Provider and Instructor cards that expired in March, April, May, and June 2020 can renew their card for up to 120 days from the recommended "Renew By" date on their card. See below for specific recommended renewal and extension dates:

Recommended "Renew By" Date on Card (end of month)	New "Renew By" Due Date with 120-day Extension (end of month)
March 2020	July 2020*
April 2020	August 2020*
May 2020	September 2020
June 2020	October 2020

- Beginning with cards that expire at the end of July, we will resume normal timelines for renewing cards. Those with cards expiring at the end of July should plan to renew their cards by the recommended renewal date on their card (July 2020).
- However, as a special exception, only for those who may be in affected areas with restrictions still in place into July and August, the AHA will allow Training Centers, at their discretion, to consider extending cards that have a "Renew By" date of July or August to no further than October 2020.

**Per the above table, Training Centers in affected areas may extend March and April expired cards that had a new "Renew By" date, if necessary, to no further than October 2020.*

- As always, AHA TCs are responsible for following the instructions from their local government or public health authority as it relates to actions around COVID-19. In accordance with the guidelines released by local government, the leadership of the TC should use discretion to evaluate the risk of disease transmission in their area before organizing any training events and take necessary precautions to avoid transmissions.

The AHA continues to closely monitor the COVID-19 pandemic and evaluate options for delivering resuscitation education while taking the proper precautions. Our top priority is the safety of both AHA Instructors and learners.

We remain committed to serving you as a trusted resource to allow for the continuance of safe, high-quality CPR training, as feasible. Thank you for everything you are doing during this challenging time.

Sincerely,
American Heart Association

UPDATED: Interim Guidance on Card Extensions during COVID-19 Outbreak



CPR & Emergency Cardiovascular Care

March 31, 2020

Purpose: To provide additional flexibility for providers, AHA Instructors, and Instructor candidates during the COVID-19 pandemic. **NOTE:** This guidance on card extensions supersedes the guidance outlined in the March 13, 2020, document, "Interim Guidance on Extensions for AHA Instructor & Provider Cards during COVID-19 Outbreak."

AHA Instructor and Provider Card Extensions

Per the statement regarding further extensions of AHA course completion cards beyond 60 days past the recommended renewal day (in interim guidance released on March 13, 2020), and given the ongoing threat of exposure to COVID-19, with many communities under shelter in place orders to minimize the spread of the disease, the AHA is extending AHA Instructor and Provider Course Completion Cards for 120 days beyond their recommended renewal date, beginning with cards that expire in March 2020.

Please see the AHA's guidance below, and disseminate to anyone who has a business need for this information (e.g., students, employers, medical or safety regulators, etc.).

For Instructor Cards expiring beginning in March 2020:

- AHA Instructor cards will be valid for 120 days beyond their recommended renewal date.
- Instructor candidates will also have 10 months from the completion of their Instructor course to complete monitoring.
- Management of this extension, and any record-keeping, will be the responsibility of the Training Center.

For AHA Provider Cards expiring beginning in March 2020:

- AHA Provider Cards will be valid for 120 days beyond their recommended renewal date.
- Management of this extension, and any record-keeping, will be the responsibility of the Training Center.

AHA Policy on Expired Cards for Update/Renewal Courses:

- Over the next 120 days, for providers whose cards have expired due to inability to complete training during the COVID-19 outbreak, the AHA will allow Instructors to provide remediation during update courses.

Agenda Item 6 (f):

**Adopt and approve Dental Anesthesia, Oral Medicine and
Orofacial Pain by amendment or modification to
NAC 631.190**

NAC 631.190 Specialties. ([NRS 631.190](#), [631.250](#), [631.255](#)) The only specialties for which the Board will issue licenses are:

1. Oral and maxillofacial pathology;
2. Oral and maxillofacial surgery;
3. Orthodontia;
4. Periodontia;
5. Prosthodontia;
6. Pediatric dentistry;
7. Endodontia;
8. Public health; and
9. Oral and maxillofacial radiology.



National Commission on Recognition of Dental Specialties and Certifying Boards

Approved and Adopted by the National Commission on Recognition of Dental Specialties and Certifying Boards.

Dental Anesthesiology: Dental anesthesiology is the specialty of dentistry and discipline of anesthesiology encompassing the art and science of managing pain, anxiety, and overall patient health during dental, oral, maxillofacial and adjunctive surgical or diagnostic procedures throughout the entire perioperative period. The specialty is dedicated to promoting patient safety as well as access to care for all dental patients, including the very young and patients with special health care needs. (Adopted March 2019)

Oral Medicine: Oral Medicine is the specialty of dentistry responsible for the oral health care of medically complex patients and for the diagnosis and management of medically-related diseases, disorders and conditions affecting the oral and maxillofacial region. (Adopted September 2020)

Orofacial Pain: Orofacial Pain is the specialty of dentistry that encompasses the diagnosis, management and treatment of pain disorders of the jaw, mouth, face, head and neck. The specialty of Orofacial Pain is dedicated to the evidencedbased understanding of the underlying pathophysiology, etiology, prevention, and treatment of these disorders and improving access to interdisciplinary patient care. (Adopted September 2020)

Shanna K. Kim, D.D.S.

Diplomate, American Board of Orofacial Pain

Reno, Nevada | [REDACTED] | [REDACTED]

March 23, 2021

Dear Frank DiMaggio,

On March 3, 2020, Orofacial Pain (OFP) was officially recognized as the newest ADA dental specialty by the National Commission on Recognition of Dental Specialties and Certifying Boards. **To maintain alignment with national dental organizations, we respectfully request that the Nevada State Board of Dental Examiners formally recognize orofacial pain as a dental specialty.**

OFP is a branch of dentistry that encompasses the assessment, diagnosis, and management of chronic pain disorders involving structures of the jaw, mouth, and associated head and neck regions. The American Academy of Orofacial Pain (AAOP) attained formal specialty recognition after meeting the American Dental Association (ADA) Requirements for Recognition of Dental Specialties. OFP providers ensure patient access to high quality, evidence-based treatment for a range of debilitating orofacial pain disorders, while also ameliorating issues of chronic pain and opioid abuse, patient disability, and rising healthcare costs.

Background

OFP disorders include, but are not limited to, temporomandibular joint (TMJ) disorders (TMD), jaw movement disorders, neuropathic and neurovascular pain disorders, headache, and sleep disorders. These common and debilitating conditions are highly complex. But because the underlying pathophysiology spans both medicine and dentistry, they are frequently misdiagnosed, undertreated, or incorrectly treated. Moreover, there are very few providers with formal residency training in OFP.

OFP specialists typically undertake 1-3 years of residency training at a Commission of Dental Accreditation (CODA) accredited program. Formally trained OFP specialists become board-certified diplomates by fulfilling the requirements of the American Board of Orofacial Pain (ABOP).

Some dentists without formal OFP training attempt to treat these complex conditions after completion of a rudimentary continuing education course, without a firm background and clinical experience in the treatment of orofacial pain conditions. Due to this lack of expertise, patients frequently suffer from issues of over-treatment and progression of chronic pain conditions.

