

NEVADA STATE BOARD of DENTAL EXAMINERS



BOARD TELECONFERENCE MEETING

TUESDAY, MAY 30, 2023

6:00 P.M.

PUBLIC BOOK

Nevada State Board of Dental Examiners



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

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA

Meeting Date & Time

Tuesday, May 30, 2023
6:00 P.M.

Meeting Location:

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

Video Conferencing / Teleconferencing Available

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

To access by video webinar, visit www.zoom.com or use the Zoom app

Zoom Webinar/Meeting ID#: **811 1483 5622**

Zoom Webinar/Meeting Passcode: **143970**

PUBLIC NOTICE:

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

Members of the public may submit public comment in written form to: **Nevada State Board of Dental Examiners, 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014; FAX number (702) 486-7046; e-mail address nsbde@dental.nv.gov**. Written submissions received by the Board on or before **Friday, May 26, 2023, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

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

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

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

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

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

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

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

Members of the public may submit public comment via email to nsbde@denal.nv.gov, or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Friday, May 26, 2023, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

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

***3. President's Report:** (For Possible Action)

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

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

***4. Secretary – Treasurer's Report:** (For Possible Action)

***a. Approval/Rejection of Minutes** (For Possible Action)

- (1) Anesthesia Committee Meeting – 05/02/2023
- (2) Legislative, Legal, & Dental Practice Committee Meeting – 05/03/2023
- (3) Board Meeting – 05/05/2023
- (4) Regulation Workshop – 05/22/2023

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

***a. Legal Actions/Litigation Update** (For Informational Purposes Only)

***b. Regulatory Update** (For Informational Purposes Only)

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

- (1) Discussion and Consideration of Proposed Findings and Recommendations for Matters That Have Been Recommended for Remand by the Review Panel, and Possible Approval/Rejection of Same by the Board – NRS 631.3635

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

***a. Discussion, Consideration, and Possible Recommendations to the Full Board of Proposed Adjustments to the Infection Control Survey Form in General – NRS 631.190** (For Possible Action)

***b. Board recommendation that mandatory TB Screening in Dental Office is not necessary, nor applicable in Nevada – NAC 631.178(2)** (For Possible Action)

***6. New Business:** (For Possible Action)

***a. Consideration for Possible Approval of Proposed Revisions to NAC 631 Subsequent to Public Workshop in Conformance with Governor's Executive Order EO-003 and EO-004 – NRS 631.190** (For Possible Action)

- (1) Regulations regarding licensure pursuant to NAC 631.030
- (2) Regulations regarding rejection/return of application pursuant to NAC 631.050
- (3) Regulations regarding Continued Education pursuant to NAC 631.175
- (4) Regulations regarding random inspections pursuant to NAC 631.179
- (5) Regulations regarding dental hygienists pursuant to NAC 631.210
- (6) Regulations regarding anesthesia/sedation permits pursuant to NAC 631.2219
- (7) Regulations regarding unprofessional conduct pursuant NAC 631.230

- (8) **Regulations regarding investigations of a complaint against a licensee pursuant to NAC 631.250.**
- (9) **Regulations regarding the disciplinary process pursuant to NAC 631, NAC 631.230, NAC 631.240, NAC 631.250, and NAC 631.255.**
- (10) **Regulations regarding dental therapy pursuant to NAC 631.**

***b. Approval/Rejection of Permanent Anesthesia Permit – NAC 631.2235** (For Possible Action)

- (1) Daniel H Lee, DDS – Pediatric Moderate Sedation
- (2) Thomas J Ostler, DDS – Moderate Sedation
- (3) Troy M Lam, DDS – General Anesthesia

***c. Approval/Rejection of Voluntary Surrender of License – NAC 631.160** (For Possible Action)

- (1) Paul Sablan Sauget, DDS
- (2) Anthony Q. Phan, DMD
- (3) Olivia Rodrigues, DDS
- (4) Erum Majid, RDH

***d. Approval/Rejection of Temporary Anesthesia Permit – NAC 631.2254** (For Possible Action)

- (1) Won Jong Lee, DDS – General Anesthesia

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

- (1) Carrie Wucinich, RDH – Heavenly Smiles

***f. Approval/Rejection of Volunteer Service Provider Application – NRS 631.190** (For Possible Action)

- (1) Charlotte Worthley, RDH – Adopt a Vet Dental Program

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

Members of the public may submit public comment via email to nsbde@dental.nv.gov, or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Friday, May 26, 2023, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

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

8. Announcements

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

PUBLIC NOTICE POSTING LOCATIONS

Office of the N.S.B.D.E., 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014
 State Board of Dental Examiners website: www.dental.nv.gov
 Nevada Public Posting Website: www.notice.nv.gov

Agenda Item 4(a)(1):
Approve/Reject Minutes
Anesthesia Committee Meeting – 05/02/2023

Agenda Item 4(a)(2):
Approve/Reject Minutes
Legislative, Legal, & Dental Practice Committee
Meeting – 05/03/2023

Agenda Item 4(a)(3):
Approve/Reject Minutes
Board Meeting – 05/05/2023

Agenda Item 4(a)(4):
Approve/Reject Minutes
Regulation Workshop – 05/22/2023

Agenda Item 5(a):
Legal Actions/Litigation Update

Agenda Item 5(b): Regulatory Update

Agenda Item 5(c):
Review Panel -- NRS 631.3635

NRS 631.3635 Appointment of panel to review investigation or informal hearing; members; requirements of review; findings and recommendation.

1. The Board shall appoint a panel to review an investigation or informal hearing conducted pursuant to [NRS 631.363](#). Such a panel must consist of:
 - (a) If the subject of the investigation or informal hearing is a holder of a license to practice dental hygiene, one member of the Board who is a holder of a license to practice dentistry, one member of the Board who is a holder of a license to practice dental hygiene and one holder of a license to practice dental hygiene who is not a member of the Board and is not the subject of the investigation or informal hearing.
 - (b) If the subject of the investigation or informal hearing is a holder of a license to practice dentistry or any other person not described in paragraph (a), one member of the Board who is a holder of a license to practice dentistry, one member of the Board who is a holder of a license to practice dental hygiene and one holder of a license to practice dentistry who is not a member of the Board and is not the subject of the investigation or informal hearing.
2. A review panel appointed pursuant to subsection 1 shall, in conducting a review of an investigation or informal hearing conducted pursuant to [NRS 631.363](#), review and consider, without limitation:
 - (a) All files and records collected or produced by the investigator;
 - (b) Any written findings of fact and conclusions prepared by the investigator; and
 - (c) Any other information deemed necessary by the review panel.
3. The investigator who conducted the investigation or informal hearing pursuant to [NRS 631.363](#) shall not participate in a review conducted pursuant to subsection 1.
4. Before the Board takes any action or makes any disposition relating to a complaint, the review panel appointed pursuant to subsection 1 to conduct a review of the investigation or informal hearing relating to the complaint shall present to the Board its findings and recommendation relating to the investigation or informal hearing, and the Board shall review and consider those findings and recommendations.
5. Meetings held by a review panel appointed pursuant to subsection 1 are not subject to the provisions of [chapter 241](#) of NRS.

(Added to NRS by [2017, 988](#))

Agenda Item 5(c)(1):

**Discussion and Consideration of Proposed Findings
and Recommendations for Matters That Have Been
Recommended for Remand by the Review Panel, and
Possible Approval/Rejection of Same by the Board –
NRS 631.3635**

Agenda Item 6(a):

**Discussion, Consideration, and Possible
Recommendations to the Full Board of Proposed
Adjustments to the Infection Control Survey Form
in General – NRS 631.190**

NRS 631.190 Powers and duties. [Effective January 1, 2020.] In addition to the powers and duties provided in this chapter, the Board shall:

1. Adopt rules and regulations necessary to carry out the provisions of this chapter.
2. Appoint such committees, review panels, examiners, officers, employees, agents, attorneys, investigators and other professional consultants and define their duties and incur such expense as it may deem proper or necessary to carry out the provisions of this chapter, the expense to be paid as provided in this chapter.
3. Fix the time and place for and conduct examinations for the granting of licenses to practice dentistry, dental hygiene and dental therapy.
4. Examine applicants for licenses to practice dentistry, dental hygiene and dental therapy.
5. Collect and apply fees as provided in this chapter.
6. Keep a register of all dentists, dental hygienists and dental therapists licensed in this State, together with their addresses, license numbers and renewal certificate numbers.
7. Have and use a common seal.
8. Keep such records as may be necessary to report the acts and proceedings of the Board. Except as otherwise provided in [NRS 631.368](#), the records must be open to public inspection.
9. Maintain offices in as many localities in the State as it finds necessary to carry out the provisions of this chapter.
10. Have discretion to examine work authorizations in dental offices or dental laboratories.

[Part 4:152:1951; A [1953, 363](#)] — (NRS A [1963, 150](#); [1967, 865](#); [1993, 2743](#); [2009, 3002](#); [2017, 989](#), [2848](#); [2019, 3205](#), effective January 1, 2020)

INFECTION CONTROL INSPECTION/SURVEY FORM				Rev
10/2016				
Dental Office Name:			Date of Inspection:	
Licensee Name:		Owner Dentist:		
Address:		INSPECTOR(S)		
		(1) _____ (2) _____		
City:	State: Nevada	Zip Code:	PURPOSE OF INSPECTION	
			Initial Inspection: <input type="checkbox"/> Random Inspection: <input type="checkbox"/>	
COMPLIANCE LEVEL CRITERIA – LEVEL # 1-4				
# 1 - CRITICAL: MUST BE MET. COULD RESULT IN IMMEDIATE TERMINATION OF PATIENT CARE AND EXTENDED OFFICE INABILITY TO TREAT PATIENTS.				
# 2 - REMEDIAL ACTION REQUIRED: REQUIRES CORRECTIVE COMPLIANCE WITHIN 7 DAYS.				
# 3 - ACTION REQUIRED: REQUIRES CORRECTIVE COMPLIANCE WITHIN 30 DAYS.				
# 4 - ACTION RECOMMENDED: NOT REQUIRED FOR COMPLIANCE AT THIS TIME – COMPLIANCE REQUIREMENTS SUBJECT TO CHANGE AS CENTER FOR DISEASE CONTROL (CDC) REQUIREMENTS MAY CHANGE.				
RECORD KEEPING – EACH PRACTICE MUST HAVE				LEVEL 1-4
1	Written infection control program that is <u>specific</u> for the owner of this location			N
EDUCATION & TRAINING				
2	Documentation of review of the infection control plan at least annually to ensure compliance with best practices			N
3	Documentation of Bloodborne Pathogen training at the date of hire for practice			N
4	Documentation of education and training that is appropriate to the assigned duties of the specific DHCP (dental health care personnel) and include hands on training for all staff assigned to process semi critical and critical instruments			N
5	Training records kept for 3+ years			N
6	Mechanism for corrective action for any deviation from written policy. Documentation of any corrective actions			N
CONFIDENTIAL VACCINATION RECORDS, EXPOSURE AND POST EXPOSURE MANAGEMENT, MEDICAL CONDITIONS, WORK RELATED ILLNESS AND WORK RESTRICTIONS				
7	Does the Licensee have written policies and procedures to address whether a dentist, hygienists or dental assistants who has an acute or chronic medical condition(s) that render them susceptible to opportunistic infection which may expose a patient to the risk of infection.			N
8	Documentation of vaccinations offered to DHCP (Hepatitis B, Influenza, MMR, Varicella, Tetanus, Meningococcal), informed consent of exposure risk, and declinations of such vaccinations or immunizations			N
9	Employee health records include any exposure and post exposure and follow up records			N
10	Written policies and procedures regarding all occupational exposures which include a post exposure medical plan (e.g. use CDC needle stick/sharps injury/exposure protocol)			N
11	24/7 contact telephone number listed and posted for qualified healthcare provider			N
12	Exposure and incident reporting forms			N
13	Sharps injury log			N
14	Written policy and procedure for patients known to have communicable disease upon arrival			N
BLOODBORNE PATHOGEN ELEMENTS				
15	Written policies and procedures for the prevention of transmission of bloodborne pathogens			N
16	Written policies for hand hygiene, including documentation of training and appropriate selection of antiseptic agents			N
17	Written policies for use of personal protective equipment			N
18	Monitoring and documentation of compliance with PPE			N

19	Written policies and procedures for handling and management of sharps	3	Y	N
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DISINFECTION AND STERILIZATION OF PATIENT CARE ITEMS

20	Written policies and procedures for managing semi-critical and critical items	3	Y	N
21	Written system outlining entire sterilization process (written policies and procedures for transporting and processing of all contaminated critical and semi-critical instruments, the instrument processing area, preparation and packaging of instruments, sterilization and storage of sterilized and clean dental instruments)	3	Y	N
22	Written policy and procedures for sterilization monitoring	3	Y	N
23	Weekly biological monitoring logs	1	Y	N
24	Current maintenance logs for sterilization equipment	3	Y	N
25	Weekly biological monitoring logs kept for 2+ years or since opening date: _____	3	Y	N
26	Written policy for managing failed chemical, heat or biological monitoring test	3	Y	N
27	Equipment and maintenance logs	3	Y	N

ENVIRONMENTAL INFECTION CONTROL ELEMENTS

28	Written policy and procedure for aseptic management during patient care	3	Y	N
29	Written policy and procedure for surface disinfection and environmental barrier protection	3	Y	N
30	Written policy and procedure for medical waste management	3	Y	N
31	Name/telephone number of licensed waste hauler for regulated waste	3	Y	N
32	Written Policy and procedure for decontaminating spills of blood or other body fluids	3	Y	N
33	Written policy and procedure to improve dental unit water quality	3	Y	N
34	Documentation of dental unit water lines testing to meet potable water standard of EPA (<500 CFU/ml)	4	Y	N
35	Documentation of action taken to meet EPA potable water standard, including re-testing	4	Y	N
36	Written policy and procedure to maintain asepsis and prevent cross contamination when taking and processing dental radiographs	3	Y	N
37	Written policy and procedure to maintain asepsis and prevent cross contamination during dental laboratory procedures	3	Y	N

OTHER

38	A comprehensive and annually up-dated medical history form is used to evaluate patients	3	Y	N
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COMMUNICABLE DISEASE CONTROL PROCEDURES

		LEVEL 1-4	Y	N	N/A
39	Single use or sterilization for critical items	1	Y	N	N/A
40	Multi - dose vials used		Y	N	
41	a) if yes, vials are only entered with new, sterile syringe with a new, sterile needle	1	Y	N	N/A
42	b) Cap of multi-dose vial cleaned with alcohol based wipe before being accessed	2	Y	N	N/A
43	c) Are multi-use vials discarded when expired or 28 days after initial access (as applicable) - Must have date when first accessed	2	Y	N	N/A
44	d) is initial access dated on the multi-use vials	2	Y	N	N/A
45	Fluid infusion and administration sets (IV bags, tubing and connectors) used?		Y	N	
46	a) if yes, used only on one patient	1	Y	N	N/A
47	b) Disposed of after single use?	1	Y	N	N/A
48	c) Single IV bag is not used to mix medications for more than one patient	1	Y	N	N/A
49	d) Single dose medication/infusions are used for only one patient and discarded after use	1	Y	N	N/A
50	Personnel wear utility gloves when processing contaminated instruments - Not latex type for patient care	2	Y	N	
51	Supplies for hand hygiene accessible to employees at point of need	2	Y	N	
52	Soap and water easily accessible	2	Y	N	
53	Alcohol based rubs easily accessible-if used	2	Y	N	
54	Team members display appropriate hand hygiene techniques	1	Y	N	

APPROPRIATE PPE SUPPLIES ACCESSIBLE & EMPLOYEES WITH EXPOSURE RISKS				
55	Gloves (Latex and latex free or just latex free) Sterile Surgical Gloves---for surgical procedures	1 2	Y Y	N N
56	Masks	1	Y	N
57	Safety glasses with side shield or full face shields	1	Y	N
58	Disposable gowns/laundered gowns offered	1	Y	N
59	Health care workers display appropriate use of PPE barriers	2	Y	N
60	Running water eye wash station accessible	3	Y	N
61	Appropriate barrier products available (dental dams, protective eyewear, other)	2	Y	N
62	Basic first aid products and equipment available (Recommended to include: nitroglycerin, Benadryl, epi-pen, oxygen, aspirin, albuterol, glucose, glucagon)	4	Y	N
DENTAL UNIT WATER QUALITY				
63	Dental unit water lines flushed between patients for a minimum of 20 seconds	2	Y	N
64	Dental unit water lines are treated to remove biofilm	4	Y	N
65	Maintain documentation of dental unit water line testing to meet the potable water standard of EPA (< 500 CFU/ml)	4	Y	N
66	Maintain documentaion of dental unit water lines not meeting the potable water standard of EPA are treated and retested	4	Y	N
CLEANING, DISINFECTION & STERILIZATION OF PATIENT CARE ITEMS				
67	Biofilm and organic matter are removed from critical and semi-critical instruments using detergents or enzymatic cleaners prior to sterilization	2	Y	N
68	Sterilization equipment available and fully functional	1	Y	N
69	Number of working autoclaves: _____	1	Y	N
70	Number of working chemiclaves: _____	1	Y	N
71	Number of working dry heat sterilizers: _____	1	Y	N
72	Number of working Flash steam sterilizers (Statim): _____	1	Y	N
73	Number of working ultrasonic cleaners: _____	1	Y	N
74	Endodontic files/instrumentation sterilized or disposed	1	Y	N
75	Is Biological testing of sterilizer completed weekly	1	Y	N
76	If independent biological testing service, Name: _____		Y	N
77	If in-office biological testing, is control processed?	2	Y	N
78	Sterilization cycles are verified with chemical/heat indicator. Both interior and external indicators	2	Y	N
79	Critical items (any instrument that penetrates soft tissue or bone) instruments are sterilized after each use	1	Y	N
80	Use a biological indicator for every sterilizer load that contains a non-sterile Implantable device. Verify results before using the implantable device, whenever possible.	1	Y	N
81	Proper sterilization loading technique, not overloading	2	Y	N
82	Heat Tolerant Handpieces are sterilized after each use (including high & low speed handpieces, prophylaxis angles, ultrasonic and sonic scaling tips, air abrasion devices, air and water syringe tips, and motors--with exception of electric type models)	1	Y	N
83	Sterile packs are inspected for integrity, compromised packs are reprocessed	2	Y	N
84	Event-related monitoring is used to monitor package integrity and packages are appropriately stored with a minimum of an initial date stamp	2	Y	N
85	Single use instruments or devices are not processed and re-used	1	Y	N
86	Semi-critical items are sterilized after each use if not heat sensitive	1	Y	N
87	Heat sensitive semi-critical are at a minimum high level disinfected after each use or chemical sterilized after each use	1	Y	N
88	Practice is using an FDA approved chemical sterilant	2	Y	N
89	All applicable label instruction are followed on FDA approved chemical sterilant (dilution, expiration date, shelf life, storage, safe use, disposal and material compatibility)	2	Y	N
90	Practice is using a FDA approved method as high level disinfectant (for heat-sensitive semicritical patient care items)	2	Y	N

91	Method used for high level disinfection are prepared and follow the manufacturer's instructions of use (dilution, expiration date, shelf life, storage, safe use, disposal and material compatibility)	2	Y	N	N/A
Aseptic Techniques:					
92	Splash shields and equipment guards used on dental laboratory lathes	4	Y	N	N/A
93	Fresh pumice and a sterilized, or new rag wheel used for each patient	2	Y	N	N/A
94	Are devices used to polish, trim or adjust contaminated intraoral devices being disinfected or sterilized	2	Y	N	N/A
95	Intraoral items such as impressions, bite registrations, prostheses and orthodontic appliances are cleaned and disinfected	2	Y	N	
Environmental Infection Control			LEVEL 1-4	Y	N
96	Clinical contact surfaces (frequently touched surface that could potentially allow secondary transmission to HCW or patients) that are not barrier-protected are cleaned and disinfected using an EPA registered hospital disinfectant with low to intermediate claim after each patient. Uses intermediate level disinfectant (TB claim) if visibly contaminated with blood.	2	Y	N	
97	Housekeeping surfaces (sinks, floors, walls) are cleaned on a routine basis	2	Y	N	
98	Environmental surfaces are disinfected with an EPA registered low intermediate disinfectant (TB claim) at beginning and end of day	2	Y	N	
99	EPA registered disinfectants are prepared and follow the manufacturer's instruction of use (dilution, shelf life, storage, use of material compatibility)	2	Y	N	
100	All clinical contact surfaces are protected with barriers (especially areas that are difficult to clean)	2	Y	N	
101	Clinical contact barriers are changed between patients	2	Y	N	
102	Decontamination and clean areas separated in the instrument processing area	2	Y	N	
103	Biohazardous waste is disposed of properly	2	Y	N	
Sharps					
104	Approved sharps containers utilized and accessible	2	Y	N	
105	Sharps container taken out of service and processed appropriately	2	Y	N	
106	Safe recapping techniques/devices used	2	Y	N	
107	Sharps (needles, blades...) are single use	1	Y	N	
108	Employees use engineering controls (e.g., forceps) to retrieve contaminated sharps from trays or containers	2	Y	N	

ACKNOWLEDGEMENT AND RECEIPT OF COPY BY OWNER/AUTHORIZED AGENT

The owner of the dental practice hereby acknowledges that by executing this document below and initialing each page's lower right hand corner on the line "Licensee Initials," receipt of a copy of this inspection/survey form is acknowledged.

In the event the dental practice has satisfactorily completed the inspection, as noted in this inspection/survey form, the owner/licensee will receive from the Board's Executive Director and/or representative, written notice of satisfactorily completing the inspection conducted.

If an owner/licensee has commenced the practice of dentistry prior to an Initial Inspection (NAC 631.1785) at any given location that inspection shall be deemed to be a Random Inspection pursuant to NAC 631.179.

If the inspection indicates "critical" deficiencies (items listed as "#1's") the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "critical" deficiencies and that a re-inspection will be conducted within seventy-two (72) hours of the written notice. However in the event the "critical" deficiencies noted, pose an immediate threat to the public health, safety and/or welfare the President of the Board, may without any further action of the Board, issue an Order of Summary Suspension pursuant to NAC 631.179(4).

In the event the inspection indicates "remedial action required" deficiencies (items listed as "#2's"), the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "remedial action required" deficiencies and that a re-inspection will be conducted within seven (7) days of the written notice.

In the event the inspection indicates "action required" deficiencies (items listed with a "#3"), the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "action required" deficiencies and that a re-inspection will be conducted within thirty (30) days of the written notice.

Receipt of a copy of the foregoing is hereby acknowledged;

By _____

Print name: _____

this _____ day of _____, 20____ at ____:____ .m.

Title and/or position/capacity: _____

INFECTION CONTROL INSPECTION/SURVEY FORM				Rev 05/2023	
Dental Office Name:			Date of Inspection:		
Licensee/Owner Name:					
Address:			INSPECTOR(S)		
			(1) _____ (2) _____		
City:	State: Nevada	Zip Code:	PURPOSE OF INSPECTION		
			Initial Inspection: <input type="checkbox"/> Random Inspection: <input type="checkbox"/>		
COMPLIANCE LEVEL CRITERIA – LEVEL # 1-4					
# 1 - CRITICAL: MUST BE MET. COULD RESULT IN IMMEDIATE TERMINATION OF PATIENT CARE AND EXTENDED OFFICE INABILITY TO TREAT PATIENTS.					
# 2 - REMEDIAL ACTION REQUIRED: REQUIRES CORRECTIVE COMPLIANCE WITHIN 7DAYS.					
# 3 - ACTION REQUIRED: REQUIRES CORRECTIVE COMPLIANCE WITHIN 30 DAYS.					
# 4 - ACTION RECOMMENDED: NOT REQUIRED FOR COMPLIANCE AT THIS TIME – COMPLIANCE REQUIREMENTS SUBJECT TO CHANGE AS CENTER FOR DISEASE CONTROL (CDC) REQUIREMENTS MAY CHANGE.					
RECORD KEEPING – EACH PRACTICE MUST HAVE			LEVEL 1-4	Y	N
1	Written infection control program that is specific for the owner of this location and easily accessible by all staff.		3	Y	N
EDUCATION & TRAINING					
2	Documentation of review of the infection control plan at least annually to ensure compliance with best practices.		3	Y	N
3	Documentation of Bloodborne Pathogens training at the date of hire for practice		3	Y	N
4	Documentation of education and training that is appropriate to each dental personnel/staff member including hands-on training for personnel that process semi critical and critical instruments.		3	Y	N
5	Training records kept for 3+ years		3	Y	N
6	Procedure for corrective action for any deviation from the written policy including documentation of any corrective actions taken		3	Y	N
CONFIDENTIAL VACCINATION RECORDS, EXPOSURE AND POST EXPOSURE MANAGEMENT, MEDICAL CONDITIONS, WORK RELATED ILLNESS AND WORK RESTRICTIONS					
7	Written policy and procedures for providers/Staff with an acute or chronic medical condition that may expose others to infection		3	Y	N
8	Documentation of vaccinations offered to DHCP (Hepatitis B, Influenza, MMR, Varicella, Tetanus ,Meningococcal), informed consent of exposure risk, and declinations of such vaccinations or immunizations		3	Y	N
9	Confidential employee health records including any exposure and post exposure care		3	Y	N
10	Written policies and procedures regarding all occupational exposures which include a post exposure medical plan (e.g. use CDC needle stick/sharps injury/exposure protocol)		3	Y	N
11	24/7 contact telephone number for a qualified healthcare provider posted in an accessible area		3	Y	N
12	Exposure and incident reporting forms		3	Y	N
13	Sharps injury log		3	Y	N
14	Written policy and procedure for patients known to have communicable disease upon arrival		3	Y	N
BLOODBORNE PATHOGEN ELEMENTS					
15	Written policies and procedures for the prevention of transmission of bloodborne pathogens		3	Y	N
16	Written policies for hand hygiene, including documentation of training and appropriate selection of antiseptic agents		3	Y	N
17	Written policies and procedures for use of personal protective equipment		3	Y	N

18	Written policies and procedures for handling and management of sharps	3	Y	N
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DISINFECTION AND STERILIZATION OF PATIENT CARE ITEMS

19	Written policies and procedures for managing semi-critical and critical items	3	Y	N
20	Written system outlining entire sterilization process (written policies and procedures for transporting and processing of all contaminated critical and semi-critical instruments, the instrument processing area, preparation and packaging of instruments, sterilization and storage of sterilized and clean dental instruments)	3	Y	N
21	Written policy and procedures for sterilization biologic monitoring including policy on a failed biologic monitoring test	3	Y	N
22	Weekly biological monitoring logs that include the date test was sent, returned and results of testing	1	Y	N
23	Appropriate testing and maintenance logs for each piece of equipment such as sterilizers, ultrasonic cleaners, etc.	3	Y	N
24	Weekly biological monitoring logs kept for 2+ years or since opening date: _____	3	Y	N

ENVIRONMENTAL INFECTION CONTROL ELEMENTS

25	Written policy and procedure for aseptic management during patient care	3	Y	N	
26	Written policy and procedure for surface disinfection and environmental barrier protection	3	Y	N	
27	Written policy and procedure for medical waste management	3	Y	N	
28	Name/telephone number of licensed waste hauler for regulated waste	3	Y	N	
29	Written Policy and procedure for decontaminating spills of blood or other body fluids with necessary supplies present for decontamination (Blood Spill Kit)	3	Y	N	
30	Documentation of dental unit water lines testing to meet potable water standard of EPA (<500 CFU/ml)	3	Y	N	
31	Documentation of action taken to meet EPA potable water standard, including re-testing	3	Y	N	
32	Written policy and procedure to maintain asepsis and prevent cross contamination when taking and processing dental radiographs	3	Y	N	N/A
33	Written policy and procedure to maintain asepsis and prevent cross contamination during dental laboratory procedures	3	Y	N	N/A


OTHER

34	A comprehensive and annually updated medical history form is used to evaluate patients	3	Y	N
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COMMUNICABLE DISEASE CONTROL PROCEDURES

		LEVEL 1-4	Y	N	N/A
35	Single use or sterilization for critical items	1	Y	N	
36	Multi - dose vials used		Y	N	
37	a) if yes, vials are only entered with new, sterile syringe with a new, sterile needle	1	Y	N	N/A
38	b) Cap of multi-dose vial cleaned with alcohol based wipe before being accessed	2	Y	N	N/A
39	c) Are multi-use vials discarded when expired or 28 days after initial access (as applicable) - Must have date when first accessed	2	Y	N	N/A
40	d) is initial access dated on the multi-use vials	2	Y	N	N/A
41	Fluid infusion and administration sets (IV bags, tubing and connectors) used		Y	N	
42	a) if yes, used only on one patient	1	Y	N	N/A
43	b) Disposed of after single use?	1	Y	N	N/A
44	c) Single IV bag is <u>not</u> used to mix medications for more than one patient	1	Y	N	N/A
45	d) Single dose medication/infusions are used for only one patient and discarded after use	1	Y	N	N/A
46	Personnel wear utility gloves when processing contaminated instruments - Not latex type for patient care	2	Y	N	
47	Supplies for hand hygiene accessible to employees at point of need	2	Y	N	
48	Soap and water easily accessible	2	Y	N	
49	Alcohol based rubs easily accessible-if used	2	Y	N	
50	Team members display appropriate hand hygiene techniques	1	Y	N	

APPROPRIATE PPE SUPPLIES ACCESSIBLE & EMPLOYEES WITH EXPOSURE RISKS

51	Gloves available in appropriate sizes (Latex and latex free or just latex free) including appropriately sized sterile surgical gloves if surgeries are preformed in the office	1	Y	N	
52	Level of masks appropriate to the procedure type performed in the office	1	Y	N	
53	Safety glasses with side shield and/or full-face shields used in conjunction with safety glasses	1	Y	N	
54	Disposable and/or laundered gowns available in the office	1	Y	N	
55	Health care workers display appropriate use of PPE barriers	2	Y	N	
56	Running water eye wash station accessible	3	Y	N	
57	Appropriate barrier products available for patient use (dental dams, protective eyewear, etc)	2	Y	N	
58	Basic first aid products and equipment available (Recommended to include: Nitroglycerin, Benadryl, Epinephrine Auto Injector for adult and child if applicable, Oxygen, Aspirin, Albuterol, Glucose, etc)	2	Y	N	
DENTAL UNIT WATER QUALITY					
59	Dental unit water lines flushed for 2 minutes each day prior to use and between patients for a minimum of 20 seconds	2	Y	N	
60	Dental unit water lines are treated to remove biofilm	2	Y	N	
CLEANING, DISINFECTION & STERILIZATION OF PATIENT CARE ITEMS					
61	Biofilm and organic matter are removed from critical and semi-critical instruments using detergents or enzymatic cleaners prior to sterilization following manufacture recommendations that may require temperature and time	2	Y	N	
62	Sterilization equipment available and fully functional	1	Y	N	
63	Number of working autoclaves: _____	1	Y	N	N/A
64	Number of working chemiclaves: _____	1	Y	N	N/A
65	Number of working dry heat sterilizers: _____	1	Y	N	N/A
66	Number of working Flash steam sterilizers (Statim): _____	1	Y	N	N/A
67	Number of working ultrasonic cleaners: _____	1	Y	N	
68	Biological testing of sterilizer(s) is completed weekly on each cycle used (pouched, plastics, solids, etc) and with a full bio burden load under normal processing parameters (full load of instruments, not overloaded, spore test strip or vial in a pouch)	1	Y	N	
69	If independent biological testing service Name: _____		Y	N	N/A
70	If in-office biological testing, is control processed?	2	Y	N	N/A
71	Sterilization cycles are verified with chemical/heat indicator with both internal and external indicators, closed cassettes and containers must contain a class V integrator	2	Y	N	
72	Critical items (any instrument that penetrates soft tissue or bone) instruments are sterilized after each use	1	Y	N	
73	Proper sterilization loading technique demonstrated	2	Y	N	
74	Heat Tolerant Handpieces are sterilized after each use (including high & low speed handpieces, prophylaxis angles, ultrasonic and sonic scaling tips, air abrasion devices, air and water syringe tips, and motors--with exception of electric type models)	1	Y	N	
75	Sterile packs are inspected for integrity, compromised packs are reprocessed	2	Y	N	
76	Event-related monitoring is used to monitor package integrity and packages are appropriately stored with a minimum of an initial date stamp and sterilizer used (if more than one sterilizer present)	2	Y	N	
77	Single use items, supplies or devices and items labeled with  are not processed and re-used	1	Y	N	
78	Semi-critical items are sterilized after each use if not heat sensitive	1	Y	N	
79	Heat sensitive semi-critical are at a minimum high level disinfected or chemical sterilized after each use	1	Y	N	
80	Semi-critical items that are not heat or chemical tolerant, such as digital sensors, intraoral cameras, intra oral scanners, curing lights, etc., use FDA approved barriers and are cleaned then disinfected with an intermediate level disinfection agent between patients	1	Y	N	
81	Practice is using an FDA approved chemical sterilant and has systems in place to ensure adequate exposure time is reached	2	Y	N	N/A
82	All applicable label instruction are followed on FDA approved chemical sterilant (mixing, dilution, expiration date, shelf life, storage, safe use, disposal and material compatibility)	2	Y	N	N/A

Aseptic Techniques:

83	Splash shields and equipment guards used on dental laboratory lathes	4	Y	N	N/A
84	Fresh pumice and a sterilized or new rag wheel used for each patient	2	Y	N	N/A
85	Devices used to polish, trim or adjust contaminated intraoral devices are disinfected and/or sterilized	2	Y	N	N/A
86	Intraoral items such as impressions, bite registrations, prosthetics, crown and bridge, and orthodontic appliances are cleaned and disinfected before lab procedures and before delivering to the patient	2	Y	N	N/A
Environmental Infection Control			LEVEL 1-4	Y	N
87	Clinical contact surfaces (frequently touched surface that could potentially allow secondary transmission to the DHCW or patient) that are not barrier protected are cleaned then disinfected using an EPA registered hospital disinfectant with low to intermediate claim after each patient following manufacture recommendations. Intermediate level disinfectant (TB claim) to be used if visibly contaminated with blood	2	Y	N	
88	Housekeeping surfaces (sinks, floors, walls, drawers, supply containers, etc.) are cleaned on a routine basis	2	Y	N	
89	Environmental surfaces are cleaned then disinfected with an EPA registered low to intermediate level disinfectant at beginning and end of day	2	Y	N	
90	EPA registered disinfectants are prepared and follow the manufacturer's instruction of use (mixing, dilution, shelf life, storage, use of material compatibility)	2	Y	N	
91	All clinical contact surfaces are protected with barriers (especially areas that are difficult to clean)	2	Y	N	
92	Barriers are removed, surfaces are cleaned then disinfected prior to applying new barrier in between patients	2	Y	N	
93	Decontamination and clean areas separated in the instrument processing area	2	Y	N	
94	Biohazardous waste is disposed of properly	2	Y	N	
Sharps					
95	Approved sharps containers utilized, accessible and secured to counter/wall	2	Y	N	
96	Sharps container taken out of service and processed appropriately	2	Y	N	
97	Safe recapping techniques/devices are used and technique is demonstrated	2	Y	N	
98	Sharps (needles, blades...) are single use	1	Y	N	
99	Employees use engineering controls (e.g., forceps, hemostat, etc) to retrieve contaminated sharps from syringe, trays or containers	2	Y	N	

ACKNOWLEDGEMENT AND RECEIPT OF COPY BY OWNER/AUTHORIZED AGENT

The owner of the dental practice hereby acknowledges that by executing this document below and initialing each page's lower right-hand corner on the line "Licensee Initials," receipt of a copy of this inspection/survey form is acknowledged.