Dental and medical predoctoral curriculums provide minimal exposure to orofacial pain or sleep disorders. Yet the orofacial region is functionally and neurologically complex and is intimately associated with vital life-sustaining functions such as digestion, verbal and non-verbal communication, appearance, taste, balance, hearing and touch. Ailments in the head and neck can trigger and refer significant pain and dysfunction throughout the vast trigeminal nerve complex. Delays in care or

inappropriate treatment of orofacial pain disorders increases the risk of opioid addiction, mental health disorders, financial strain, and chronic disability. For example, a recent study revealed that full-time employees who suffer from orofacial pain disorders miss more days from work compared to employees who experienced pain in other areas of the body. Since OFP disorders share many known risk factors and medical comorbidities (fibromyalgia, low back pain, depression, hypothyroidism), it is necessary for practitioners to be involved in specialized interdisciplinary collaborative care that orofacial pain specialists provide.

Orofacial Pain and Health Plans

Over the past 40 years, OFP-trained dentists have become an integral part of the healthcare system and reimbursed by medical health plans for effective evidence-based care. Historically, care for orofacial pain disorders has existed in an unrecognized chasm between dentistry and medicine. Several state legislative efforts in the 1980s, mandated all medical health policies, plans, and contracts to specifically include coverage for non-surgical and surgical treatment protocols for orofacial pain disorders, and that all coverage of benefits be the same as that for treatment to any other area of the body. This legislation also mandated coverage of benefits for OFP disorders to equally apply, whether the services and procedures are provided by a licensed physician or dentist. For many years, credentialed OFP specialist providers have utilized the AMA ICD-10/CPT based coding system, employed electronic health records and electronic billing, and have been reimbursed by private sector and government health insurance plans.

On a national level, several efforts have recently clarified the need for increased access to care for orofacial pain disorders.

- *The National Uniform Claim Committee (NUCC)* added the new Taxonomy Code of 1223X22120X to identify OFP Specialist providers on July 1, 2019.
- *The Council on Affordable Quality Healthcare (CAQH)* officially added the OFP Specialty to its recognized list of specialties, contained in its national credentialing system in June 2020.
- *The National Academy of Science, Engineering and Medicine (NASEM)* published a 340-page report in March of 2020, on Temporomandibular Disorders (TMD) and Orofacial Pain (OFP). This consensus report concluded that:
 1. There is a priority need in the US to improve access to care for patients with TMD and OFP disorders, as provided by well-trained dental and medical specialists.
 2. There is a priority need for private sector and government health insurance reimbursement that is consistent with other pain conditions, regardless of whether it is provided by dentists or physicians.
 3. Many providers (including dentists, physicians, and surgeons), continue to rely on high-risk, high-cost invasive dental, medical, or surgical protocols as their first-line treatment, often poorly supported by research. Instead, evidence-based assessment, stabilization and rehabilitation protocols, including intra-oral appliances, physical therapy, health counseling/coaching and self-care training is recommended as the most successful initial approach; this protocol has the least risk and lowest cost.

4. All medical and dental professionals need to improve their recognition, evidence-based assessment, diagnosis, and initial treatment of TMD/OFP disorders, and when indicated, provide referral to Orofacial Pain specialists.
5. Significant increases in National Institutes of Health (NIH) funding for OFP/TMD research and education is recommended to improve understanding, access to care, education and training within the curricula of all medical and dental schools, with expansion of OFP specialty resident/fellowship training programs.

Orofacial Pain in Nevada

While our specialty has received ADA-recognition, OFP specialists still encounter many roadblocks in medical credentialing and reimbursement. We ultimately need assistance and recognition from each state board.

The Nevada State Board of Dental Examiners can serve an important role in improved access to care for patients who suffer from orofacial pain disorders. The recognition of OFP specialists by all state boards is necessary to improve the outcomes of those that suffer from chronic pain conditions. We request that the Nevada State Board of Dental Examiners take the following actions:

- 1) **Recognize orofacial pain as a dental specialty in the state of Nevada.**
 - a) **Issue requirements for OFP specialty education and training for licensure for orofacial pain specialists. These requirements should be consistent with ADA guidelines and include the use of evidence-based assessment, diagnosis, management, and prevention of chronic OFP disorders.**
- 2) **Support professional announcements and marketing by specialists in orofacial pain, consistent with the state board regulations.**
- 3) **Encourage medical health plans that operate in the state to credential orofacial pain specialists.**
 - a) **Require health plans to reimburse covered services and procedures related to the assessment, diagnosis, management, and prevention of orofacial pain disorders, *on an equal basis as physicians.***

In summary, orofacial pain has been an ADA recognized specialty for over a year. We respectfully request that the Nevada State Board of Dental Examiners recognize orofacial pain as a dental specialty in the state of Nevada and assist in insurance credentialing and reimbursement. These actions will allow patients with debilitating chronic orofacial pain disorders access to the most effective, least invasive and most cost-effective interdisciplinary management protocols. Please do not hesitate to contact us if you have any questions.

Sincerely;

A handwritten signature in cursive script that reads "Shanna Kim".

Shanna K. Kim, D.D.S.

Diplomate, American Board of Orofacial Pain

Member, American Board of Orofacial Pain

Member, AAOP Access to Care Committee

Written in collaboration with members and providers of the

American Academy of Orofacial Pain

174 S. New York Avenue

P.O. BOX 478

Oceanville, NJ 08231

Agenda Item 6 (g):

**Ratify approval of the Laser Proficiency program to include
additional instructors**

NAC 631.035

NAC 631.035 Use of laser radiation in practice: Adoption by reference of *Curriculum Guidelines and Standards for Dental Laser Education*. ([NRS 631.190](#))

1. The Board hereby adopts by reference the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by the Academy of Laser Dentistry. The *Curriculum Guidelines and Standards for Dental Laser Education* is available, free of charge, from the Academy of Laser Dentistry:

(a) By mail, at P.O. Box 8667, Coral Springs, Florida 33075;

(b) By telephone, at (954) 346-3776; or

(c) At the Internet address

http://www.laserdentistry.org/prof/edu_curriculumguidelines.cfm.

2. The Board will periodically review the *Curriculum Guidelines and Standards for Dental Laser Education* and determine within 30 days after the review whether any change made to those guidelines and standards is appropriate for application in this State. If the Board does not disapprove a change to an adopted guideline or standard within 30 days after the review, the change is deemed to be approved by the Board.

(Added to NAC by Bd. of Dental Exam'rs by R139-05, eff. 12-29-2005)

Agenda Item 6 (g)(1):
Jennifer Long, RDH Dedicated Dental Hygiene



Nevada State Board of Dental Examiners
6010 S. Rainbow Blvd., Bldg. A, Ste. 1
Las Vegas, NV 89118
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046



CONTINUING EDUCATION PROVIDER APPLICATION

Instructor Name: Kristin Pristavec-Hunter RDH BS

Business Address: [Redacted]

City, State & Zip: [Redacted]

Business Telephone: [Redacted]

Course Title and Objectives [Must relate directly to the practice of dentistry and/or dental hygiene]:

Introduction to Lasers
8 hour lecture combined with hands on instruction of the use of lasers by the dental hygienist

Number of Participants: TBD

Hours of Actual Instruction: 6

Location/Facility Name and Address:

TBD

Date(s) of Course: TBD

Individual Submitting Request: Kristin Pristavec-Hunter RDH BS - Dedicated Dental Hygiene

Business Address: [Redacted]

City, State & Zip: [Redacted]

Business Telephone: [Redacted]

Date of Request: 3/1/2018

[Signature]
Signature of Person Authorized to Represent Course Provider

PLEASE ATTACH NAMES AND BRIEF BIOGRAPHICAL SKETCHES OF INSTRUCTORS AND OUTLINE OF COURSE, INCLUDING METHOD OF PRESENTATION TO THIS FORM.

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE.

Approved by: [Signature] Participants should refer to their regulations to

Number of Hours Approved: 6 ensure compliance of conducting laser

Effective Date of Approval: 03/15/19 services only within their scope of practice.

Disapproved [Explanation]:

c/c visa #19-016



Agenda Item 6 (g)(2):
Janessa Bock, RDH Advanced Dental Hygiene



Nevada State Board of Dental Examiners

6010 S. Rainbow Blvd., Bldg. A, Ste. 1
Las Vegas, NV 89118
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

CONTINUING EDUCATION PROVIDER APPLICATION

Instructor Name: Joy Raslie other instructors Linda Thrice, Heather Ayers, Andree Tesitel
Business Address: [Redacted]
City, State & Zip: [Redacted]
Business Telephone: [Redacted]

Course Title and Objectives [Must relate directly to the practice of dentistry and/or dental hygiene]:

"Diode Laser Training and Certification"
Be Prepared to learn & understand through lecture, discussion, videos and hands-on
participants
• Laser physics and identify which lasers dental hygienists can use
• How to use the laser on your patients and feel comfortable with settings
• The different soft tissue procedures for both dentists & hygienists
• How to discuss the value & benefits of using laser with your patients
• Scope of practice for laser usage
• Demonstrate clinical proficiency using diode lasers

Number of Participants: 15-30
Hours of Actual Instruction: 8
Location/Facility Name and Address: TBD

Date(s) of Course: TBD
Individual Submitting Request: Joy Raslie
Business Address: [Redacted]
City, State & Zip: [Redacted]
Business Telephone: [Redacted]
Date of Request: 2.15.2019

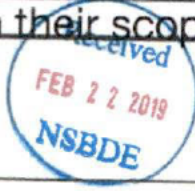
Joy Raslie

Signature of Person Authorized to Represent Course Provider

PLEASE ATTACH NAMES AND BRIEF BIOGRAPHICAL SKETCHES OF INSTRUCTORS AND OUTLINE OF COURSE, INCLUDING METHOD OF PRESENTATION TO THIS FORM.

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE.

Approved by: [Signature] Participants should refer to their regulations to ensure compliance of conducting laser services only within their scope of practice.
Number of Hours Approved: 8
Effective Date of Approval: 03/15/19
Disapproved [Explanation]:



V#5018 #19-017

Agenda Item 6(h):
NAC 631.2254

NAC 631.2254 Temporary permits. ([NRS 631.190](#), [631.265](#))

1. The Board may grant a temporary permit to administer general anesthesia and deep sedation or a temporary permit to administer moderate sedation to an applicant who meets the qualifications for a permit to administer that type of anesthesia or sedation pursuant to [NAC 631.2213](#).
2. A temporary permit is valid for not more than 90 days, but the Board may, in any case it deems appropriate, grant a 90-day extension of the permit.
3. The Board may require the holder of a temporary permit to pass an on-site inspection as a condition of retaining the permit. If the holder fails the inspection, his or her permit will be revoked. In case of revocation, the holder of a temporary permit may apply to be reinspected in accordance with the procedures set forth in [NAC 631.2235](#).

(Added to NAC by Bd. of Dental Exam'rs, eff. 11-28-90; A by R005-99, 9-7-2000; R004-17, 5-16-2018)

Agenda Item 6(i):

**Budget for FYE June 30, 2021 and possible approval/
rejection for proposed budget for FYE June 30, 2021 NRS**

631.190

Nevada State Board of Dental Examiners

Proposed Budget

FYE 6/30/2021

Actual Jul '19 - Jun 20	Increase (Decrease) %	Proposed Budget FYE 2021
----------------------------	--------------------------	-----------------------------

Ordinary Income/Expense

Income

40000 · Dentist Licenses & Fees			
40104 · DDS Retired/Disabled	1,198.61	0%	1,200.00
40100 · DDS Active License Fee	583,893.47	11%	650,000.00
40102 · DDS Inactive License Fee	27,045.82	5%	28,397.00
40135 · DDS Activate/Inactive/Suspend	21,650.00	2%	22,000.00
40136 · DDS Activate Revoked License		100%	500.00
40140 · Specialty License App	17,650.00	2%	18,000.00
40145 · Limited License App	125.00	60%	200.00
40115 · Limited License Renewal Fee	17,525.00	3%	18,000.00
40146 · Limited License-S Application	225.00	100%	450.00
40116 · LL-S Renewal Fee	3,003.30	-50%	1,502.00
40180 · Anesthesia Site Permit App	10,750.00	4%	11,180.00
40182 · CS/GA/Site Permit Renewals	48,030.54	4%	49,951.00
40183 · GA/CS/DS or Site Permit ReInp	17,550.00	3%	18,000.00
40175 · Conscious Sedation Permit Appl	3,500.00	10%	3,850.00
40160 · Conscious Sedation Permit ReInp	2,550.00	10%	2,805.00
40170 · General Anesthesia Permit Appl	9,500.00	6%	10,070.00
40155 · General Anesthesia Permit ReInp	2,050.00	-51%	1,000.00
40186 · Pediatric Anesthesia Permit App	5,000.00	50%	7,500.00
40184 · Infection Control Inspection	13,750.00	1%	13,888.00
40212 · DDS ADEX License Application	34,800.00	3%	35,845.00
40205 · DDS Credential Appl Fee-Spclty	20,400.00	3%	21,000.00
40211 · DDS WREB License Application	79,200.00	-10%	71,280.00
40214 · DDS License by Endorsement	24,000.00	10%	26,400.00
40000 · Dentist Licenses & Fees - Other	1,800.00	0%	1,800.00
Total 40000 · Dentist Licenses & Fees	945,196.74	7%	1,014,818.00

Nevada State Board of Dental Examiners

Proposed Budget

FYE 6/30/2021

	Actual Jul '19 - Jun 20	Increase (Decrease) %	Proposed Budget FYE 2021
50000 · Dental Hygiene Licenses & Fees			
40105 · RDH Active License Fee	244,317.58	6%	260,000.00
40106 · RDH Inactive License Fee	8,605.02	1%	8,700.00
40126 · RDH Reinstate Revoked License	500.00	0%	500.00
40130 · RDH Active/Inactive/Suspend	1,275.00	1%	1,300.00
40110 · RDH LA/N2O Permit Fee	5,475.00	1%	5,525.00
40224 · RDH ADEX License Application	8,400.00	5%	8,800.00
40222 · RDH WREB License Application	29,100.00	10%	32,000.00
40226 · RDH License by Endorsement	18,900.00	1%	19,000.00
50000 · Dental Hygiene Licenses & Fees - Other	3,600.00	0%	3,600.00
Total 50000 · Dental Hygiene Licenses & Fees	320,172.60	6%	339,425.00
50750 · Other Licenses & Fees			
43650 · Reimbursed Investigation Costs	25,689.08	-74%	6,600.00
40229 · CE Course Income	1,900.00	-100%	-
40220 · License Verification Fee	4,925.00	22%	6,000.00
40227 · CEU Provider Fee	4,700.00	100%	6,000.00
40225 · Duplicate License Fee	1,425.00	40%	2,000.00
40185 · Lists/Labels Printed	616.00	6%	650.00
40600 · Miscellaneous Income	185.86	2913%	5,600.00
Total 50750 · Other Licenses & Fees	39,440.94	-32%	26,850.00
Total Income	1,304,810.28	6%	1,381,093.00
Expense			
68001 · CE Class Expenses	530.00	0%	530.00
60500-1 · Bank Service Fees	15.44	1195%	200.00
60500-2 · Merchant Fees	11,696.74	3%	12,000.00
60500 · Bank Charges - Other	150.08	-100%	
68000 · Conferences & Seminars	4,650.00	0%	4,650.00