In the event the dental practice has satisfactorily completed the inspection, as noted in this inspection/survey form, the owner/licensee will receive from the Board's Executive Director and/or representative, written notice of satisfactorily completing the inspection conducted.

If an owner/licensee has commenced the practice of dentistry prior to an Initial Inspection (NAC 631.1785) at any given location that inspection shall be deemed to be a Random Inspection pursuant to NAC 631.179.

If the inspection indicates "critical" deficiencies (items listed as "#1's") the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "critical" deficiencies and that a re-inspection will be conducted within seventy-two (72) hours of the written notice. However, in the event the "critical" deficiencies noted, pose an immediate threat to the public health, safety and/or welfare the President of the Board, may without any further action of the Board, issue an Order of Summary Suspension pursuant to NAC 631.179(4).

In the event the inspection indicates "remedial action required" deficiencies (items listed as "#2's"), the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "remedial action required" deficiencies and that a re-inspection will be conducted within seven (7) days of the written notice.

In the event the inspection indicates "action required" deficiencies (items listed with a "#3"), the owner/licensee will receive written notice from the Board's Executive Director and/or representative of the "action required" deficiencies and that a re-inspection will be conducted within thirty (30) days of the written notice.

Receipt of a copy of the foregoing is hereby acknowledged;

By _____

Print name: _____

this _____ day of _____, 20____ at ____:____.m.

Title and/or position/capacity: _____

Agenda Item 6(b):

**Board recommendation that mandatory TB
Screening in Dental Office is not necessary, nor
applicable in Nevada – NAC 631.178(2)**

NAC 631.178 Adoption by reference of certain guidelines; compliance with guidelines required. ([NRS 631.190](#))

1. Each person who is licensed pursuant to the provisions of [chapter 631](#) of NRS shall comply with:

(a) The provisions of the *Guidelines for Infection Control in Dental Health-Care Settings-2003* adopted by the Centers for Disease Control and Prevention which is hereby adopted by reference. The publication is available, free of charge, from the Centers for Disease Control and Prevention at the Internet address

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>; and

(b) As applicable to the practice of dentistry, the provisions of the *Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008*, adopted by the Centers for Disease Control and Prevention which is hereby adopted by reference. The publication is available, free of charge, from the Centers for Disease Control and Prevention at the Internet address

http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/Disinfection_Nov_2008.pdf.

2. The Board will periodically review the guidelines adopted by reference in this section and determine within 30 days after the review whether any change made to the guidelines is appropriate for application in this State. If the Board does not disapprove a change to the guidelines within 30 days after the review, the change is deemed to be approved by the Board.

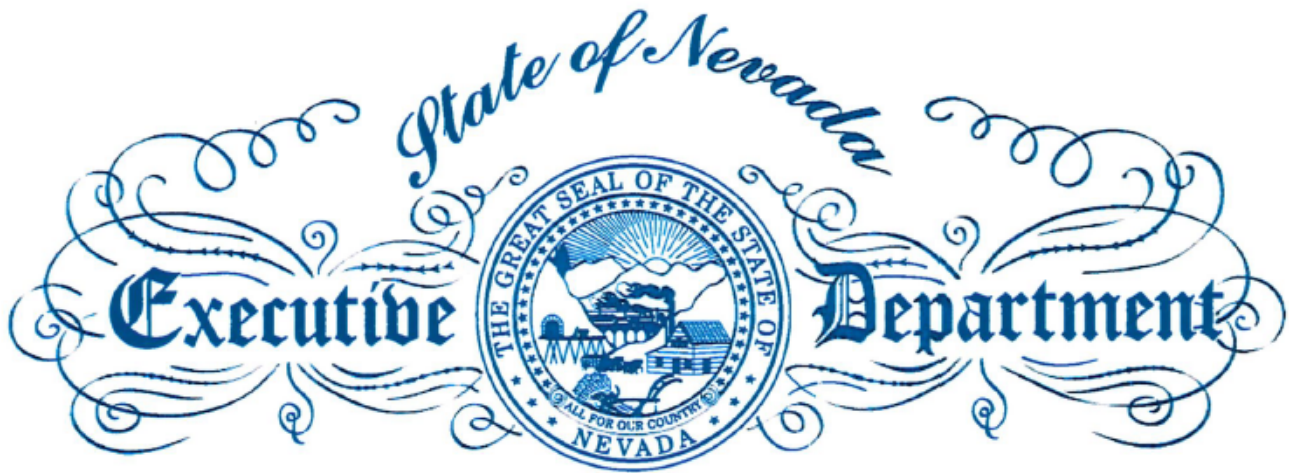
(Added to NAC by Bd. of Dental Exam'rs, eff. 9-6-96; A by R025-05, 11-17-2005; R201-09, 8-13-2010)

Agenda Item 7(a):
**Consideration for Possible Approval of
Proposed Revisions to NAC 631 Subsequent to
Public Workshop in Conformance with
Governor's Executive Order EO-003 and
EO-004 – NRS 631.190**

NRS 631.190 Powers and duties. [Effective January 1, 2020.] In addition to the powers and duties provided in this chapter, the Board shall:

1. Adopt rules and regulations necessary to carry out the provisions of this chapter.
2. Appoint such committees, review panels, examiners, officers, employees, agents, attorneys, investigators and other professional consultants and define their duties and incur such expense as it may deem proper or necessary to carry out the provisions of this chapter, the expense to be paid as provided in this chapter.
3. Fix the time and place for and conduct examinations for the granting of licenses to practice dentistry, dental hygiene and dental therapy.
4. Examine applicants for licenses to practice dentistry, dental hygiene and dental therapy.
5. Collect and apply fees as provided in this chapter.
6. Keep a register of all dentists, dental hygienists and dental therapists licensed in this State, together with their addresses, license numbers and renewal certificate numbers.
7. Have and use a common seal.
8. Keep such records as may be necessary to report the acts and proceedings of the Board. Except as otherwise provided in [NRS 631.368](#), the records must be open to public inspection.
9. Maintain offices in as many localities in the State as it finds necessary to carry out the provisions of this chapter.
10. Have discretion to examine work authorizations in dental offices or dental laboratories.

[Part 4:152:1951; A [1953, 363](#)] — (NRS A [1963, 150](#); [1967, 865](#); [1993, 2743](#); [2009, 3002](#); [2017, 989, 2848](#); [2019, 3205](#), effective January 1, 2020)



EXECUTIVE ORDER 2023-003

Order Freezing the Issuance of New Regulations and Requiring a Review of Existing Regulations by All Executive Branch Agencies, Departments, Boards and Commissions

WHEREAS, state regulations should protect workers, consumers and the environment, while promoting entrepreneurship and economic growth; and

WHEREAS, state regulations can become outdated, result in unintended consequences, create conflicts or impose an unnecessary burden on citizens, businesses or government entities; and

WHEREAS, it is in the best interest of the state of Nevada that its regulatory environment be concise, transparent, stable, balanced, predictable and thoughtfully constructed; and

WHEREAS, Nevada's current regulatory structure is too often unfocused and inefficient, contains regulations that are obsolete and includes regulations that are unnecessarily onerous, thereby limiting the economic potential of the State; and

WHEREAS, Article 5, Section 1 of the Nevada Constitution provides that, "The Supreme Executive Power of this State shall be vested in a Chief Magistrate who shall be Governor of the State of Nevada;

NOW, THEREFORE, by the authority vested in me as Governor by the Constitution and laws of the State of Nevada, it is hereby ordered as follows:

SECTION 1

Every executive branch department, agency, board and commission shall undertake a comprehensive review of the regulations subject to its enforcement. On or before, May 1, 2023 each department, agency, board and commission shall provide a report to the Governor's office detailing how the regulation subject to its enforcement can be streamlined, clarified, reduced or otherwise improved to ensure those regulations provide for the general welfare of the State without unnecessarily inhibiting economic growth.

SECTION 2:

As part of its report, every executive branch department, agency, board and commission shall provide a list of not less than ten (10) regulations recommended for removal, ranking them in descending order of priority.

SECTION 3:

Prior to submitting their respective reports, every executive branch department, agency, board and commission shall hold a public hearing, after having provided reasonable notice consistent with Chapter 233B of the Nevada Revised Statutes, to key industry stakeholders, to: (i) vet their recommended changes; (ii) solicit input as to the merits of those changes and (iii) identify other regulatory changes stakeholders feel are worthy of consideration. Stakeholder input shall be reflected in the summary of findings and recommendations included in each submitted report.

SECTION 4:

Unless specifically exempt from this Executive Order as set forth in Section 5, no new regulations shall be proposed, approved or acted on by any executive branch agency, department, board or commission until such time as this Executive Order is rescinded.

SECTION 5:

The following regulations are not subject to the suspension set forth in Section 4:

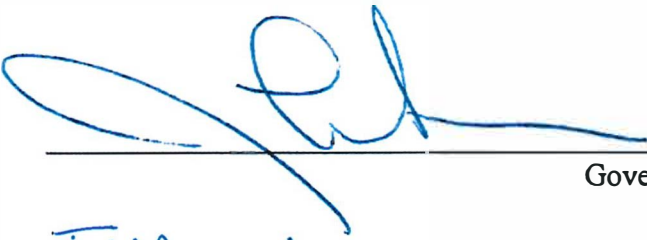
- (a) Regulations that affect public health;

- (b) Regulations that affect public safety and security;
- (c) Regulations that are necessary in the pursuit of federal funds and certifications;
- (d) Regulations that affect the application of powers, functions and duties essential to the operation of the executive branch agency, department, board or commission at issue;
- (e) Regulations that affect pending judicial deadlines; and
- (f) Regulations necessary to comply with federal law.


Until the suspension of this Executive Order, each executive branch department, agency, board and commission that intends to continue with the enactment of a proposed regulation under an exception to the freeze set forth in Section 4 shall submit a report to the Governor’s office identifying which exemption the proposed regulation falls within and detailing the problem the regulation addresses or the value to the public of the regulation, how the regulation addresses the problem or the benefits provided by the regulation, why alternate forms of regulation are insufficient to address the problem and whether other regulations currently address the problem.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Nevada to be affixed at the State Capitol in Carson City, this 12th day of January, in the year two thousand twenty-three.






Governor



Secretary of State



Deputy



EXECUTIVE ORDER 2023-004

Order Directing All Nevada Occupational and Professional Licensing Boards to Suspend the Issuance of Any New Regulations, Show Cause for All Occupational Licensing Requirements and to Provide a Recommended Pathway for Facilitating Licensure Reciprocity

WHEREAS, Nevada's economic growth and vitality is dependent upon the depth and quality of the State's workforce; and

WHEREAS, Nevada currently has 1.7 job openings for every unemployed person actively looking for work and there are acute shortages of employees in core sectors of the economy, including, without limitation, education, health care and technology; and

WHEREAS, Nevada has been identified nationally as having among the nation's most onerous occupational licensing requirements, and it is in the State's best long-term economic interest to have a fair, open, competitive and inclusive economy; and

WHEREAS, the Sunset Subcommittee of the Nevada State Legislature identified financial disparities and expressed concerns with practices of Nevada's occupational and professional licensing boards including, without limitation, those involving hearing officers, training, operating reserves, fines and fee structures, electronic access and payments, use of outside counsel and lobbyists and centralized coordination of expenditures; and

WHEREAS, The State Division of Internal Audits concluded that the current composition and actions of Nevada occupational and professional licensing Boards may expose the State to anti-trust liability; and

WHEREAS, it is in the best interest of Nevada that its occupational and professional licensing boards are seeking opportunities to attract and retain qualified workers to the State and not create unnecessary barriers to entry; and

WHEREAS, Nevada's occupational and professional licensing boards are subject to oversight by both the legislative and executive branch of government; and

WHEREAS, Article 5, Section 1 of the Nevada Constitution provides: "The supreme executive power of this State, shall be vested in a Chief Magistrate who shall be Governor of the State of Nevada."

NOW, THEREFORE by the authority vested in me as Governor by the Constitution and laws of the State of Nevada and the United States, it is hereby ordered as follows:

SECTION 1:

Effective immediately and until the suspension of this order, all Nevada occupational and professional licensing boards shall suspend the creation of any new regulations that limit or otherwise impact the ability persons to enter any occupation or profession in Nevada.

SECTION 2:

Before April 1, 2023, all Nevada occupational and professional licensing boards shall provide a report to the Office of the Governor and the Director of the Legislative Counsel Bureau detailing all regulations that restrict entry into any occupation or profession regulated by the board. Section 1 of the report shall include, at a minimum, all pertinent regulations, fees and other costs, examinations and any other requirements for entry into any occupation or profession regulated by the board. Section 2 of the report shall include, at a minimum, the board's justification for the regulations, fees and other costs, examinations and other requirements set forth in Section 1 of the report. Section 2 shall also include an analysis of the number of states that currently license

each profession or occupation regulated by the board. Section 3 of the report shall provide, at a minimum, any recommended revisions to the current regulatory construct that would expedite licensure for new workers. Finally, Section 4 of the report shall identify state compacts or any other pathways to professional licensure reciprocity that exist regionally, nationally or internationally. Section 4 shall also include a summary of states currently providing reciprocity for each profession or occupation regulated by the board to include those states that do not license the profession or occupation, and therefore, do not require reciprocity. To the extent Nevada does not currently participate in any identified reciprocity opportunity, the board’s report shall provide a justification as to why Nevada does not currently participate and shall set forth an action plan should the state decide it should participate in such a reciprocity program.

SECTION 3:

To the extent an occupation or profession is currently licensed in Nevada but is not subject to licensure requirements in the majority of states (26 or more), licensure shall be presumed to be unnecessary and that board shall provide a recommendation for phasing out such a licensing requirement by July 1, 2023.

SECTION 4:

To the extent an occupation or profession that is currently licensed in Nevada allows for licensing reciprocity in the majority of states (26 or more), reciprocity shall be presumed to be possible and appropriate, and the board shall provide a recommendation for implementing a program for reciprocity participation by July 1, 2023.

SECTION 5:

Failure for any board to fully comply with the provisions of this order shall trigger an immediate operational and financial audit of the board by the Division of Internal Audits as well as recommendation to the Legislature that the board be subject to sanctions.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Nevada to be affixed at the State Capitol in Carson City, this 12th day of January, in the year two thousand twentythree.