Nevada State Board of Dental Examiners

Proposed Budget

FYE 6/30/2021

	Actual Jul '19 - Jun 20	Increase (Decrease) %	Proposed Budget FYE 2021
63000 · Dues & Subscriptions	15,011.65	7%	16,000.00
65100 · Furniture & Equipment	15,479.25	29%	20,000.00
65500 · Finance Charges	5.36	-100%	
66500-1 · Liability	5,899.22	-100%	
66500-2 · Workers Compensation	1,462.03	37%	2,000.00
66500 · Insurance - Other	22.08	-100%	
66520-2 · E-mail, Website Services	8,884.44	13%	10,000.00
66520-3 · Internet Services	3,810.33	5%	4,000.00
73500-1 · Computer Repair/Upgrade Licensing Software	5,910.00	577%	40,000.00 5,000.00
66540 · Lab Fee - Non Board Exam	(50.00)	-100%	
66600 · Office Supplies	9,191.45	9%	10,000.00
68710 · Miscellaneous Expenses	258.00	-100%	
68700-1 · Janitorial	6,000.00	0%	6,000.00
68700-2 · Copier Maintenance	3,216.98	1%	3,250.00
68725 · Security	4,927.92	-100%	
68715 · Shredding Services	322.00	9%	350.00
68720 · Utilities	4,574.81	1%	4,600.00
66650 · Office Expense - Other	369.00	-100%	
67000 · Printing	5,431.33	1%	5,500.00
67500 · Postage & Delivery	8,635.35	1%	8,700.00
68500-1 · Equipment Lease	2,397.88	0%	2,400.00
68500-2 · Office	86,628.08	4%	90,000.00
68500-4 · Storage Warehouse Moving Costs	3,374.13	1%	3,400.00 5,500.00
75000-1 · Telephone-Office	2,380.56	5%	2,500.00
75100 · Travel (Staff)	(14.17)	-100%	
73550 · Per Diem (Staff)	37.32	-100%	
73600-1 · Accounting/Bookkeeping	15,345.00	-100%	

Nevada State Board of Dental Examiners

Proposed Budget

FYE 6/30/2021

	Actual Jul '19 - Jun 20	Increase (Decrease) %	Proposed Budget FYE 2021
73600-4 · Legislative Services	41,142.84	-100%	
73600-2 · Legal-General	128,454.29	-53%	60,000.00
73700 · Verification Services	16,306.29	1%	16,400.00
72101 · Executive Director-Wages	166,716.70	-24%	126,715.92
72102 · Exec Dir-Accrued/Used Sickleave	2,058.65	0%	2,058.65
72103 · Exec Dir-Accrued/Used Vacation	1,278.28	0%	1,278.28
72301 · Licensing Specialist-Wages	65,166.29	-13%	56,623.84
72303 · Lic Spec-Accrued/Used Sickleave	1,365.12	0%	1,365.12
72304 · Lic Spec-Accrued/Used Vacation	370.62	0%	370.62
72133 · Admin Assist I-Wages	41,312.43	-2%	40,320.80
72137 · Admin I-Accrued/Used Sickleave	765.95	0%	765.95
72138 · Admin I-Accrued/Used Vacation	128.42	0%	128.42
72201 · Admin Assist II-Wages	50,137.80	-100%	-
72202 · Admin Assist II-OT	35.55	-100%	-
72203 · Admin II-Accrued/Used Sickleave	284.60	-100%	-
72204 · Admin II-Accrued/Used Vacation	663.31	-100%	-
72131 · Administrative-Wages	33,078.09	-3%	31,931.28
72134 · Administrative-OT	78.44	0%	78.44
72135 · Admin-Accrued/Used Sickleave	886.02	0%	886.02
72139 · Admin-Accrued/Used Vacation	(89.41)	-100%	-
72161 · Legal Counsel-Wages	117,390.76	-2%	115,000.08
72162 · Legal-Accrued/Used Sickleave	1,898.56	0%	1,898.56
72163 · Legal-Accrued/Used Vacation	(344.30)	-100%	-
72160 · Legal Counsel - Other	4,110.69	0%	4,110.69
72183 · Investigator-Accr/Used Vacation	417.60	0%	417.60
72182 · Investigator-Accr/Used SL	417.60	0%	417.60
72181 · Investigator - Wages	42,000.00	-50%	21,000.00
Receptionist		100%	23,002.72
Deputy General Counsel		100%	92,157.04

Nevada State Board of Dental Examiners

Proposed Budget

FYE 6/30/2021

	Actual Jul '19 - Jun 20	Increase (Decrease) %	Proposed Budget FYE 2021
Legal Secretary		100%	37,440.00
Administrative Assistant		100%	26,000.00
72010 · Payroll Service Fees	4,128.52	3%	4,250.00
72005 · Payroll Tax Expense	9,253.38	30%	12,000.00
72600 · Retirement Fund Expense (PERS)	101,347.05	9%	110,000.00
65525 · Health Insurance	65,957.66	6%	70,000.00
72000 · Employee Wages & Benefits - Other	34,684.87	5%	36,500.00
72400-1 · Director Stipends	14,450.00	0%	14,500.00
72400-2 · Committee Mtgs-Stipends	4,430.00	2%	4,500.00
72400-3 · Director Travel Expenses	3,396.29	-12%	3,000.00
72400-9 · Refreshments - Board Meetings	1,172.38	2%	1,200.00
72400 · Board of Directors Expense - Other	56.50	-100%	
60001-1 · Evaluator's Fee	5,938.33	380%	28,475.00
60001-4 · Travel/Misc. Expense	1,664.76	32%	2,200.00
73651-3 · Review Panel Misc Expense	93.52	-100%	-
73650-1 · DSO Consulting Fee	7,600.00	-100%	-
73650-2 · DSO Travel/Postage Expense	96.25	-100%	-
73651-1 · Review Panel Fee	2,405.00	149%	6,000.00
73651-2 · Review Panel Travel Expense	249.72	0%	250.00
73650-7 · Miscellaneous Investigation Exp	1,878.77	-100%	
60002-1 · Initial Inspection Expense	3,713.32	48%	5,500.00
60002-2 · Reinspection Expense	333.32	50%	500.00
60002-3 · Random Inspection Expense	150.00	567%	1,000.00
60002-4 · Travel/Misc. Expense	2,133.72	41%	3,000.00
60002 · Infection Control Inspection - Other	(750.00)	-100%	
	<u>1,206,966.81</u>	1%	<u>1,219,822.63</u>
	<u>97,843.47</u>		<u>161,270.37</u>

Agenda Item 6 (j):

Lease regarding office space located 2651 N. Green Valley

Parkway #104.