Governor



Secretary of State



Deputy

Agenda Item 7(a)(1):
Regulations regarding licensure pursuant to
NAC 631.030

NAC 631.030 Provision of certain information and documentation by applicant for licensure; provision of certain additional information for licensure by endorsement; requirements for use of laser radiation in practice. ([NRS 622.530](#), [631.190](#), [631.220](#), [631.230](#), [631.255](#), [631.272](#), [631.274](#), [631.290](#))

1. An applicant for licensure must provide the following information and documentation in his or her application:

- (a) The date and place of his or her birth;
- (b) Certification of graduation from an accredited dental school or college or from an accredited school or college of dental hygiene, whichever is applicable;
- (c) Whether he or she has applied for similar licensure in another state or a territory of the United States or the District of Columbia and, if so, the name of the state or territory of the United States or the District of Columbia, the date and the result of his or her application;
- (d) If he or she has practiced dentistry or dental hygiene in another state or a territory of the United States or the District of Columbia, certification from the licensing authority of each state or territory of the United States or the District of Columbia in which he or she has practiced or is practicing that he or she is in good standing and that there are not any disciplinary proceedings affecting his or her standing pending against him or her in the other state or territory of the United States or the District of Columbia;
- (e) Whether he or she has terminated or attempted to terminate a license from another state or territory of the United States or the District of Columbia and, if so, the reasons for doing so;
- (f) If he or she is not a natural born citizen of the United States, a copy of his or her certificate of naturalization or other document attesting that he or she is legally eligible to reside and work in the United States;
- (g) All scores obtained on the examination in which he or she was granted a certificate by the Joint Commission on National Dental Examinations and the date it was issued;
- (h) Whether he or she has ever been convicted of a crime involving moral turpitude or has entered a plea of nolo contendere to a charge of such a crime and, if so, the date and place of the conviction or plea and the sentence, if any, which was imposed;
- (i) Whether he or she has had any misdemeanor or felony convictions and, if so, any documents relevant to any misdemeanor or felony convictions;
- (j) Whether he or she has been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
- (k) Whether he or she has a history of substance abuse and, if so, any documents relevant to the substance abuse;
- (l) Whether he or she has been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of

Columbia, or any regional testing agency recognized by the Board and, if so, any documents relevant to the refusal;

(m) Whether he or she has been denied licensure by this State, any other state or territory of the United States or the District of Columbia and, if so, any documents relevant to the denial;

(n) Whether he or she has had his or her license to practice dentistry or dental hygiene suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry or dental hygiene, including, without limitation, receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the suspension, revocation, probation or other discipline;

(o) A copy of current certification in administering cardiopulmonary resuscitation;

(p) Whether he or she is currently involved in any disciplinary action concerning his or her license to practice dentistry or dental hygiene in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the reprimand or disciplinary action;

(q) Two sets of certified fingerprint cards and an authorization form allowing the Board to submit the fingerprint forms to law enforcement agencies for verification of background information;

(r) Whether he or she has any claims against him or her or has committed any actions that would constitute unprofessional conduct pursuant to [NRS 631.3475](#) or [NAC 631.230](#);

(s) An application form that he or she has completed and signed which:

(1) Is furnished by the Board; and

(2) Includes, without limitation, a properly executed request to release information;

(t) If applicable, the statement and proof required by subsection 3;

(u) Evidence that he or she is eligible to apply for a license to practice:

(1) Dentistry pursuant to [NRS 631.230](#); or

(2) Dental hygiene pursuant to [NRS 631.290](#);

(v) The statement required by [NRS 425.520](#); and

(w) Any other information requested by the Board.

2. An applicant for licensure by endorsement pursuant to [NRS 622.530](#) must provide the following information and documentation with his or her application:

(a) The information and documentation listed in subsection 1;

(b) A certificate granted by a nationally recognized, nationally accredited or nationally certified examination or other examination approved by the Board which proves that the applicant has achieved a passing score on such an examination; and

(c) Proof that the applicant has actively practiced dentistry or dental hygiene for the 5 years immediately preceding the date of submission of the application.

3. An applicant for licensure who wishes to use laser radiation in his or her practice of dentistry or dental hygiene must provide to the Board:

(a) A statement certifying that each laser that will be used by the licensee in the practice of dentistry or dental hygiene has been cleared by the Food and Drug Administration for use in dentistry; and

(b) Proof that he or she has successfully completed a course in laser proficiency that:

(1) Is at least 6 hours in length; and

(2) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#).

[Bd. of Dental Exam'rs, § III, eff. 7-21-82] — (NAC A 10-21-83; 12-15-87; 4-3-89; 9-6-96; R169-01, 4-5-2002; R139-05, 12-29-2005; R159-08, 4-23-2009; R143-17, 5-16-2018)

Agenda Item 7(a)(2):
**Regulations regarding rejection/return of
application pursuant to NAC 631.050**

NAC 631.050 Rejection and return of application; reconsideration; petition for review by Board. ([NRS 631.160](#), [631.190](#), [631.230](#), [631.260](#), [631.290](#))

1. If the Executive Director or Secretary-Treasurer finds that:
 - (a) An application is:
 - (1) Deficient; or
 - (2) Not in the proper form; or
 - (b) The applicant has:
 - (1) Provided incorrect information;
 - (2) Not attained the scores required by [chapter 631](#) of NRS; or
 - (3) Not submitted the required fee,

↪ the Executive Director or Secretary-Treasurer shall reject the application and return it to the applicant with the reasons for its rejection.
 2. If the Executive Director or Secretary-Treasurer finds that an applicant has:
 - (a) A felony conviction;
 - (b) A misdemeanor conviction;
 - (c) Been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
 - (d) A history of substance abuse;
 - (e) Been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of Columbia;
 - (f) Been denied licensure by this State, any other state or territory of the United States or the District of Columbia;
 - (g) Had his or her license to practice dentistry or dental hygiene suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry or dental hygiene, including, without limitation, receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia;
 - (h) Not actively practiced dentistry or dental hygiene, as applicable, for 2 years or more before the date of the application to the Board; or
 - (i) Is currently involved in any disciplinary action concerning his or her license to practice dentistry or dental hygiene in this State, another state or territory of the United States or the District of Columbia,

↪ the Executive Director or Secretary-Treasurer may reject the application. If rejected, the application must be returned to the applicant with the reasons for its rejection.
 3. If an application is rejected pursuant to subsection 2, the applicant may furnish additional relevant information to the Executive Director or Secretary-Treasurer, and request that the application be reconsidered. If an application is rejected following reconsideration by the Executive Director or Secretary-Treasurer, the applicant may petition the Board for a review of the application at the next regularly scheduled meeting of the Board.
- [Bd. of Dental Exam'rs, § V, eff. 7-21-82] — (NAC A 4-3-89; 9-6-96; R003-99, 4-3-2000; R169-01, 4-5-2002; R158-08, 12-17-2008; R159-08, 4-23-2009; R143-17, 5-16-2018)

Agenda Item 7(a)(3):
Regulations regarding Continued
Education pursuant to NAC 631.175

NAC 631.175 Continuing education: Approved subjects; minimum requirements for clinical subjects; minimum requirements for dentists registered to dispense controlled substances; maximum credit for certain types of courses and activities. ([NRS 631.190](#), [631.342](#), [631.344](#))

1. Approved subjects for continuing education in dentistry and dental hygiene are:
 - (a) Clinical subjects, including, without limitation:
 - (1) Dental and medical health;
 - (2) Preventive services;
 - (3) Dental diagnosis and treatment planning; and
 - (4) Dental clinical procedures, including corrective and restorative oral health procedures and basic dental sciences, dental research and new concepts in dentistry; and
 - (b) Nonclinical subjects, including, without limitation:
 - (1) Dental practice organization and management;
 - (2) Patient management skills;
 - (3) Methods of health care delivery; and
 - (4) Teaching methodology.
2. In completing the hours of continuing education required pursuant to [NAC 631.173](#), a dentist must annually complete at least 15 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 30 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the dentist.
3. In completing the hours of continuing education required pursuant to [NAC 631.173](#), a dental hygienist must annually complete at least 12 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 24 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the dental hygienist.
4. In completing the hours of continuing education required pursuant to [NAC 631.173](#), a dentist or dental hygienist must annually complete at least 2 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in [NAC 631.178](#) or biennially complete at least 4 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in [NAC 631.178](#), as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the dentist or dental hygienist.
5. In completing the hours of continuing education required pursuant to [NAC 631.173](#), a dentist who is registered to dispense controlled substances pursuant to [NRS 453.231](#) must complete at least 2 hours of training relating specifically to the misuse and abuse of controlled substances, the prescribing of opioids or addiction during each period of licensure.

6. The Board will credit, as a maximum in any one year of an annual or biennial licensing period, the following number of hours of instruction for the following types of courses or activities:

(a) For approved study by a group, 3 hours.

(b) For attendance at a meeting or convention of a dental or dental hygiene society, 1 hour for each meeting, but not more than 3 hours, exclusive of hours of continuing education offered in conjunction with the meeting.

(c) For courses completed via home study, on-line study, self-study or journal study through correspondence, webinar, compact disc or digital video disc, not more than 50 percent of the number of hours of continuing education required by subsection 1 or 2 of [NAC 631.173](#), as applicable.

(d) For all other courses conducted by an approved instructor, the number of hours completed by the dentist or dental hygienist.

(e) For approved dental or dental hygiene services provided in approved nonprofit settings, 6 hours, except that not more than 3 hours will be allowed for any day of volunteer services provided.

(Added to NAC by Bd. of Dental Exam'rs, eff. 9-16-85; A 12-15-87; 4-3-89; 9-6-96; R231-03, 5-25-2004; R063-05, 12-29-2005; R149-06, 9-18-2006; R159-08, 4-23-2009; R201-09, 8-13-2010; R020-14, 6-23-2014; R044-17, 5-16-2018)

Agenda Item 7(a)(4):
Regulations regarding random
inspections pursuant to NAC 631.179

NAC 631.179 Random inspection of office or facility; subsequent action by Executive Director. ([NRS 631.190](#), [631.363](#))

1. The Executive Director may assign agents of the Board to conduct a random inspection of an office or facility in this State where dental treatments are to be performed to ensure that the licensed dentist and the personnel supervised by the dentist are in compliance with the guidelines adopted by reference in [NAC 631.178](#). Random inspections conducted pursuant to this subsection may be conducted during normal business hours without notice to the licensed dentist who owns the office or facility to be inspected.

2. Not later than 30 days after agents of the Board have completed a random inspection of an office or facility in this State where dental treatments are to be performed to ensure compliance with the guidelines adopted by reference in [NAC 631.178](#), the agents shall issue a report to the Executive Director indicating whether the licensed dentist and the personnel supervised by the dentist are in compliance with the guidelines adopted by reference in [NAC 631.178](#). If the report indicates that the licensed dentist and the personnel supervised by the dentist:

(a) Are in compliance with the guidelines adopted by reference in [NAC 631.178](#), the Executive Director shall, without any further action by the Board, issue a written notice of the agents' findings to the licensed dentist who owns the office or facility.

(b) Are not in compliance with the guidelines adopted by reference in [NAC 631.178](#), the Executive Director shall, without any further action by the Board, issue a written notice which identifies deficiencies to the licensed dentist who owns the office or facility.

3. Not later than 72 hours after a licensed dentist receives a written notice of deficiencies issued pursuant to paragraph (b) of subsection 2:

(a) The Executive Director shall assign agents of the Board to conduct a reinspection of the office or facility to determine if the licensed dentist and the personnel supervised by the dentist have taken corrective measures; and

(b) The agents assigned pursuant to paragraph (a) shall conduct the reinspection and issue a report to the Executive Director indicating whether the licensed dentist and the personnel supervised by the dentist are in compliance with the guidelines adopted by reference in [NAC 631.178](#). If the report indicates that the licensed dentist and the personnel supervised by the dentist:

(1) Are in compliance with the guidelines adopted by reference in [NAC 631.178](#), the Executive Director shall, without any further action by the Board, issue a written notice of the agents' findings to the licensed dentist who owns the office or facility.

(2) Are not in compliance with the guidelines adopted by reference in [NAC 631.178](#), the Executive Director may, without any further action by the Board, issue an order to the licensed dentist who owns the office or facility and all other licensees employed at the office or facility that any or all of those licensees or personnel must immediately cease and desist from performing dental treatments and that some or all

dental treatments must cease to be performed at the office or facility until a hearing is held before the Board. The hearing before the Board must be convened not later than 30 days after the Executive Director issues the order to cease and desist.

4. Pursuant to subsection 3 of [NRS 233B.127](#), if a random inspection of an office or facility conducted pursuant to this section 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 licensed dentist who owns the office or facility and the licenses of any or all of the other licensees employed at the office or facility pending proceedings for revocation or other action. An order for summary suspension issued by the President of the Board must contain findings of the exigent circumstances which warrant the issuance of the order for 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 by R201-09, eff. 8-13-2010)

Agenda Item 7(a)(5):
Regulations regarding dental hygienists
pursuant to NAC 631.210

NAC 631.210 Dental hygienists: Authorization to perform certain services; referral of patient to authorizing dentist for certain purposes. ([NRS 631.190](#), [631.310](#), [631.313](#), [631.317](#))

1. A dentist who is licensed in this State may authorize a dental hygienist in his or her employ to perform the following acts before a patient is examined by the dentist:

(a) Expose radiographs.

(b) Conduct an assessment of the oral health of the patient through medical and dental histories, radiographs, indices, risk assessments and intraoral and extraoral procedures that analyze and identify the oral health needs and problems of the patient.

(c) After conducting an assessment pursuant to paragraph (b), develop a dental hygiene care plan to address the oral health needs and problems of the patient.

(d) Take impressions for the preparation of diagnostic models.

↪ The dental hygienist must obtain authorization from the licensed dentist of the patient on whom the services authorized pursuant to this subsection are to be performed.

2. A dentist who is licensed in this State may authorize a dental hygienist in his or her employ to:

(a) Remove stains, deposits and accretions, including dental calculus.

(b) Smooth the natural and restored surface of a tooth by using the procedures and instruments commonly used in oral prophylaxis, except that an abrasive stone, disc or bur may be used only to polish a restoration. As used in this paragraph, "oral prophylaxis" means the preventive dental procedure of scaling and polishing which includes the removal of calculus, soft deposits, plaques and stains and the smoothing of unattached tooth surfaces in order to create an environment in which hard and soft tissues can be maintained in good health by the patient.

(c) Provide dental hygiene care that includes:

(1) Assessment of the oral health of patients through medical and dental histories, radiographs, indices, risk assessments and intraoral and extraoral procedures that analyze and identify the oral health needs and problems of patients.

(2) Implementation of a dental hygiene care plan to address the oral health needs and problems of patients described in subparagraph (1).

(3) Evaluation of oral and periodontal health after the implementation of the dental hygiene care plan described in subparagraph (2) in order to identify the subsequent treatment, continued care and referral needs of the patient.

(d) Take the following types of impressions:

(1) Those used for the preparation of diagnostic models;

(2) Those used for the fabrication of temporary crowns or bridges; and

(3) Those used for the fabrication of temporary removable appliances, provided no missing teeth are replaced by those appliances.

(e) Perform subgingival curettage.

(f) Remove sutures.

(g) Place and remove a periodontal pack.

(h) Remove excess cement from cemented restorations and orthodontic appliances. A dental hygienist may not use a rotary cutting instrument to remove excess cement from restorations or orthodontic appliances.

- (i) Train and instruct persons in the techniques of oral hygiene and preventive procedures.
- (j) Recement and repair temporary crowns and bridges.
- (k) Recement permanent crowns and bridges with nonpermanent material as a palliative treatment.
- (l) Place a temporary restoration with nonpermanent material as a palliative treatment.
- (m) Administer local intraoral chemotherapeutic agents in any form except aerosol, including, but not limited to:
 - (1) Antimicrobial agents;
 - (2) Fluoride preparations;
 - (3) Topical antibiotics;
 - (4) Topical anesthetics; and
 - (5) Topical desensitizing agents.
- (n) Apply pit and fissure sealant to the dentition for the prevention of decay.

☞ Before performing any of the services set forth in this subsection, the dental hygienist must obtain authorization from the licensed dentist of the patient on whom the services are to be performed and the patient must have been examined by that dentist not more than 18 months before the services are to be performed. After performing any of the services set forth in this subsection, the dental hygienist shall refer the patient to the authorizing dentist for follow-up care or any necessary additional procedures that the dental hygienist is not authorized to perform.

3. A dentist who is licensed in this State may authorize a dental hygienist in his or her employ and under his or her supervision to:

- (a) Place and secure orthodontic ligatures.
- (b) Fabricate and place temporary crowns and bridges.
- (c) Fit orthodontic bands and prepare teeth for orthodontic bands if the bands are cemented or bonded, or both, into the patient's mouth by the dentist who authorized the dental hygienist to perform this procedure.
- (d) Perform nonsurgical cytologic testing.
- (e) Apply and activate agents for bleaching teeth with a light source.
- (f) Use a laser that has been cleared by the Food and Drug Administration to perform intrasulcular periodontal procedures or tooth whitening procedures if:
 - (1) The use of such a laser for those purposes is within the scope of the education, experience and training of the dental hygienist;
 - (2) Before operating the laser, the dental hygienist has provided proof to the supervising dentist that the dental hygienist has successfully completed a course in laser proficiency that:
 - (I) Is at least 6 hours in length; and
 - (II) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#); and
 - (3) The supervising dentist has successfully completed a course in laser proficiency that:
 - (I) Is at least 6 hours in length; and

(II) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#).

↪ The dental hygienist must obtain authorization from the licensed dentist of the patient on whom the services authorized pursuant to this subsection are to be performed.

4. If a dentist who is licensed in this State has in his or her employ and under his or her supervision a dental hygienist who has:

(a) Successfully completed a course of continuing education in the administering of local anesthetics or nitrous oxide-oxygen analgesia, or both, which has been approved by the Board; or

(b) Graduated from an accredited program of dental hygiene which includes the administering of local anesthetics or nitrous oxide-oxygen analgesia, or both, in its curriculum,

È the dentist may authorize the dental hygienist to administer local anesthetics or nitrous oxide-oxygen analgesia, or both, as appropriate, if the dental hygienist has received from the Board a certificate or permit certifying the hygienist for this level of administration. The dental hygienist must obtain the authorization from the licensed dentist of the patient on whom the services are to be performed.

5. A dental hygienist in a health care facility may administer local intraoral chemotherapeutic agents and, if he or she has complied with paragraph (a) or (b) of subsection 4, may administer local anesthetics or nitrous oxide-oxygen analgesia, or both, as appropriate, if he or she first:

(a) Obtains written authorization from the licensed dentist of the patient to whom the local anesthetics, nitrous oxide-oxygen analgesia or local intraoral chemotherapeutic agents are to be administered; and

(b) Submits to the Secretary-Treasurer a written confirmation from the director of the health care facility that the facility has licensed medical personnel and necessary emergency supplies and equipment that will be available when the local anesthetics, nitrous oxide-oxygen analgesia or local intraoral chemotherapeutic agents are administered.

6. The Board may authorize a dental hygienist to perform the services set forth in subsection 1 and paragraphs (a) to (n), inclusive, of subsection 2 without supervision by a dentist and without authorization from the licensed dentist of the patient on whom the services are to be performed, at a health facility, a school or a place in this State approved by the Board after the Board:

(a) Issues a special endorsement of the dental hygienist's license.

(b) Approves the treatment protocol submitted by the dental hygienist which includes an explanation of the methods that the dental hygienist will use to:

(1) Treat patients; and

(2) Refer patients to a dentist for:

(I) Follow-up care;

(II) Diagnostic services; and

(III) Any service that the dental hygienist is not authorized to perform.

7. The Board may revoke the authorization described in subsection 6 if the:

(a) Dental hygienist fails to renew his or her license or it is cancelled, suspended or revoked;

(b) Board receives a complaint filed against the dental hygienist;

(c) Dental hygienist commits an act which constitutes a cause for disciplinary action; or

(d) Dental hygienist violates any provision of this chapter or [chapter 631](#) of NRS.

↪ Nothing in this subsection prohibits a dental hygienist from reapplying for authorization to perform the services described in subsection 6 if the Board revokes the authorization pursuant to this subsection.

8. As used in this section:

(a) “Health care facility” has the meaning ascribed to it in [NRS 162A.740](#).

(b) “Health facility” has the meaning ascribed to it in subsection 6 of [NRS 449.260](#).

(c) “School” means an elementary, secondary or postsecondary educational facility, public or private, in this State.

[Bd. of Dental Exam’rs, § XXIII, eff. 7-21-82] — (NAC A 7-30-84; 4-3-89; 3-11-96; R154-97, 1-14-98; R217-99, 4-3-2000; R231-03, 5-25-2004; R139-05, 12-29-2005; R066-11, 2-15-2012; R119-15, 6-28-2016)

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

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

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

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

NRS 631.3453 Exemption from requirement to designate actively licensed dentist as dental director of dental office or clinic. The provisions of [NRS 631.3452](#) requiring the designation of an actively licensed dentist as a dental director do not apply to a program for the provision of public health dental hygiene or dental therapy if:

1. The program is owned or operated by a dental hygienist who holds a special endorsement of his or her license to practice public health dental hygiene pursuant to [NRS 631.287](#) or a dental therapist licensed pursuant to this chapter; and

2. Each person employed to provide public health dental hygiene pursuant to the program is either a dental hygienist who holds a special endorsement of his or her license to practice public health dental hygiene pursuant to [NRS 631.287](#) or a dental therapist licensed pursuant to this chapter.

(Added to NRS by [2013, 478](#); A [2019, 3217](#))

Agenda Item 7(a)(6):
**Regulations regarding anesthesia/
sedation permits pursuant to NAC
631.2219**

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)

Agenda Item 7(a)(7):
**Regulations regarding unprofessional
conduct pursuant NAC 631.230**

NAC 631.230 Unprofessional
[631.190](#), [631.346](#), [631.347](#), [631.350](#))

conduct. ([NRS](#)

1. In addition to those specified by statute and subsection 3 of [NAC 631.177](#), the following acts constitute unprofessional conduct:

- (a) The falsification of records of health care or medical records.
- (b) Writing prescriptions for controlled substances in such excessive amounts as to constitute a departure from prevailing standards of acceptable dental practice.
- (c) The consistent use of dental procedures, services or treatments which constitute a departure from prevailing standards of acceptable dental practice even though the use does not constitute malpractice or gross malpractice.
- (d) The acquisition of any controlled substances from any pharmacy or other source by misrepresentation, fraud, deception or subterfuge.
- (e) Making an unreasonable additional charge for laboratory tests, radiology services or other testing services which are ordered by the dentist and performed outside his or her own office.
- (f) The failure to report to the Board as required in [NAC 631.155](#) or to sign any affidavit required by the Board.
- (g) Employing any person in violation of [NAC 631.260](#) or failing to report to the Board as required by that section.
- (h) The failure of a dentist who is administering or directly supervising the administration of general anesthesia, deep sedation or moderate sedation to be physically present while a patient is under general anesthesia, deep sedation or moderate sedation.
- (i) Administering moderate sedation to more than one patient at a time, unless each patient is directly supervised by a person authorized by the Board to administer moderate sedation.
- (j) Administering general anesthesia or deep sedation to more than one patient at a time.
- (k) The failure to have any patient who is undergoing general anesthesia, deep sedation or moderate sedation monitored with a pulse oximeter or similar equipment required by the Board.
- (l) Allowing a person who is not certified in basic cardiopulmonary resuscitation to care for any patient who is undergoing general anesthesia, deep sedation or moderate sedation.
- (m) The failure to obtain a patient's written, informed consent before administering general anesthesia, deep sedation or moderate sedation to the patient or, if the patient is a minor, the failure to obtain his or her parent's or guardian's consent 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.
- (n) The failure to maintain a record of all written, informed consents given for the administration of general anesthesia, deep sedation or moderate sedation.

(o) The failure to report to the Board, in writing, the death or emergency hospitalization of any patient to whom general anesthesia, deep sedation or moderate sedation was administered. The report must be made within 30 days after the event.

(p) Allowing a person to administer general anesthesia, deep sedation or moderate sedation to a patient if the person does not hold a permit to administer such anesthesia or sedation unless the anesthesia or sedation is administered in a facility for which a permit is held as required by [NRS 449.442](#).

(q) The failure of a dentist who owns a dental practice to provide copies of the records of a patient to a dentist or dental hygienist who provided the services as an employee or independent contractor of the dentist when the records are the basis of a complaint before the Board. Nothing in this paragraph relieves the treating dentist or dental hygienist from the obligation to provide records of the patient to the Board.

(r) The failure of a dentist who owns a dental practice to verify the license of a dentist or dental hygienist before offering employment or contracting for services with the dentist or dental hygienist as an independent contractor.

(s) The failure of a dentist who owns a dental practice and participates in the diagnosis and treatment of any patient to ensure that the services rendered by a dentist or dental hygienist who is an employee or independent contractor of that dentist meet the prevailing standards of acceptable dental practice. If a dentist or dental hygienist who is an employee or independent contractor of the dentist is found by substantial evidence to have provided services below the prevailing standards of acceptable dental practice, the dentist who owns the dental practice may be required to reimburse the patient to whom the services were provided pursuant to paragraph (l) of subsection 1 of [NRS 631.350](#).

(t) The failure of a dentist who owns a dental practice to record the name of the dentist or dental hygienist who provided the services in the records of a patient each time the services are rendered.

(u) The failure of a dentist who is registered to dispense controlled substances with the State Board of Pharmacy pursuant to [chapter 453](#) of NRS to conduct annually a minimum of one self-query regarding the issuance of controlled substances through the Prescription Monitoring Program of the State Board of Pharmacy.

2. For purposes of [NRS 631.347](#), a plan or practice requiring a patient to select a dentist from a specific group does not provide the patient with a reasonable opportunity to select a dentist of his or her own choice, and constitutes unprofessional conduct on the part of any dentist participating in such a plan or practice, unless it, or another plan concurrently available to the patient, allows the patient to:

(a) Have an annual opportunity, lasting for a minimum of 30 days, to select a dentist of his or her own choice for all dental work to be performed during the subsequent 12 months. Any new patient added to the plan or practice must immediately be given an initial opportunity, lasting at least 30 days, to select the coverage supplied by the plan or practice or a dentist of his or her own choice.

(b) Receive the allowance for a procedure performed by a dentist of his or her own choice in substantially the same amount as he or she would if he or she used the services of one of the group of dentists specified by the plan or practice.

[Bd. of Dental Exam'rs, § XXVII, eff. 7-21-82] — (NAC A 10-21-83; 7-30-84; 9-13-85; 9-16-85; 4-3-89; 11-28-90; R005-99, 9-7-2000; R023-06, 9-18-2006; R159-08, 4-23-2009; R020-14, 6-23-2014; R004-17, 5-16-2018)

Agenda Item 7(a)(8):
**Regulations regarding investigations of a
complaint against a licensee pursuant to
NAC 631.250**

NAC 631.250 Investigation by Board. ([NRS 631.190](#), [631.360](#), [631.363](#))

1. If the Board conducts an investigation upon a complaint against a licensee, the Board will not limit the scope of its investigation to the matters set forth in the complaint but will extend the investigation to any additional matters which appear to constitute a violation of any provision of [chapter 631](#) of NRS or of this chapter.

2. If, after its investigation, the Board dismisses the complaint, the dismissal does not operate as a limitation on or a detriment to any subsequent investigation or other action by the Board.

3. Whenever the Board directs that an investigation be conducted into a disciplinary matter, the results of the investigation or any information relating to the investigation will not be examined by and must not be disclosed to, the members of the Board before the Board's hearing on the matter.

[Bd. of Dental Exam'rs, § XVIII, eff. 7-21-82]

Agenda Item 7(a)(9):
**Regulations regarding the disciplinary process
pursuant to NAC 631, NAC 631.230, NAC
631.240, NAC 631.250, and NAC 631.255**

NAC 631.230 Unprofessional
[631.190](#), [631.346](#), [631.347](#), [631.350](#))

conduct. ([NRS](#)

1. In addition to those specified by statute and subsection 3 of [NAC 631.177](#), the following acts constitute unprofessional conduct:

- (a) The falsification of records of health care or medical records.
- (b) Writing prescriptions for controlled substances in such excessive amounts as to constitute a departure from prevailing standards of acceptable dental practice.
- (c) The consistent use of dental procedures, services or treatments which constitute a departure from prevailing standards of acceptable dental practice even though the use does not constitute malpractice or gross malpractice.
- (d) The acquisition of any controlled substances from any pharmacy or other source by misrepresentation, fraud, deception or subterfuge.
- (e) Making an unreasonable additional charge for laboratory tests, radiology services or other testing services which are ordered by the dentist and performed outside his or her own office.
- (f) The failure to report to the Board as required in [NAC 631.155](#) or to sign any affidavit required by the Board.
- (g) Employing any person in violation of [NAC 631.260](#) or failing to report to the Board as required by that section.
- (h) The failure of a dentist who is administering or directly supervising the administration of general anesthesia, deep sedation or moderate sedation to be physically present while a patient is under general anesthesia, deep sedation or moderate sedation.
- (i) Administering moderate sedation to more than one patient at a time, unless each patient is directly supervised by a person authorized by the Board to administer moderate sedation.
- (j) Administering general anesthesia or deep sedation to more than one patient at a time.
- (k) The failure to have any patient who is undergoing general anesthesia, deep sedation or moderate sedation monitored with a pulse oximeter or similar equipment required by the Board.
- (l) Allowing a person who is not certified in basic cardiopulmonary resuscitation to care for any patient who is undergoing general anesthesia, deep sedation or moderate sedation.
- (m) The failure to obtain a patient's written, informed consent before administering general anesthesia, deep sedation or moderate sedation to the patient or, if the patient is a minor, the failure to obtain his or her parent's or guardian's consent 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.
- (n) The failure to maintain a record of all written, informed consents given for the administration of general anesthesia, deep sedation or moderate sedation.

(o) The failure to report to the Board, in writing, the death or emergency hospitalization of any patient to whom general anesthesia, deep sedation or moderate sedation was administered. The report must be made within 30 days after the event.

(p) Allowing a person to administer general anesthesia, deep sedation or moderate sedation to a patient if the person does not hold a permit to administer such anesthesia or sedation unless the anesthesia or sedation is administered in a facility for which a permit is held as required by [NRS 449.442](#).

(q) The failure of a dentist who owns a dental practice to provide copies of the records of a patient to a dentist or dental hygienist who provided the services as an employee or independent contractor of the dentist when the records are the basis of a complaint before the Board. Nothing in this paragraph relieves the treating dentist or dental hygienist from the obligation to provide records of the patient to the Board.

(r) The failure of a dentist who owns a dental practice to verify the license of a dentist or dental hygienist before offering employment or contracting for services with the dentist or dental hygienist as an independent contractor.

(s) The failure of a dentist who owns a dental practice and participates in the diagnosis and treatment of any patient to ensure that the services rendered by a dentist or dental hygienist who is an employee or independent contractor of that dentist meet the prevailing standards of acceptable dental practice. If a dentist or dental hygienist who is an employee or independent contractor of the dentist is found by substantial evidence to have provided services below the prevailing standards of acceptable dental practice, the dentist who owns the dental practice may be required to reimburse the patient to whom the services were provided pursuant to paragraph (l) of subsection 1 of [NRS 631.350](#).

(t) The failure of a dentist who owns a dental practice to record the name of the dentist or dental hygienist who provided the services in the records of a patient each time the services are rendered.

(u) The failure of a dentist who is registered to dispense controlled substances with the State Board of Pharmacy pursuant to [chapter 453](#) of NRS to conduct annually a minimum of one self-query regarding the issuance of controlled substances through the Prescription Monitoring Program of the State Board of Pharmacy.

2. For purposes of [NRS 631.347](#), a plan or practice requiring a patient to select a dentist from a specific group does not provide the patient with a reasonable opportunity to select a dentist of his or her own choice, and constitutes unprofessional conduct on the part of any dentist participating in such a plan or practice, unless it, or another plan concurrently available to the patient, allows the patient to:

(a) Have an annual opportunity, lasting for a minimum of 30 days, to select a dentist of his or her own choice for all dental work to be performed during the subsequent 12 months. Any new patient added to the plan or practice must immediately be given an initial opportunity, lasting at least 30 days, to select the coverage supplied by the plan or practice or a dentist of his or her own choice.

(b) Receive the allowance for a procedure performed by a dentist of his or her own choice in substantially the same amount as he or she would if he or she used the services of one of the group of dentists specified by the plan or practice.

[Bd. of Dental Exam'rs, § XXVII, eff. 7-21-82] — (NAC A 10-21-83; 7-30-84; 9-13-85; 9-16-85; 4-3-89; 11-28-90; R005-99, 9-7-2000; R023-06, 9-18-2006; R159-08, 4-23-2009; R020-14, 6-23-2014; R004-17, 5-16-2018)

NAC 631.240 Complaints against licensees. ([NRS 631.190](#))

1. Any aggrieved person may file a complaint with the Board against a licensee. The complaint must:

- (a) Be written;
- (b) Be signed and verified by the complainant; and
- (c) Contain specific charges.

2. The Board will send a notice and a copy of the complaint to the licensee. The licensee must file a response to the complaint within 15 days after receiving the notice and copy of the complaint.

[Bd. of Dental Exam'rs, § XVII, eff. 7-21-82] — (NAC A 4-3-89)

NAC 631.250 Investigation by Board. ([NRS 631.190](#), [631.360](#), [631.363](#))

1. If the Board conducts an investigation upon a complaint against a licensee, the Board will not limit the scope of its investigation to the matters set forth in the complaint but will extend the investigation to any additional matters which appear to constitute a violation of any provision of [chapter 631](#) of NRS or of this chapter.

2. If, after its investigation, the Board dismisses the complaint, the dismissal does not operate as a limitation on or a detriment to any subsequent investigation or other action by the Board.

3. Whenever the Board directs that an investigation be conducted into a disciplinary matter, the results of the investigation or any information relating to the investigation will not be examined by and must not be disclosed to, the members of the Board before the Board's hearing on the matter.

[Bd. of Dental Exam'rs, § XVIII, eff. 7-21-82]

NAC 631.255 Record of hearing conducted by investigator or hearing officer or panel. ([NRS 631.190](#), [631.350](#), [631.360](#), [631.363](#)) If the Board has delegated its responsibility pursuant to the provisions of subsection 3 of [NRS 631.350](#) or [NRS 631.363](#), the hearing conducted as a result of that delegation of authority must be recorded and transcribed in permanent form by a shorthand reporter licensed to do business in this State.