NRS 631.190

LEASE AGREEMENT

THIS LEASE AGREEMENT (this "**Lease**"), is made by and between the Nevada State Board of Dental Examiners, hereinafter referred to as "**Lessee**," and 2625 GV LLC, hereinafter referred to as "**Lessor**."

WITNESSETH:

WHEREAS, Lessor is the owner of the Premises (defined below in Section 1.1 of this Lease); and

WHEREAS, Lessee desires to lease the Premises for the purposes set forth;

NOW, THEREFORE, Lessor and Lessee, for good and valuable consideration, the sufficiency of which is acknowledged, hereby agree as follows:

1.0 Premises.

1.1 Description of Premises. Lessor hereby leases to Lessee, and Lessee hereby leases from Lessor, upon the terms and conditions herein set forth, that certain real property, and all appurtenances, rights, privileges and easements benefitting, belonging, or pertaining thereto, situated in the County of Clark, State of Nevada, and described as 2651 North Green Valley Parkway, Suite 104, Henderson, Nevada 89014 (the "**Premises**"), which are included in that certain building located at 2651 North Green Valley Parkway, Henderson, Nevada 89014 (the "Building"). The Premises consist of approximately 3,920 rentable square feet, and are depicted in Exhibit A, attached hereto and incorporated herein by this reference. The Premises and the real property on which the Building is located (including any adjacent parking structures and parking areas), are referred to herein collectively as the "**Real Property**." The Real Property is legally described in Exhibit A, which is attached hereto and incorporated herein by this reference.

1.2 Non-Exclusive Use Areas. Lessee shall also have the non-exclusive right to use, and have reasonable ingress and egress to, any and all of the common areas of the Building and Real Property including, without limitation, the following areas: common entrances, common areas, lobbies, elevators, stairways and access ways, hallways, loading and unloading areas, visitor parking areas, ramps, drives, platforms, public restrooms, common walkways, and sidewalks.

1.3 Parking Areas. Lessee shall be entitled to a ratio of 4 parking spaces per every 1,000 SF of leased space of open parking spaces on the Real Property.

2.0 Lease Term.

2.1 The term of this Lease shall be for a period of sixty (60) months, beginning on September 1, 2021 and ending on August 31, 2026 (the "Initial Lease Term").

2.2 Option to Extend. Lessee shall have the option to extend the Lease for two (2) additional years from September 1, 2026 through August 31, 2028, upon the same terms and conditions stated herein (the "Extended Term", and together with the Initial Lease Term the "Lease Term"). Lessee may exercise such option to extend the Initial Lease Term by providing Lessor written notice of the Lessee's intention to exercise its option to extend the Lease at least

thirty (30) days prior to the expiration of the Initial Lease Term. Upon the commencement of the Extended Term, Lessee shall continue to make all payments to Lessor as are required herein, provided however, that as a condition to the extension of the Initial Lease Term, Lessor and Lessee must mutually agree as to the Rent (defined below in Section 3.1) and other charges hereunder that shall be due to Lessor from Lessee.

2.3 Lessor shall deliver possession of the Premises to Lessee on September 1, 2021; provided, however, that possession must not be delivered to Lessee unless and until all Lessee Improvements (defined below in Section 7.1.2 of this Lease) have been fully completed in accordance with the provisions of Section 7.0 of this Lease, below. The date on which possession of the Premises is actually delivered to Lessee shall be referred to as the “**Delivery Date.**”

3.0 Rent.

3.1 Monthly Rent.

3.1.1 Lessor reserves and Lessee agrees to pay as rent for the Premises without notice or demand, monthly rent to the Lessor in the amount of Four Thousand Seven Hundred and Four Dollars and no cents (\$4,704.00) (the “**Monthly Rent**”), payable in advance in on the first day of every month that is included in the Lease Term, commencing September 1, 2021. If any month of the Lease Term is less than a full calendar month, the rent for such month shall be prorated according to the number of days in that month. Base Rent shall be subject to a 3% annual increase beginning September 1, 2022. By way of example, the base rent of \$4,704.00 per month for the first year of this Lease shall be subject to a 3% annual increase resulting in the base rent of \$4,845.12 per month beginning on September 1, 2022 for the second year of this Lease.

3.2 For all purposes under this Lease, “**Rent**” shall mean any and all sums that may become due and payable from Lessee under this Lease. Rent shall be payable to Lessor at the address specified in Section 20 of this Lease, or at such other address as Lessor may from time to time designate in writing.

4.0 Use of the Premises.

4.1 Use. Lessee may use and occupy the Premises for any lawful purpose, including without limitation for office space; storage space; conducting meetings, trainings and educational classes; and any and all other uses related to Lessee’s activities, services, and programming.

4.2 Compliance with Laws. Lessee will conform to and comply with all applicable municipal, state, and federal laws in using the Premises, and will not use or suffer to be used the Premises in any manner in contravention of any applicable municipal, state or federal law, nor in such a manner that will increase the existing rate for property insurance for the Premises. Lessor shall conform to and comply with all applicable municipal, state, and federal regulations and laws in the operation of the Building and Real Property, including without limitation applicable building and seismic codes, OSHA, environmental, zoning and land use laws, and the Americans with Disabilities Act. In addition, the Lessor shall respond in writing to Lessee complaints within five (5) business days after receipt of a written complaint from Lessee, determine the cause of and remedy any building deficiencies and keep records of inspection,

maintenance, and remedial actions and make such records available upon written request to Lessee management and the applicable regulatory agency.

4.3 Hazardous Substances. Lessee shall have no liability for the presence or use of any Hazardous Substance in, on, or about the Premises prior to Lessee's occupancy of the Premises; and neither shall Lessee have any liability for the violation of any Environmental Law related to the Real Property by Lessor or Lessor's agents, employees, or invitees. Lessor specifically warrants to Lessee that, as of the date of this Lease, there are no Hazardous Substances stored, used or deposited in, on, or about the Premises or Real Property except in strict compliance with all applicable Environmental Laws. Lessee may use or locate Hazardous Substances in the Premises to the extent necessary for Lessee's intended use of the Premises. For purposes of this Lease, the following definitions shall apply:

The term "**Hazardous Substance**" shall mean (i) any chemical, compound, material, mixture, or substance that is now or hereafter defined or listed in, or otherwise classified pursuant to, any Environmental Laws as a "hazardous substance", "hazardous material", "hazardous waste", "extremely hazardous waste", "acutely hazardous waste," "radioactive waste", "infectious waste", "bio-hazardous waste", "toxic substance", "pollutant", "toxic pollutant," or "contaminant," as well as any formulation not mentioned herein intended to define, list, or classify substances by reason of deleterious properties such as ignitability, corrosivity, reactivity, carcinogenicity, toxicity, reproductive toxicity, "EP toxicity," or "TCLP toxicity"; (ii) petroleum, natural gas, natural gas liquids, liquified natural gas, synthetic gas usable for fuel (or mixtures of natural gas and such synthetic gas), and ash produced by a resource recovery facility utilizing a municipal solid waste stream, and drilling fluids, produced waters, and other wastes associated with the exploration, development, or production of crude oil, natural gas, or geothermal resources; (iii) "hazardous material" as defined in Nevada Revised Statutes § 459.7024; (iv) "pollutant" and "pollution" as defined in Nevada Revised Statutes §§ 445A.400 and 445A.405, respectively; (v) asbestos in any form; (vi) urea formaldehyde foam insulation; (vii) polychlorinated biphenyls (PCBs); (viii) radon; (ix) pesticides and other poisons; (x) lead, mercury, and other heavy metals; (xi) any other chemical, material, or substance that, because of its quantity, concentration, or physical or chemical characteristics, exposure to which is limited or regulated for health and safety reasons by any Governmental Authority, or which poses a significant present or potential hazard to human health and safety or to the environment if released into the workplace or the environment; and (xii) any substance the presence of which requires remediation or investigation under any federal, state, or local statute, regulation, ordinance, order, action, policy, or common law.

The term "**Governmental Authority**" shall mean the authority of the United States, the State of Nevada, any political subdivision thereof, any city, any county, and any agency, regulatory body, court, central bank, department, commission, board, bureau, or instrumentality of any of them.

The term "**Environmental Laws**" shall mean any and all present and future federal, state, and local laws, ordinances, regulations, permits, guidance documents, policies, and any other requirements of Governmental Authorities relating to health, safety, the environment, or to any Hazardous Substances or Hazardous Substances Activity, including, without limitation, the Comprehensive Environmental Response, Compensation, and Liability Act of 1980, the Resource Conservation Recovery Act, the Hazardous Materials Transportation Act, the Refuse Act, the Toxic Substances Control Act, the Clean Water Act, the Endangered Species Act, the Clean Air Act, the Occupational Health and Safety Act, and the applicable provisions of Chapter

459 of Nevada Revised Statutes and Nevada Revised Statutes Chapter 445, and the rules, regulations, and guidance documents promulgated or published thereunder.

The term "**Hazardous Substance Activity**" shall mean any actual or proposed use, storage, holding, existence, release (including any spilling, leaking, pumping, pouring, emitting, emptying, dumping, disposing into the environment, and the continuing migration into or through soil, surface water, or groundwater), emission, discharge, generation, processing, abatement, removal, disposition, handling, or transportation to or from the Real Property of any Hazardous Substances from, under, in, into, or on the Real Property or surrounding property, including, without limitation, the movement or migration of any Hazardous Substance from surrounding property or groundwater in, into, or onto the Real Property and any residual Hazardous Substance contamination in, on, or under the Real Property.

5.0 Condition of Premises and Repairs.

Subject to the completion of the Lessee Improvements (defined in Section 7.1.2 of this Lease, below) to be provided by Lessor pursuant to the provisions of Section 7.0 of this Lease, below, if any, and subject to any deficiency that is not reasonably realized without Lessee occupying the Premises, Lessee has examined the Premises prior to the execution hereof, knows the condition thereof, and acknowledges that Lessee has received the Premises in good order and condition, and that no representation or warranty as to the condition or repair of the Premises has been made by Lessor. At the expiration of the Lease Term, or any renewal or extension thereof, Lessee will yield up peaceably the Premises, along with any Lessee Improvements, to Lessor in as good order and condition as when the same were entered upon by Lessee, loss by fire or inevitable accident, damage by the elements, and reasonable use and wear excepted. Notwithstanding the foregoing or any provision of this Lease to the contrary, at the expiration of the Lease Term, Lessee may remove any signage installed by Lessee, and any and all equipment or personal property not attached or affixed to the Premises, as set forth in Section 7.4 of this Lease, below.

6.0 Utilities and Maintenance.

6.1 Utilities. All applications and connections for telephone, telecommunication and other utility services for use of the Premises will be made in the name of Lessee only, and Lessee will be solely liable for utility charges as they become due. Electricity to the building is provided via one (1) meter. Each suite is supplied electricity via a dedicated sub meter. Lessor shall bill Lessee on a monthly basis for electricity. Such billing shall include an itemized bill, specifying exactly the electricity used by the Lessee. Lessor will not be liable to Lessee for damages or otherwise for any failure or interruption of any utility service furnished to the Premises or used by Lessee, and no such failure or interruption will entitle Lessee to withhold or abate any Rent, or to terminate this Lease; provided, however, that the foregoing limitation shall not apply to the extent such failure or interruption is caused or contributed to by any act or omission of Lessor.

6.2 Maintenance. Lessor shall be solely responsible for performing all maintenance and repairs to the Premises and Real Property, including without limitation, maintenance and repair of the Building, parking lot, curbing and walkways, heating and cooling systems, outside lighting, indoor light fixtures, and fire and life safety systems, as well as trash removal, landscaping, and pest control services.

7.0 Alterations, Additions and Improvements:

7.1 Lessee Improvements:

7.1.1 Cost of Lessee Improvements. Lessor shall construct or install, at its sole cost and expense, the "**Lessee Improvements**," identified and defined in Section 7.1.2 below.

7.1.2 Lessee Improvements: Lessor shall, at Lessor's expense, perform the following improvements to the Premises:

1. Paint the interior;
2. Install LED lights throughout the Premises;
3. Remove/widen both doors that divide office in half;
4. Install pony wall in receptionist's office and in western portion of office (locations to be further defined);
5. Repair/install auto lock to both entry doors;
6. Repair west side outside door;
7. Perform repairs in the kitchen area, restrooms, and electrical.

7.2 Lessee Improvement Warranties. Lessor warrants to Lessee that all materials and equipment furnished by Lessor in its improvements of the Premises shall be new unless otherwise specified in an Addendum to this Lease executed by and satisfactory in form to Lessor and Lessee and that all Lessor's work to be performed under Section 7.1.2 of this Lease shall be of good and workmanlike quality, free from faults and defects. Any of Lessor's work not conforming to the above standards shall be considered defective, and may be rejected by the Lessee at Lessor's sole cost and expense. The Lessee improvements will be completed in all material respects by Lessor on or before August 15, 2021. If Lessor fails to complete the Lessee improvements in all material respects on or before August 15, 2021, Lessee shall have the right to abatement of rent until such time as the Lessee improvements are completed.

7.3 Lessee shall not make, or suffer or permit to be made, any alterations, additions, or improvements to the Premises that require building permits or exceed \$2,500 in or about the Premises without first obtaining the prior written consent of Lessor, which consent shall not be unreasonably conditioned, withheld or delayed. Lessor's response shall be provided in writing to Lessee within ten (10) days of Lessee's written notice to Lessor; Lessor consent will be subject to the express condition that any and all alterations, additions, and improvements shall be done at Lessee's own expense, and that no liens of mechanics, material men, laborers, architects, artisans, contractors, subcontractors, or any other lien of any kind whatsoever shall be created against or imposed upon the Premises or any part thereof.

7.4 Alterations, additions, or improvements on or in the Premises at the commencement of the Term, and that may be thereafter erected or installed therein, shall become part of the Premises and the sole property of Lessor, except that all moveable non-fixtures, or fixtures removed by Lessee with the Premises being repaired to original condition, shall be and remain Lessee's property and shall not become the property of Lessor.