(Added to NAC by Bd. of Dental Exam'rs, eff. 4-3-89)

Agenda Item 7(a)(10):
Regulations regarding dental therapy
pursuant to NAC 631

**PROPOSED REGULATION OF THE
BOARD OF DENTAL EXAMINERS OF NEVADA**

LCB File No. R072-22

August 30, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets ~~(omitted material)~~ is material to be omitted.

AUTHORITY: §§ 1, 2, 11, 15, 16, 21, 25, 26 and 28, NRS 631.190; § 3, NRS 631.190 and 631.312; § 4, NRS 631.190 and 631.3121; § 5, NRS 631.190, 631.3122 and 631.3123; § 6, NRS 631.190 and 631.3124; § 7, NRS 631.190 and 631.350; § 8, NRS 631.190 and 631.345; § 9, NRS 622.530, 631.190 631.220, 631.255, 631.272, 631.274, 631.290 and 631.312; §§ 10 and 12, NRS 631.190 and 631.330; § 13, NRS 631.160, 631.190, 631.260, 631.290 and 631.312; § 14, NRS 631.190 and 631.240; § 17, NRS 631.190 and 631.335; § 18 and 19, NRS 631.190 and 631.342; § 20, NRS 631.190, 631.330, 631.335 and 631.342; § 22, NRS 631.190, 631.250 and 631.255; § 23, NRS 631.190, 631.313 and 631.317; § 24, NRS 631.190, 631.346 and 631.350; § 27, NRS 631.190 and 631.215.

A REGULATION relating to oral health; prescribing certain qualifications for licensure as a dental therapist; prescribing certain requirements governing the practice of a dental therapist; authorizing the summary suspension of authorization for a dentist to supervise a dental therapist under certain circumstances; making various provisions relating to providers of oral healthcare also applicable to dental therapists; prescribing certain fees; providing that mandatory supervision constitutes discipline for certain purposes; authorizing the Board of Dental Examiners of Nevada to require certain persons to pass an examination before the issuance or reinstatement of a license to practice dentistry, dental therapy or dental hygiene; requiring a licensee to notify the Board of certain information; prescribing certain requirements relating to an applicant for a license who has previously voluntarily surrendered his or her license; prescribing continuing education requirements for dental therapists; expanding the circumstances under which the failure to provide proof of continuing education constitutes unprofessional conduct; revising provisions governing audits of compliance with continuing education requirements; expanding the specialties for which the Board may issue a specialist's license; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Senate Bill No. 366 of the 2019 Legislative Session enacted provisions to authorize the practice of dental therapy by licensed dental therapists in this State. (Chapter 532, Statutes of Nevada 2019, at page 3198) Existing law requires the Board of Dental Examiners of Nevada to adopt rules and regulations necessary to carry out the provisions relating to the profession and

practice of dental therapy and the examination of applicants for licensure as dental therapists. (NRS 631.190)

Existing law requires a person who applies for a license to practice dental therapy to be a graduate of a program of dental therapy that: (1) is accredited by a regional education accrediting organization; (2) is accredited by the Commission on Dental Accreditation of the American Dental Association; and (3) includes not less than 2 years of academic instruction. (NRS 631.312) **Section 3** of this regulation additionally requires such a program of dental therapy to include: (1) at least 500 hours of clinical practice; and (2) at least 3 years of academic instruction.

Existing law requires an applicant for a license to practice dental therapy to have passed certain clinical examinations. (NRS 631.3121) **Section 4** of this regulation prescribes the required contents of those clinical examinations.

Existing law requires a dental therapist to practice under the authorization and supervision of a dentist. A dental therapist is only authorized to perform the services that are within the scope of his or her supervising dentist, authorized by the dentist and provided according to written practices and protocols. (NRS 631.3122) Existing law further requires: (1) a dental therapist to enter into a written practice agreement with his or her authorizing dentist; and (2) such a written practice agreement to include certain provisions. (NRS 631.3122, 631.3123) **Section 5** of this regulation additionally requires a written practice agreement to include certain provisions regarding the maintenance of records and responding to medical emergencies.

Existing law authorizes the Board to discipline a person who engages in unprofessional conduct or violates any regulation adopted by the Board. (NRS 631.350) **Section 7** of this regulation authorizes the Board to summarily suspend a dentist from supervising a dental therapist if an investigation reasonably finds that the safety, health or welfare of the public or a patient is at risk. **Section 7** requires a hearing to be held and a decision made concerning the summary suspension not later than 60 days after the issuance of the order unless the dentist and the Board agree to a longer time period.

Existing law authorizes a dental therapist to perform certain procedures. (NRS 631.3124) **Section 6** of this regulation prescribes the procedures that a dental therapist is authorized to perform: (1) under the direct supervision of the authorizing dentist; (2) under the indirect supervision of the authorizing dentist; and (3) without the authorizing dentist examining the patient before the procedure. **Sections 2 and 6** of this regulation defines the terms “direct supervision” and “indirect supervision,” respectively, for those purposes.

Sections 8-10, 12, 13, 15, 17, 21 and 23-28 of this regulation add references to dental therapy and dental therapists to certain provisions governing licensing and standards of practice for providers of oral health care. **Sections 18-20** of this regulation prescribe continuing education requirements for dental therapists.

Existing law requires the Board to establish by regulation fees associated with the performance of its duties. (NRS 631.345) Existing regulations establish a fee for the inspection of a facility required by the Board to ensure compliance with infection control guidelines. (NAC 631.029) **Section 8** of this regulation adds a reduced fee for a second or subsequent inspection of a facility to ensure compliance with infection control guidelines. **Section 8** also imposes a fee for a second or subsequent audit of a licensee to ensure compliance with continuing education requirements.

Existing regulations: (1) require an applicant for licensure as a dentist, dental therapist or dental hygienist to provide to the Board information concerning discipline imposed against the

applicant in another jurisdiction; and (2) authorize the Executive Director or Secretary-Treasurer of the Board to reject an application for licensure if the applicant has been subject to such discipline. (NAC 631.030, 631.050) **Sections 9 and 13** of this regulation clarify that being subject to mandatory supervision constitutes discipline for those purposes.

Existing law provides that the term “substance abuse” is a term disfavored for use in the Nevada Revised Statutes and the Nevada Administrative Code. (NRS 220.125, 233B.062) **Sections 9 and 13** replace the term “substance abuse” with terminology that is preferred by the Legislature.

Section 11 of this regulation removes an obsolete reference to an Internet website from a provision adopting by reference certain standards relating to the use of laser radiation in the practice of dentistry. **Section 21** of this regulation updates a reference to an Internet website with the correct address for guidelines relating to disinfection and sterilization. **Section 27** of this regulation updates a statutory reference to reflect technical changes made during the 2019 Legislative Session.

Existing regulations provide that the Board may require a licensee whose license has been placed on inactive status for 2 years or more and who is not actively practicing in another state to pass such examinations for licensure as the Board may prescribe before his or her license is reinstated. (NAC 631.170) **Section 14** of this regulation provides that the Board may similarly require a former licensee who has not held a license in this State for 2 years or more and has not maintained an active practice outside this State to pass such examinations before issuing a new license to the applicant. **Section 17** of this regulation provides that the Board may require a licensee whose license has been suspended for 2 years or more and who has not maintained an active practice outside this State to pass such examinations before reinstating his or her license. **Sections 14 and 17** further clarify that a licensee or former licensee is not maintaining an active practice outside this State if he or she is not practicing because of disciplinary action in another jurisdiction.

Existing law authorizes the Board to discipline a licensee for certain conduct, including malpractice, disciplinary action imposed against the licensee in another jurisdiction or conviction of certain crimes. (NRS 631.3475, 631.350) Existing regulations require a licensee to notify the Board if he or she receives such discipline or is convicted of such crimes. (NAC 631.155) **Section 15** of this regulation similarly requires a licensee to notify the Board of any claim or complaint of malpractice served and filed on the licensee.

Existing regulations authorize the Board to accept the voluntary surrender of a license by a licensee. (NAC 631.160) **Section 16** of this regulation prescribes certain requirements that a licensee who has voluntarily surrendered his or her license must satisfy before applying for a new license.

Existing regulations: (1) require a licensee to provide proof of his or her continuing education credits; and (2) provide that the third or subsequent failure of a licensee to provide such proof constitutes unprofessional conduct, which is grounds for discipline under existing law. (NAC 631.177) **Section 20** of this regulation instead provides that the second or subsequent such failure constitutes unprofessional conduct.

Existing regulations provide that the Board will conduct audits of providers of oral health care to ensure compliance with continuing education requirements. (NAC 631.177) **Section 20** clarifies that the Board may conduct follow-up audits after an initial audit.

Existing law authorizes the Board to issue a specialist’s license, which authorizes a dentist to hold himself or herself out as a specialist in a special area of dentistry. (NRS 631.250)

Section 22 of this regulation adds dental anesthesiology, oral medicine and orofacial pain to the list of specialties for which the Board may issue a specialist license.

Section 1. Chapter 631 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 7, inclusive, of this regulation.

Sec. 2. *For the purposes of this chapter and NRS 631.3122, the Board will interpret “direct supervision” to mean supervision by a dentist where the dentist:*

- 1. Documents in the record of the patient the name of the dental therapist providing care to the patient;*
- 2. Examines the patient before the dental therapist performs the procedure;*
- 3. Provides instructions for treating the patient before the dental therapist begins treating the patient; and*
- 4. Examines the patient upon completion of the procedures performed by the dental therapist.*

Sec. 3. *1. In addition to the requirements set forth in NRS 631.312, a program of dental therapy completed pursuant to paragraph (c) of subsection 1 of NRS 631.312 must include, without limitation:*

- (a) At least 500 hours of clinical practice, including, without limitation, practice hours in extractions and restorations; and*
- (b) At least 3 years of academic instruction in dental therapy or its academic equivalent.*
- 2. The hours of clinical practice required by subsection 1 may not be used to fulfill the hours of clinical practice required pursuant to NRS 631.3122.*

Sec. 4. *Except as otherwise provided in NRS 622.090, in fulfillment of the requirements of paragraph (b) of subsection 1 of NRS 631.3121, an applicant taking the clinical*

examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the Western Regional Examining Board must:

- 1. Pass a simulated clinical examination in dental therapy or a comparable examination administered by the Western Regional Examining Board, as applicable;*
- 2. Demonstrate proficiency in endodontics on a simulated mannequin as the organization administering the clinical examination requires;*
- 3. Demonstrate proficiency in the preparation and placement of pre-formed crowns on a simulated mannequin as the organization administering the clinical examination requires; and*
- 4. Demonstrate proficiency in restorative dentistry on a live patient as the organization administering the clinical examination requires.*

Sec. 5. In addition to the items required by NRS 631.3123, a written practice agreement between a dentist and a dental therapist must include, without limitation:

- 1. Procedures for the duplication, maintenance and storage of the records of the patients of the dental therapist by the authorizing dentist;*
- 2. Specific procedures for the management of medical emergencies, including, without limitation:*
 - (a) A requirement that the dental therapist may be certified in the administration of cardiopulmonary resuscitation in accordance with NAC 631.173; and*
 - (b) Procedures for the administration of first aid, an automated external defibrillator and supplemental oxygen;*
- 3. The tasks every staff member is required to perform when a medical emergency occurs; and*

4. Procedures for the maintenance of a written log to document the monthly review of the records of patients which must include, without limitation:

(a) Evaluations of each referral of a patient made by the dental therapist to an authorizing dentist or an appropriate dental specialist and any follow-up of such a referral;

(b) The demographic information of the authorizing dentist and dental therapist, with any personally identifying information removed; and

(c) Procedures for making the written log available to the Board for review and examination upon request.

Sec. 6. 1. A dental therapist may provide the following services to a patient under the indirect supervision or direct supervisor of the authorizing dentist:

(a) Making and exposing cone-beam radiographs;

(b) Application of topical preventive or prophylactic agents, including, without limitation, fluoride varnishes and pit and fissure sealants when a radiograph was obtained not less than 6 months ago;

(c) Removal of excess cement from cemented restorations or orthodontic appliances without rotary;

(d) Re-cementing permanent crowns and bridges with nonpermanent material as a palliative treatment;

(e) Administering local intraoral chemotherapeutic agents in any form except aerosol including, without limitation, antimicrobial agents, fluoride preparations, topical anesthetics and topical desensitizing agents;

(f) Minor adjustments and repairs of removable partial dentures; and

(g) Placement and removal of space maintainers.

2. A dental therapist may provide the following services to a patient only under the direct supervision of a dentist:

- (a) Cavity preparation;*
 - (b) Restoration of primary and permanent teeth;*
 - (c) Extractions of primary teeth and permanent teeth with grade three plus mobility with recorded periodontal charting;*
 - (d) Preparation and placement of preformed crowns on primary teeth;*
 - (e) Indirect and direct pulp capping of permanent teeth;*
 - (f) Administration of local anesthetic;*
 - (g) Sub-gingival curettage;*
 - (h) Fabricating mouth guards for temporomandibular joint dysfunction or sleep disorders;*
- and*
- (i) Definitive charting of the oral cavity.*

3. A dental therapist may provide the following services to a patient who has not first seen a dentist for examination:

- (a) Making a radiograph through periapical, bitewing or panorex;*
- (b) Mechanical polishing;*
- (c) Application of desensitizing medication or resin;*
- (d) Preliminary charting of an oral cavity;*
- (e) Removal of sutures;*
- (f) Instruction and education on oral health and disease prevention, including, without limitation, nutritional counseling and dietary analysis; and*
- (g) Fabricating mouth guards for use in sports protection.*

4. As used in this section, “indirect supervision” means that the dentist:

(a) Documents in the record of the patient the name of the dental therapist providing care to the patient;

(b) Examines the patient before the dental therapist performs the procedure;

(c) Provides instructions for treatment of the patient before the dental therapist begins treating the patient; and

(d) Is not on the premises of the dental office when the procedure occurs.

Sec. 7. 1. If an investigation by the Board regarding the supervision by an authorizing dentist of a dental therapist reasonably determines that the health, safety or welfare of the public or any patient served by the dentist or dental therapist is placed at risk of imminent or continued harm by the continued supervision by the authorizing dentist of the dental therapist, the Board may summarily suspend the dentist from supervising any dental therapist pending the conclusion of a hearing to consider a formal complaint against the dentist or dental therapist.

2. The order of summary suspension may be issued only by the Board, the President of the Board, the presiding officer of an investigative committee convened by the Board to investigate the dentist or dental therapist or the member, employee, investigator or other agent of the Board who conducted the investigation.

3. If the Board, the President of the Board, the presiding officer of an investigative committee convened by the Board to investigate the dentist or dental therapist or a member, employee, investigator or other agent of the Board issues an order to summarily suspend a dentist from supervising a dental therapist pursuant to subsection 1, the Board must hold a hearing to consider the formal complaint against the dentist or dental therapist. The Board

must hold the hearing and render a decision concerning the formal complaint not later than 60 days after the date of issuance of the order, unless the Board and the dentist or dental therapist agree to a longer period of time.

Sec. 8. NAC 631.029 is hereby amended to read as follows:

631.029 The Board will charge and collect the following fees:

Application fee for an initial license to practice dentistry if the applicant has successfully passed a clinical examination administered by the Western Regional Examining Board or a clinical examination approved by the Board and the American Board of Dental Examiners and administered by a regional examination organization other than the Board	\$1,200
Application fee for an initial license to practice <i>dental therapy or</i> dental hygiene	600
Application fee for a specialty license by credential.....	1,200
Application fee for a temporary restricted geographical license to practice dentistry	600
Application fee for a temporary restricted geographical license to practice <i>dental therapy or</i> dental hygiene	150
Application fee for a specialist's license to practice dentistry	125
Application fee for a limited license or restricted license to practice dentistry , <i>dental therapy</i> or dental hygiene.....	125
Application and examination fee for a permit to administer general anesthesia, moderate sedation or deep sedation	750

Application and examination fee for a site permit to administer general anesthesia, moderate sedation or deep sedation	500
Fee for any reinspection required by the Board to maintain a permit to administer general anesthesia, moderate sedation or deep sedation.....	500
Fee for the inspection of a facility required by the Board to ensure compliance with infection control guidelines.....	250
<i>Fee for a second or subsequent inspection of a facility required by the Board to ensure compliance with infection control guidelines</i>	<i>150</i>
Biennial renewal fee for a permit to administer general anesthesia, moderate sedation or deep sedation.....	200
Fee for the inspection of a facility required by the Board to renew a permit to administer general anesthesia, moderate sedation or deep sedation.....	350
Biennial license renewal fee for a general license or specialist's license to practice dentistry	600
Biennial license renewal fee for a restricted geographical license to practice dentistry	600
Biennial license renewal fee for a restricted geographical license to practice <i>dental therapy or</i> dental hygiene	300
Biennial license renewal fee for a general license to practice <i>dental therapy or</i> dental hygiene	300
Annual license renewal fee for a limited license to practice dentistry , <i>dental therapy</i> or dental hygiene	200
Annual license renewal fee for a restricted license to practice dentistry	100

Biennial license renewal fee for an inactive dentist	200
Biennial license renewal fee for an inactive <i>dental therapist or</i> dental hygienist	50
<i>Fee for a second or subsequent audit to ensure compliance with continuing education requirements</i>	<i>200</i>
Reinstatement fee for a suspended license to practice dentistry , <i>dental therapy</i> or dental hygiene	300
Reinstatement fee for a revoked license to practice dentistry , <i>dental therapy</i> or dental hygiene	500
Reinstatement fee to return an inactive or retired dentist , <i>dental therapist</i> or dental hygienist or a dentist , <i>dental therapist</i> or dental hygienist with a disability to active status	300
Fee for the certification of a license	25
Fee for the certification of a license to administer nitrous oxide or local anesthesia.....	25
Fee for a duplicate wall certificate	25
Fee for a duplicate pocket card receipt.....	25
Application fee for converting a temporary license to a permanent license	125
Fee for an application packet for an examination	25
Fee for an application packet for licensure by credentials	25

Sec. 9. NAC 631.030 is hereby amended to read as follows:

631.030 1. An applicant for licensure must provide the following information and documentation in his or her application:

- (a) The date and place of his or her birth;
- (b) Certification of graduation from an accredited dental school or college , *from an accredited school or college of dental therapy* or from an accredited school or college of dental hygiene, whichever is applicable;
- (c) Whether he or she has applied for similar licensure in another state or a territory of the United States or the District of Columbia and, if so, the name of the state or territory of the United States or the District of Columbia, the date and the result of his or her application;
- (d) If he or she has practiced dentistry , *dental therapy* or dental hygiene in another state or a territory of the United States or the District of Columbia, certification from the licensing authority of each state or territory of the United States or the District of Columbia in which he or she has practiced or is practicing that he or she is in good standing and that there are not any disciplinary proceedings affecting his or her standing pending against him or her in the other state or territory of the United States or the District of Columbia;
- (e) Whether he or she has terminated or attempted to terminate a license from another state or territory of the United States or the District of Columbia and, if so, the reasons for doing so;
- (f) If he or she is not a natural born citizen of the United States, a copy of his or her certificate of naturalization or other document attesting that he or she is legally eligible to reside and work in the United States;
- (g) All scores obtained on the examination in which he or she was granted a certificate by the Joint Commission on National Dental Examinations and the date it was issued;

(h) Whether he or she has ever been convicted of a crime involving moral turpitude or has entered a plea of nolo contendere to a charge of such a crime and, if so, the date and place of the conviction or plea and the sentence, if any, which was imposed;

(i) Whether he or she has had any misdemeanor or felony convictions and, if so, any documents relevant to any misdemeanor or felony convictions;

(j) Whether he or she has been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;

(k) Whether he or she has a history of substance ~~abuse;~~ *misuse or substance use disorder* and, if so, any documents relevant to the substance ~~abuse;~~ *misuse or substance use disorder*;

(l) Whether he or she has been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of Columbia, or any regional testing agency recognized by the Board and, if so, any documents relevant to the refusal;

(m) Whether he or she has been denied licensure by this State, any other state or territory of the United States or the District of Columbia and, if so, any documents relevant to the denial;

(n) Whether he or she has had his or her license to practice dentistry , *dental therapy* or dental hygiene suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry , *dental therapy* or dental hygiene, including, without limitation, *being subject to mandatory supervision or* receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the suspension, revocation, probation or other discipline;

(o) A copy of current certification in administering cardiopulmonary resuscitation;

(p) Whether he or she is currently involved in any disciplinary action concerning his or her license to practice dentistry , *dental therapy* or dental hygiene in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the reprimand or disciplinary action;

(q) Two sets of certified fingerprint cards and an authorization form allowing the Board to submit the fingerprint forms to law enforcement agencies for verification of background information;

(r) Whether he or she has any claims against him or her or has committed any actions that would constitute unprofessional conduct pursuant to NRS 631.3475 or NAC 631.230;

(s) An application form that he or she has completed and signed which:

(1) Is furnished by the Board; and

(2) Includes, without limitation, a properly executed request to release information;

(t) If applicable, the statement and proof required by subsection 3;

(u) Evidence that he or she is eligible to apply for a license to practice:

(1) Dentistry pursuant to NRS 631.230; ~~for~~

(2) Dental hygiene pursuant to NRS 631.290; *or*

(3) Dental therapy pursuant to NRS 631.312;

(v) The statement required by NRS 425.520; and

(w) Any other information requested by the Board.

2. An applicant for licensure by endorsement pursuant to NRS 622.530 must provide the following information and documentation with his or her application:

(a) The information and documentation listed in subsection 1;

(b) A certificate granted by a nationally recognized, nationally accredited or nationally certified examination or other examination approved by the Board which proves that the applicant has achieved a passing score on such an examination; and

(c) Proof that the applicant has actively practiced dentistry , *dental therapy* or dental hygiene for the 5 years immediately preceding the date of submission of the application.

3. An applicant for licensure who wishes to use laser radiation in his or her practice of dentistry , *dental therapy* or dental hygiene must provide to the Board:

(a) A statement certifying that each laser that will be used by the licensee in the practice of dentistry , *dental therapy* or dental hygiene has been cleared by the Food and Drug Administration for use in dentistry; and

(b) Proof that he or she has successfully completed a course in laser proficiency that:

(1) Is at least 6 hours in length; and

(2) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to NAC 631.035.

Sec. 10. NAC 631.033 is hereby amended to read as follows:

631.033 Each licensee who uses or wishes to use laser radiation in his or her practice of dentistry , *dental therapy* or dental hygiene must include with the application for renewal of his or her license:

1. A statement certifying that each laser used by the licensee in his or her practice of dentistry , *dental therapy* or dental hygiene has been cleared by the Food and Drug Administration for use in dentistry; and

2. Proof that he or she has successfully completed a course in laser proficiency that:

(a) Is at least 6 hours in length; and

(b) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to NAC 631.035.

Sec. 11. NAC 631.035 is hereby amended to read as follows:

631.035 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~~

<http://www.laserdentistry.org/certification#curriculum-guidelines>.

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.

Sec. 12. NAC 631.045 is hereby amended to read as follows:

631.045 A licensed dentist who owns an office or facility where dental treatments are to be performed in this State must, on the application for renewal of his or her license, execute a certified statement that includes:

- 1. The location of each office or facility owned by the licensed dentist where dental treatments are to be performed;

2. The name and address of each employee, other than a licensed dentist , *dental therapist* or dental hygienist, who assists at the office or facility in procedures for infection control and the date the employee began to assist in procedures for infection control at the office or facility;

3. A statement that each employee identified in subsection 2:

(a) Has received adequate instruction concerning procedures for infection control; and

(b) Is qualified to:

(1) Operate sterilization equipment and other equipment in compliance with the guidelines adopted by reference in NAC 631.178; and

(2) Perform all other applicable activities in compliance with the guidelines adopted by reference in NAC 631.178; and

4. If the licensed dentist is registered to dispense controlled substances with the State Board of Pharmacy pursuant to chapter 453 of NRS, an attestation that the licensed dentist has conducted annually a minimum of one self-query regarding the issuance of controlled substances through the Prescription Monitoring Program of the State Board of Pharmacy.

Sec. 13. NAC 631.050 is hereby amended to read as follows:

631.050 1. If the Executive Director or Secretary-Treasurer finds that:

(a) An application is:

(1) Deficient; or

(2) Not in the proper form; or

(b) The applicant has:

(1) Provided incorrect information;

(2) Not attained the scores required by chapter 631 of NRS; or

(3) Not submitted the required fee,

↪ the Executive Director or Secretary-Treasurer shall reject the application and return it to the applicant with the reasons for its rejection.

2. If the Executive Director or Secretary-Treasurer finds that an applicant has:

- (a) A felony conviction;
- (b) A misdemeanor conviction;
- (c) Been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
- (d) A history of substance ~~abuse;~~ *misuse or substance use disorder;*
- (e) Been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of Columbia;
- (f) Been denied licensure by this State, any other state or territory of the United States or the District of Columbia;
- (g) Had his or her license to practice dentistry , *dental therapy* or dental hygiene suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry , *dental therapy* or dental hygiene, including, without limitation, *being subject to mandatory supervision or* receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia;
- (h) Not actively practiced dentistry , *dental therapy* or dental hygiene, as applicable, for 2 years or more before the date of the application to the Board; or
- (i) Is currently involved in any disciplinary action concerning his or her license to practice dentistry , *dental therapy* or dental hygiene in this State, another state or territory of the United States or the District of Columbia,

↪ the Executive Director or Secretary-Treasurer may reject the application. If rejected, the application must be returned to the applicant with the reasons for its rejection.

3. If an application is rejected pursuant to subsection 2, the applicant may furnish additional relevant information to the Executive Director or Secretary-Treasurer, and request that the application be reconsidered. If an application is rejected following reconsideration by the Executive Director or Secretary-Treasurer, the applicant may petition the Board for a review of the application at the next regularly scheduled meeting of the Board.

Sec. 14. NAC 631.090 is hereby amended to read as follows:

631.090 **1.** Except as otherwise provided in NRS 622.090, in fulfillment of the statutory requirements of paragraph (b) of subsection 1 of NRS 631.240, an applicant taking the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the Western Regional Examining Board must:

~~1-1~~ **(a)** Pass the Dental Simulated Clinical Examination or a comparable examination administered by the Western Regional Examining Board, as applicable;

~~1-2~~ **(b)** Demonstrate proficiency in endodontics as the organization administering the clinical examination requires;

~~1-3~~ **(c)** Demonstrate proficiency in fixed prosthodontics as the organization administering the clinical examination requires;

~~1-4~~ **(d)** Demonstrate proficiency in restorative dentistry as the organization administering the clinical examination requires;

~~1-5~~ **(e)** Demonstrate proficiency in periodontics as the organization administering the clinical examination requires; and

~~1-6~~ **(f)** Perform such other procedures as the Board requires.

2. The Board may require an applicant for licensure to practice dentistry, dental hygiene or dental therapy to pass such additional examinations for licensure as the Board may prescribe if the applicant:

(a) Has been previously licensed in this State and has not held such a license for 2 years or more, including, without limitation, because the license was revoked or voluntarily surrendered; and

(b) Has not maintained an active practice outside of this State, including, without limitation, because his or her license to practice in another jurisdiction has been suspended, revoked, surrendered or because of any other order by a competent authority of another jurisdiction.

Sec. 15. NAC 631.155 is hereby amended to read as follows:

631.155 Each licensee shall, within 30 days after the occurrence of the event, notify the Board in writing by certified mail of:

1. The death of a patient during the performance of any dental procedure;
2. Any unusual incident occurring in his or her dental practice which results in permanent physical or mental injury to a patient or requires the hospitalization of a patient;
3. The suspension or revocation of his or her license to practice dentistry , *dental therapy or dental hygiene* or the imposition of a fine or other disciplinary action against him or her by any agency of another state authorized to regulate the practice of dentistry , *dental therapy or dental hygiene, as applicable*, in that state;
4. The conviction of any felony or misdemeanor involving moral turpitude or which relates to the practice of dentistry , *dental therapy or dental hygiene, as applicable*, in this State or the conviction of any violation of chapter 631 of NRS; ~~for~~

5. *The filing and service of any claim or complaint of malpractice against the licensee; or*

6. Being held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession.

Sec. 16. NAC 631.160 is hereby amended to read as follows:

631.160 1. If a licensee desires voluntarily to surrender his or her license, he or she may submit to the Board a sworn written surrender of the license accompanied by delivery to the Board of the certificate of registration previously issued to him or her. The Board may accept or reject the surrender of the license. If the Board accepts the surrender of the license, the surrender is absolute and irrevocable. The Board will notify any agency or person of the surrender as it deems appropriate.

2. The voluntary surrender of a license does not preclude the Board from hearing a complaint for disciplinary action filed against the licensee.

3. A former licensee who has voluntarily surrendered his or her license may apply for a new license if he or she meets all criteria required for licensure by this chapter and chapter 631 of NRS. If a former licensee surrendered his or her license voluntarily while being disciplined by the Board or during a pending investigation, the Board may require the former licensee to complete any terms of discipline or corrective action not completed as a result of the surrender and require additional terms be completed before issuing a new license.

Sec. 17. NAC 631.170 is hereby amended to read as follows:

631.170 1. A licensee may request the Board to place his or her license in an inactive or retired status. Such a request must be made in writing and before the license expires.

2. The Secretary-Treasurer may reinstate an inactive license upon the written request of an inactive licensee who has maintained an active license and practice outside this State during the

time his or her Nevada license was inactive. To reinstate the license, such an inactive licensee must:

- (a) Pay the appropriate renewal fees;
 - (b) Provide a list of his or her employment during the time the license was inactive;
 - (c) Report all claims of unprofessional conduct or professional incompetence against him or her or any violation of the law which he or she may have committed, including administrative disciplinary charges brought by any other jurisdiction;
 - (d) Report whether he or she has been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
 - (e) Report any appearance he or she may have made before a peer review committee;
 - (f) Submit proof of his or her completion of an amount of continuing education, prorated as necessary, for the year in which the license is restored to active status;
 - (g) Provide certification from each jurisdiction in which he or she currently practices that his or her license is in good standing and that no proceedings which may affect that standing are pending;
 - (h) Satisfy the Secretary-Treasurer that he or she is of good moral character; and
 - (i) Provide any other information which the Secretary-Treasurer may require,
- ➔ before the license may be reinstated. In determining whether the licensee is of good moral character, the Secretary-Treasurer may consider whether the license to practice dentistry , *dental therapy or dental hygiene* in another state has been suspended or revoked or whether the licensee is currently involved in any disciplinary action concerning the license in that state.

3. If a person whose license has been on inactive status for less than 2 years has not maintained an active license or practice outside this State, *including, without limitation, because his or her license to practice in another jurisdiction has been suspended, revoked or surrendered or because of any other order by a competent authority of another jurisdiction*, or if a person's license has been on retired status for less than 2 years, he or she must submit to the Board:

- (a) Payment of the appropriate renewal fees;
 - (b) A written petition for reinstatement that has been signed and notarized;
 - (c) Proof of his or her completion of an amount of continuing education, prorated as necessary, for the year in which the license is restored to active status; and
 - (d) A list of his or her employment, if any, during the time the license was on inactive or retired status,
- ↪ before the license may be reinstated.

4. If a person whose license has been on inactive status for 2 years or more has not maintained an active license or practice outside this State, *including, without limitation, because his or her license to practice in another jurisdiction has been suspended, revoked or surrendered or because of any other order by a competent authority of another jurisdiction*, or if a person's license has been on retired status for 2 years or more, he or she must:

- (a) Satisfy the requirements set forth in paragraphs (a) to (d), inclusive, of subsection 3; and
 - (b) Pass such additional examinations for licensure as the Board may prescribe,
- ↪ before the license may be reinstated.

5. If the license of a person has been placed on disabled status, the person must:

- (a) Satisfy the requirements of paragraphs (a), (b) and (c) of subsection 3;

(b) Submit to the Board a list of his or her employment, if any, during the time the license was on disabled status;

(c) Pass such additional examinations for licensure as the Board may prescribe; and

(d) Submit to the Board a statement signed by a licensed physician setting forth that the person is able, mentally and physically, to practice dentistry, *dental therapy or dental hygiene, as applicable,*

↪ before the license may be reinstated.

6. If the license of a person has been suspended for 2 years or more and the person has not maintained an active practice outside of this State, including, without limitation, because his or her license to practice in another jurisdiction has been suspended, revoked or surrendered or because of any other order by a competent authority of another jurisdiction, the Board may require the person to pass such examinations for licensure as the Board may prescribe before reinstating the license.

Sec. 18. NAC 631.173 is hereby amended to read as follows:

631.173 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 therapist licensed to practice in this State must annually complete at least 18 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 dental

therapist. Hours of instruction may not be transferred or carried over from one licensing period to another.

3. 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.

~~3.4~~ 4. In addition to the hours of instruction prescribed in subsections 1, ~~and~~ 2 ~~and~~ 3, each dentist, *dental therapist* 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.

~~4.4~~ 5. Any provider of or instructor for a course in continuing education relating to the practice of dentistry, *dental therapy* 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.

~~15.1~~ 6. 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.

~~16.1~~ 7. Study by group may be approved for continuing education if the organizer of the group complies with the requirements of subsection ~~15.1~~ 6 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.

~~17.1~~ 8. Credit may be allowed for attendance at a meeting or a convention of a dental ~~hand~~, *dental therapy or* dental hygiene society.

~~18.1~~ 9. 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.

~~19.1~~ 10. Credit may be allowed for dental , *dental therapy* and dental hygiene services provided on a voluntary basis to nonprofit agencies and organizations approved by the Board.