8.0 Lessor's Right of Entry.

Lessor shall have the right, with twenty-four (24) hours' prior written notice, and only during normal business hours, to enter upon the Premises to inspect the same and to make reasonably needed improvements, alterations, and additions to the Premises, providing such improvements, alterations, and additions are reasonably necessary or convenient to the use to

which the Premises are being put at the time. Any such activities by Lessor shall not unreasonably interfere with Lessee's use of the Premises.

9.0 Insurance.

9.1 During the Lease Term, and any extension thereof, Lessee shall maintain and fund a self-insurance program in accordance with and sufficient to cover the Lessee's liability under Nevada Revised Statutes ("NRS") Chapter 41. Coverage shall include liability arising out of bodily injury, wrongful death, and property damage. Lessee agrees, at its expense, to provide property insurance on its contents within the Premises, and Lessee shall carry and provide proof of workers' compensation insurance if such insurance is required of Lessee by NRS 616B.627 or proof that compliance with the provisions of NRS, Chapters 616A-D, or any other related chapters, is not required. .

9.2 Lessor shall, at Lessor's sole expense, procure, maintain, and keep in force for the duration of this Lease the following insurance conforming to the minimum requirements specified below. Unless specifically noted herein or otherwise agreed to by the Lessee, the required insurance shall be in effect at commencement of this Lease and shall continue in full force and effect until this Lease expires and Lessee vacates the Premises.

9.2.1 Workers' Compensation Insurance. Lessor shall carry and provide proof of workers' compensation insurance if such insurance is required of Lessor by NRS 616B.627 or proof that compliance with the provisions of Nevada Revised Statutes, NRS Chapter 616A-D and all other related chapters, is not required.

9.2.2 Commercial General Liability Insurance:

- a. Minimum limits required:
 - \$2,000,000 General Aggregate
 - \$1,000,000 Products & Completed Operations Aggregate
 - \$1,000,000 Personal and Advertising Injury
 - \$1,000,000 Each Occurrence

b. Coverage shall be on an occurrence basis and shall cover liability arising from premises, operations, independent contractors, completed operations, personal injury, products, and liability assumed under contract.

c. Lessee shall be added as an additional insured on Lessor's liability policy.

9.2.3 Property Insurance: Lessor shall maintain in full force and effect all-risk "special perils" insurance insuring the Premises and contents thereof (excluding personal property of Lessee) in an amount not less than full replacement cost.

9.2.4 Deductibles and Self-Insured Retentions: Insurance maintained by Lessor shall apply on a first dollar basis without application of a deductible or self-insured retention unless otherwise specifically agreed to by the Lessee. Such approval shall not relieve Lessor from the obligation to pay any deductible or self-insured retention.

9.2.5 Approved Insurer: Each insurance policy shall be issued by insurance companies authorized to do business in the State of Nevada or eligible surplus lines insurers

acceptable to the State and having agents in Nevada upon whom service of process may be made.

9.2.6 Evidence of Insurance: Prior to the start of this Lease, Lessor must provide to Lessee the Accord 25 Certificate of Insurance form or a form substantially similar to evidence the insurance policies and coverages required of Lessor.

9.3 Lessor hereby expressly waives and releases any cause of action or right of recovery which Lessor may have hereafter against Lessee for any loss, damage, or injury to the Premises, or to the contents thereof belonging to either, caused by fire, explosion, or any other risk covered by insurance. Lessor agrees to cause its insurance policies to contain a waiver of subrogation clause reflecting the provisions of this Section 9.3.

10.0 Indemnification.

10.1 In accordance with, and subject to, the limitations of NRS 41.0305 to NRS 41.039, inclusive, Lessee shall indemnify, defend and hold harmless Lessor from and against any and all liabilities, claims, losses, lawsuits, judgments, and/or expenses, including attorney fees, arising either directly or indirectly from any act or failure to act by the Lessee or any of its officers or employees, which may occur during or which may arise out of the performance of this Lease. Lessee shall assert the defense of sovereign immunity as appropriate in all cases, including malpractice and indemnity actions. Lessee's indemnity obligation for actions sounding tort is limited in accordance with the provisions of NRS 41.035.

10.2 Lessee shall not be liable for claims arising out of the use of the common areas of the Premises, Building, and parking lots located on the Real Property.

10.3 Lessor shall indemnify, defend and hold harmless Lessee, its officers, employees and agents from and against any and all liabilities, claims, losses, costs or expenses to the person or property of another, lawsuits, judgments and/or expenses, including attorney fees, arising either directly or indirectly from any act or failure to act Lessor or any of its officers or employees, which may occur during or which may arise out of the performance of this Lease.

11.0 Assignment and Subletting.

This Lease shall not be assigned, subleased, or mortgaged in whole or in part without the prior written consent of Lessor, which shall not be unreasonably withheld; provided however, that Lessee may transfer or assign this Lease to the Nevada System of Higher Education, or any institution thereof, without the prior written consent of the Lessor, provided, however, that Lessee shall provide Lessor with timely notice of any such assignment or transfer of the Lease.

12.0 Destruction.

12.1 If at any time during the Term, or any extension or renewal thereof, the Premises shall be totally or partially destroyed by fire, earthquake, or other calamity, then Lessor shall have the option to rebuild or repair the same, provided written notice of such intent to rebuild or repair shall be sent to Lessee within the period of thirty (30) days after the damaging event; and to rebuild or repair the same in as good condition as they were immediately prior to such calamity. In such case, a just and proportionate part of the rental herein specified shall be abated until such Premises shall have been rebuilt and repaired. In case, however, Lessor elects not to rebuild or repair said Premises, Lessor shall so notify Lessee by written notice

within the period of thirty (30) days after the event in question, and thereupon this Lease shall terminate upon Lessee's sole discretion.

12.2 In the event of termination of this Lease under the terms of Sections 13.0 and 14.0 of this Lease, the Lessee shall have a reasonable period of time with which to vacate the Premises.

12.3 All notices sent under the terms of this Section 12.3 shall conform to the provisions of Section 21.4 hereof, entitled "Modification," and Section 20 hereof, entitled "Notices."

13.0 Early Termination.

13.1 Lessee Termination Lease.

The continuation of this Lease is subject to and contingent upon sufficient funds being appropriated, budgeted, and otherwise made available by the State Legislature, federal sources and/or any other sources. The Lessee may terminate this Lease, or any renewal thereof, and Lessor waives any and all claims(s) for rents and/or damages, effective immediately upon receipt of written notice (or any date specified therein) if for any reason the contracting Agency's funding is withdrawn, limited, or in any way impaired or is not appropriated.

13.2 In the event of early termination of this Lease for any reason, the Lessee shall have a reasonable period of time with which to vacate the Premises.

14.0 Default by Lessee.

14.1 Default. If any of the following events occur, each such event shall constitute a material breach of this Lease (each, an "**Event of Default**"):

14.1.1 A default in the payment of Rent when such default continues for a period of thirty (30) days after Lessee's receipt of written notice from Lessor; or

14.1.2 Lessee fails to perform its obligations or observe any other covenant or undertaking required of it under this Lease and such failure continues for a period of thirty (30) days after Lessee's receipt of written notice thereof from Lessor specifying such failure. If the nature of Lessee's obligation is such that more than thirty (30) days are required for performance, then Lessee shall not be in default if Lessee commences performance within such thirty (30) day period and thereafter diligently prosecutes the same to completion; or

14.1.3 Lessee is adjudicated bankrupt; or

14.1.4 Lessee's lease interest is sold under execution of judgment.

14.2 Remedies. Upon an Event of Default, Lessor may, at Lessor's option, exercise any or all rights available to a Lessor under the laws of the State of Nevada. Notwithstanding the foregoing or anything to the contrary contained in this Lease, Lessee shall not be liable for

any consequential, indirect, incidental, special, punitive, or exemplary damages, under any circumstances.

15.0 Default by Lessor.

15.1 Default. Lessor shall be in default if Lessor fails to perform its obligations or observe any other covenant or undertaking required of it under this Lease and such failure continues for a period of thirty (30) days after Lessor's receipt of written notice from Lessee specifying such failure. If the nature of Lessor's obligation is such that more than thirty (30) days are required for performance, then Lessor shall not be in default if Lessor commences performance within such thirty (30) day period and thereafter diligently prosecutes the same to completion. Lessee's obligation to provide written notice to Lessor of a default by Lessor is limited to those instances where knowledge of Lessor's default is within the actual knowledge of Lessee.

15.2 Remedies. If Lessor fails to cure a prospective default within the above 30 day period, Lessee shall have the option to cure the default or to terminate this Lease, in addition to any other remedies at law or in equity. Should Lessee elect to cure the default itself, all costs associated with such cure, including reasonable attorneys' fees (if any), shall be reimbursed by Lessor to Lessee within thirty (30) days of receipt of Lessee's invoice for said costs. However, upon Lessor's failure to so reimburse, at Lessee's option, said costs shall be deducted from Rent due hereunder. If Lessor's default hereunder prevents Lessee's use of the Premises, there shall be an abatement of Rent for the period of such nonuse. No remedy or election under this Section 15.2 shall be deemed exclusive but shall, wherever possible, be cumulative with all other remedies at law or in equity.

16.0 Holding Over.

Lessee's holding or continued use or occupancy beyond the Lease Term shall be construed as a tenancy from month to month at the same monthly Rent and subject to the same conditions set forth in this Lease.

17.0 Condemnation.

17.1 In the event the Premises, or any part thereof, are taken, damaged consequentially or otherwise, or condemned by public authority, this Lease shall terminate as to the part so taken, as of the date title shall vest in said public authority, and the Rent reserved shall be adjusted so that Lessee shall be required to pay for the remainder of the Term only that portion of the Rent reserved in the proportion that the Premises remaining after the taking, damaging, or condemnation bears to the whole of the Premises before the taking, damaging, or condemnation. All damages and payments resulting from said taking, damaging, or condemnation of the Premises shall accrue to and belong to Lessor, and Lessee shall have no right to any part thereof.

17.2 In the event only a part of the Premises is taken and the portion remaining is unsuitable or insufficient for Lessee's purposes, Lessee has the right or option to terminate this Lease as to the remaining portion by giving written notice to Lessor specifying the date of termination.

18.0 Quiet Enjoyment.

On payment of Rent and performance of the covenants and agreements on the part of Lessee to be paid and performed hereunder, Lessee shall peaceably have and enjoy the Premises and all of the rights, privileges, and appurtenances granted herein.

19.0 Discrimination.

In the use or occupancy of the Premises Lessee will not discriminate unlawfully against any person on the basis of race, color, national origin, religion, sex, or handicap.

20. Notices.

Any notice to either party hereunder must be in writing signed by the party giving it, and shall be served either personally or by registered or certified mail addressed as follows:

TO THE LESSEE:

Nevada State Board of Dental Examiners
2651 North Green Valley Parkway, Ste. 104
Henderson, NV 89014

TO THE LESSOR:

2625 GV LLC
2551 N Green Valley Parkway, Suite 308
Henderson, NV 89014

or to such other addressee as may be hereafter designated by written notice. All such notices shall be effective only when received by the addressee.

21.0 Miscellaneous.

21.1 Non-Waiver.

The failure of either party to exercise any of its rights under this Lease for a breach thereof shall not be deemed to be a waiver of such rights, nor shall the same be deemed to be a waiver of any subsequent breach, either of the same provision or otherwise.

21.2 Binding on Heirs, Successors, and Assigns.

This Lease shall be binding upon and inure to the benefit of the heirs, personal representatives, and permitted assigns, as applicable, of the Lessor and the Lessee.

21.3 Entire Agreement.

This Lease (with its attachments, if any) constitutes the entire understanding between the parties with respect to the subject matter hereof and supersedes any and all prior understandings and agreements, oral and written, relating hereto. Any amendment of this Lease

must be in accordance with the provisions of Section 21.4 below of this Lease, entitled "Modification".

21.4 Modification.

This Lease may be amended at any time only upon mutual agreement in writing signed by the parties.

21.5 Force Majeure.

Neither party shall be deemed to be in violation of this Lease if it is prevented or delayed from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, governmental restrictions, governmental regulations, governmental controls, act of public enemy, pandemics, epidemics or other outbreaks of diseases or other infections accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the provisions of this Lease after the intervening cause ceases.

21.6 Governing Law.

Lessor and Lessee agree that the laws of the State of Nevada shall govern the validity, construction, interpretation and effect of this Lease. Any and all disputes arising out of or in connection with this Lease shall be litigated only in the Eighth Judicial District Court in and for the County of Clark, State of Nevada, and Lessor hereby expressly consents to the jurisdiction of said court.

21.7 Integration.

The terms of this Lease supersede all prior or contemporary written or verbal agreements, discussions, or negotiations by or between the parties hereto, and this Lease shall be deemed to be the final agreement between the Lessor and Lessee related to the subject matter hereof.

21.8 Counterparts; Electronic Delivery.

This Lease may be executed in two or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same agreement, and shall become effective when one or more counterparts have been signed by each party delivered to the other party, it being understood that both parties need not sign the same counterpart. Executed counterparts of this Lease may be delivered in portable document format (PDF) by e-mail, in either case with delivery confirmed. On such confirmed delivery, the signatures in the PDF data file shall be deemed to have the same force and effect as if the manually signed counterpart had been delivered to the other party in person.

21.9 **Required Approval.** This Lease shall not become effective until and unless approved by the Nevada State Board of Examiners and the Nevada State Board of Dental Examiners.

IN WITNESS WHEREOF, the authorized representatives of the parties have executed this Lease Agreement on the _____ day of _____, 2021.

Lessor: 2625 GV LLC, by:

Lessor's Signature Date Lessor's Title

State of Nevada Authorized Signature Date Title

State of Nevada Authorized Signature Date Title

State of Nevada Authorized Signature Date Title

APPROVED BY BOARD OF EXAMINERS

Signature – Board of Examiners
On: _____
Date

Approved as to form by:

Deputy Attorney General for Attorney General
On: _____
Date

DRAFT

Exhibit A

Diagram of Office or Building Space

Address: 2651 North Green Valley Parkway, Suite 104, Henderson, Nevada 89014