Sec. 19. NAC 631.175 is hereby amended to read as follows:

631.175 1. Approved subjects for continuing education in dentistry , *dental therapy* and dental hygiene are:

(a) Clinical subjects, including, without limitation:

- (1) Dental and medical health;
- (2) Preventive services;

- (3) Dental diagnosis and treatment planning; and
- (4) Dental clinical procedures, including corrective and restorative oral health procedures and basic dental sciences, dental research and new concepts in dentistry; and

(b) Nonclinical subjects, including, without limitation:

- (1) Dental practice organization and management;
- (2) Patient management skills;
- (3) Methods of health care delivery; and
- (4) Teaching methodology.

2. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist *or dental therapist* must annually complete at least 15 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 30 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dentist *or dental therapist, as applicable.*

3. In completing the hours of continuing education required pursuant to NAC 631.173, a dental hygienist must annually complete at least 12 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 24 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dental hygienist.

4. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist, *dental therapist* or dental hygienist must annually complete at least 2 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in NAC 631.178 or biennially complete at least 4 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in

NAC 631.178, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dentist , *dental therapist* or dental hygienist.

5. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist who is registered to dispense controlled substances pursuant to NRS 453.231 must complete at least 2 hours of training relating specifically to the misuse and abuse of controlled substances, the prescribing of opioids or addiction during each period of licensure.

6. The Board will credit, as a maximum in any one year of an annual or biennial licensing period, the following number of hours of instruction for the following types of courses or activities:

- (a) For approved study by a group, 3 hours.
- (b) For attendance at a meeting or convention of a dental , *dental therapy* or dental hygiene society, 1 hour for each meeting, but not more than 3 hours, exclusive of hours of continuing education offered in conjunction with the meeting.
- (c) For courses completed via home study, on-line study, self-study or journal study through correspondence, webinar, compact disc or digital video disc, not more than 50 percent of the number of hours of continuing education required by subsection 1 , ~~for~~ 2 *or* 3 of NAC 631.173, as applicable.
- (d) For all other courses conducted by an approved instructor, the number of hours completed by the dentist , *dental therapist* or dental hygienist.
- (e) For approved dental , *dental therapy* or dental hygiene services provided in approved nonprofit settings, 6 hours, except that not more than 3 hours will be allowed for any day of volunteer services provided.

Sec. 20. NAC 631.177 is hereby amended to read as follows:

631.177 1. When requesting a renewal or reinstatement of his or her license, each:

(a) Dentist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 20 approved hours of instruction in continuing education during the period July 1,, through and including June 30,, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....

Signature of Dentist

(b) *Dental therapist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:*

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 18 approved hours of instruction in continuing education during the period July 1,, through and including June 30,, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering

cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Dental Therapist

(c) Dental hygienist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 15 approved hours of instruction in continuing education during the period July 1,, through and including June 30,, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Dental Hygienist

~~†(e)†~~ (d) Dentist , *dental therapist* or dental hygienist shall submit proof of his or her current certification in administering cardiopulmonary resuscitation or other medically acceptable means of maintaining basic bodily functions which support life.

2. Legible copies of all receipts, records of attendance, certificates and other evidence of attendance by a dentist , *dental therapist* or dental hygienist at an approved course in continuing education must be retained by the dentist , *dental therapist* or dental hygienist and made available to the Board for inspection or copying for 3 years after attendance at the course is submitted to meet the continuing education requirements of the Board. Proof of attendance and completion of the required credit hours of instruction must be complete enough to enable the Board to verify the attendance and completion of the course by the dentist , *dental therapist* or dental hygienist and must include at least the following information:

- (a) The name and location of the course;
- (b) The date of attendance;
- (c) The name, address and telephone number of its instructor;
- (d) A synopsis of its contents; and
- (e) For courses designed for home study, the number assigned to the provider by the Board at the time the course was approved and the name, address and telephone number of the producer or author of the course.

3. The ~~†third†~~ *second* or subsequent failure of a dentist ~~†and†~~ , *dental therapist or* dental hygienist to obtain or file proof of completion of the credit hours of instruction required by this section and NAC 631.173 and 631.175 is unprofessional conduct.

4. The Board will conduct random *initial* audits of dentists , *dental therapists* or dental hygienists *and additional follow-up audits, as necessary*, to ensure compliance with the requirements of this section and NAC 631.173 and 631.175.

Sec. 21. NAC 631.178 is hereby amended to read as follows:

631.178 1. Each person who is licensed pursuant to the provisions of chapter 631 of NRS shall comply with:

(a) The provisions of the *Guidelines for Infection Control in Dental Health-Care Settings-2003* adopted by the Centers for Disease Control and Prevention which is hereby adopted by reference. The publication is available, free of charge, from the Centers for Disease Control and Prevention at the Internet address

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>; and

(b) As applicable to the practice of dentistry, *dental therapy and dental hygiene*, the provisions of the *Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008*, adopted by the Centers for Disease Control and Prevention which is hereby adopted by reference. The publication is available, free of charge, from the Centers for Disease Control and Prevention at the Internet address

~~http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/Disinfection_Nov_2008.pdf~~

<http://www.cdc.gov/infectioncontrol/pdf/guidelines/disinfection-guidelines-H.pdf>

2. The Board will periodically review the guidelines adopted by reference in this section and determine within 30 days after the review whether any change made to the guidelines is appropriate for application in this State. If the Board does not disapprove a change to the guidelines within 30 days after the review, the change is deemed to be approved by the Board.

Sec. 22. NAC 631.190 is hereby amended to read as follows:

631.190 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 ~~H~~;

10. Dental anesthesiology;

11. Oral medicine; and

12. Orofacial pain.

Sec. 23. NAC 631.220 is hereby amended to read as follows:

631.220 1. A dentist who is licensed in the State of Nevada may authorize a dental assistant in his or her employ and under his or her supervision to perform the following procedures before the patient is examined by the dentist:

- (a) Expose radiographs; and
- (b) Take impressions for the preparation of diagnostic models.

2. A dentist who is licensed in the State of Nevada may authorize a dental assistant in his or her employ and under his or her supervision only to do one or more of the following procedures after the patient has been examined by the dentist:

- (a) Retract a patient's cheek, tongue or other tissue during a dental operation.

(b) Remove the debris that normally accumulates during or after a cleaning or operation by the dentist by using mouthwash, water, compressed air or suction.

(c) Place or remove a rubber dam and accessories used for its placement.

(d) Place and secure an orthodontic ligature.

(e) Remove sutures.

(f) Place and remove a periodontal pack.

(g) Remove excess cement from cemented restorations and orthodontic appliances. A dental assistant may not use a rotary cutting instrument to remove excess cement from restorations or orthodontic appliances.

(h) Administer a topical anesthetic in any form except aerosol.

(i) Train and instruct persons in the techniques of oral hygiene and preventive procedures.

(j) Take the following types of impressions:

(1) Those used for the preparation of counter or opposing models;

(2) Those used for the fabrication of temporary crowns or bridges; and

(3) Those used for the fabrication of temporary removable appliances, provided no missing teeth are replaced by those appliances.

(k) Fabricate and place temporary crowns and bridges. This procedure must be checked and approved by the supervising dentist before dismissal of the patient from the office of the dentist.

(l) Retract gingival tissue if the retraction cord contains no medicaments that have potential systemic side effects.

(m) Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A licensed dentist, *dental*

therapist or dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.

(n) Administer a topical fluoride.

(o) Apply pit and fissure sealant to the dentition for the prevention of decay. This procedure must be checked and approved by the supervising dentist before dismissal of the patient from the office of the dentist.

(p) Fit orthodontic bands and prepare teeth for orthodontic bands if the bands are cemented or bonded, or both, into the patient's mouth by the dentist who authorized the dental assistant to perform this procedure.

3. A dentist who is licensed in the State of Nevada may authorize a *dental therapist or* dental hygienist to supervise a dental assistant in the assistance of the ~~hygienist's~~ performance of *the dental therapist or dental hygienist of* one or more of the following ~~H~~ procedures:

(a) Retract a patient's cheek, tongue or other tissue during a dental operation.

(b) Remove the debris that normally accumulates during or after a cleaning or operation by the *dental therapist or* dental hygienist by using mouthwash, water, compressed air or suction.

(c) Train and instruct persons in the techniques of oral hygiene and preventive procedures.

(d) Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A licensed dentist, *dental therapist* or dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.

(e) Administer a topical fluoride.

4. A dental hygienist ~~H~~ who is authorized by the Board to perform the services described in subsection 6 of NAC 631.210 ~~H~~ *or a dental therapist* may authorize a dental assistant under his

or her supervision to assist the hygienist *or therapist, as applicable*, in the performance of the services described in paragraphs (a) to (e), inclusive, of subsection 3.

Sec. 24. NAC 631.230 is hereby amended to read as follows:

631.230 1. In addition to those specified by statute and subsection 3 of NAC 631.177, the following acts constitute unprofessional conduct:

- (a) The falsification of records of health care or medical records.
- (b) Writing prescriptions for controlled substances in such excessive amounts as to constitute a departure from prevailing standards of acceptable dental practice.
- (c) The consistent use of dental procedures, services or treatments which constitute a departure from prevailing standards of acceptable dental practice even though the use does not constitute malpractice or gross malpractice.
- (d) The acquisition of any controlled substances from any pharmacy or other source by misrepresentation, fraud, deception or subterfuge.
- (e) Making an unreasonable additional charge for laboratory tests, radiology services or other testing services which are ordered by the dentist and performed outside his or her own office.
- (f) The failure to report to the Board as required in NAC 631.155 or to sign any affidavit required by the Board.
- (g) Employing any person in violation of NAC 631.260 or failing to report to the Board as required by that section.
- (h) The failure of a dentist who is administering or directly supervising the administration of general anesthesia, deep sedation or moderate sedation to be physically present while a patient is under general anesthesia, deep sedation or moderate sedation.

(i) Administering moderate sedation to more than one patient at a time, unless each patient is directly supervised by a person authorized by the Board to administer moderate sedation.

(j) Administering general anesthesia or deep sedation to more than one patient at a time.

(k) The failure to have any patient who is undergoing general anesthesia, deep sedation or moderate sedation monitored with a pulse oximeter or similar equipment required by the Board.

(l) Allowing a person who is not certified in basic cardiopulmonary resuscitation to care for any patient who is undergoing general anesthesia, deep sedation or moderate sedation.

(m) The failure to obtain a patient's written, informed consent before administering general anesthesia, deep sedation or moderate sedation to the patient or, if the patient is a minor, the failure to obtain his or her parent's or guardian's consent 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.

(n) The failure to maintain a record of all written, informed consents given for the administration of general anesthesia, deep sedation or moderate sedation.

(o) The failure to report to the Board, in writing, the death or emergency hospitalization of any patient to whom general anesthesia, deep sedation or moderate sedation was administered. The report must be made within 30 days after the event.

(p) Allowing a person to administer general anesthesia, deep sedation or moderate sedation to a patient if the person does not hold a permit to administer such anesthesia or sedation unless the anesthesia or sedation is administered in a facility for which a permit is held as required by NRS 449.442.

(q) The failure of a dentist who owns a dental practice to provide copies of the records of a patient to a dentist , *dental therapist* or dental hygienist who provided the services as an

employee or independent contractor of the dentist when the records are the basis of a complaint before the Board. Nothing in this paragraph relieves the treating dentist , *dental therapist* or dental hygienist from the obligation to provide records of the patient to the Board.

(r) The failure of a dentist who owns a dental practice to verify the license of a dentist , *dental therapist* or dental hygienist before offering employment or contracting for services with the dentist , *dental therapist* or dental hygienist as an independent contractor.

(s) The failure of a dentist who owns a dental practice and participates in the diagnosis and treatment of any patient to ensure that the services rendered by a dentist , *dental therapist* or dental hygienist who is an employee or independent contractor of that dentist meet the prevailing standards of acceptable dental practice. If a dentist , *dental therapist* or dental hygienist who is an employee or independent contractor of the dentist is found by substantial evidence to have provided services below the prevailing standards of acceptable dental practice, the dentist who owns the dental practice may be required to reimburse the patient to whom the services were provided pursuant to paragraph (l) of subsection 1 of NRS 631.350.

(t) The failure of a dentist who owns a dental practice to record the name of the dentist , *dental therapist* or dental hygienist who provided the services in the records of a patient each time the services are rendered.

(u) The failure of a dentist who is registered to dispense controlled substances with the State Board of Pharmacy pursuant to chapter 453 of NRS to conduct annually a minimum of one self-query regarding the issuance of controlled substances through the Prescription Monitoring Program of the State Board of Pharmacy.

2. For purposes of NRS 631.347, a plan or practice requiring a patient to select a dentist from a specific group does not provide the patient with a reasonable opportunity to select a

dentist of his or her own choice, and constitutes unprofessional conduct on the part of any dentist participating in such a plan or practice, unless it, or another plan concurrently available to the patient, allows the patient to:

(a) Have an annual opportunity, lasting for a minimum of 30 days, to select a dentist of his or her own choice for all dental work to be performed during the subsequent 12 months. Any new patient added to the plan or practice must immediately be given an initial opportunity, lasting at least 30 days, to select the coverage supplied by the plan or practice or a dentist of his or her own choice.

(b) Receive the allowance for a procedure performed by a dentist of his or her own choice in substantially the same amount as he or she would if he or she used the services of one of the group of dentists specified by the plan or practice.

Sec. 25. NAC 631.260 is hereby amended to read as follows:

631.260 1. Each patient who is undergoing a radiographic procedure must be covered with a lead apron.

2. Each licensee who employs any person, other than a *dental therapist or* dental hygienist, to assist him or her in radiographic procedures shall include with his or her application for renewal of his or her license a certified statement:

(a) Containing the name of each person so employed, his or her position and the date he or she began to assist the licensee in radiographic procedures; and

(b) Attesting that each such employee has received:

(1) Adequate instruction concerning radiographic procedures and is qualified to operate radiographic equipment as required pursuant to subsection 3 of NAC 459.552;

(2) Training in cardiopulmonary resuscitation at least every 2 years while so employed;

(3) A minimum of 4 hours of continuing education in infection control every 2 years while so employed; and

(4) Before beginning such employment, a copy of this chapter and chapter 631 of NRS in paper or electronic format.

Sec. 26. NAC 631.273 is hereby amended to read as follows:

631.273 1. If, upon the death of a dentist licensed pursuant to chapter 631 of NRS, a surviving member of his or her family desires to own or control his or her practice, share in the fees therefrom, or control the services offered, the surviving member shall, within 2 months after the dentist's death, notify the Board of that fact by furnishing the Secretary-Treasurer with a certified copy of the death certificate.

2. Upon receipt of the death certificate, the Board will appoint one or more of its members, agents or employees to investigate the operation of the dental practice of the decedent to determine whether the practice is being conducted in full compliance with the requirements of chapter 631 of NRS and the regulations of the Board, paying particular attention to the health, welfare and safety of the public.

3. If, upon investigation, the Board finds that the practice is not being conducted in full compliance with the requirements of chapter 631 of NRS or the regulations of the Board, it will apply to the district court to enjoin the continuation of the practice and will further institute any disciplinary action it deems necessary against any licensed dentist, *dental therapist* or dental hygienist associated with the practice.

Sec. 27. NAC 631.275 is hereby amended to read as follows:

631.275 1. For the purposes of paragraph ~~(b)~~ (i) of subsection 2 of NRS 631.215, the Board will deem a person to exercise authority or control over the clinical practice of dentistry if

the person, by agreement, lease, policy, understanding or other arrangement, exercises authority or control over:

- (a) The manner in which a licensed dentist, *a dental therapist*, a dental hygienist or a dental assistant uses dental equipment or materials for the provision of dental treatment;
- (b) The use of a laboratory or the decision to purchase or not to purchase dental equipment or materials against the advice of a licensed dentist if the dentist reasonably concludes that such use, purchase or failure to purchase would impair the ability of the dentist, *a dental therapist* or a dental hygienist to provide dental care to a patient consistent with the standard of care in the community;
- (c) A decision of a licensed dentist regarding a course or alternative course of treatment for a patient, the procedures or materials to be used as part of a course of treatment or the manner in which a course of treatment is carried out by the dentist, *a dental therapist*, a dental hygienist or a dental assistant;
- (d) The length of time a licensed dentist, *a dental therapist* or a dental hygienist spends with a patient or if the person otherwise places conditions on the number of patients a licensed dentist, *a dental therapist* or a dental hygienist may treat in a certain period of time;
- (e) The length of time a licensed dentist, *a dental therapist*, a dental hygienist or a dental assistant spends performing dental services, against the advice of the dentist, if the dentist reasonably believes that the ability of the dentist, *dental therapist*, dental hygienist or dental assistant to provide dental care to a patient consistent with the standard of care in the community would be impaired;

(f) The referrals by a licensed dentist to another licensed dentist or otherwise places any restriction or limitation on the referral of patients to a specialist or any other practitioner the licensed dentist determines is necessary;

(g) The clinical practices of a *dental therapist or* dental hygienist regarding appropriate *dental therapy care or* dental hygiene care , *as applicable*, or the duties that a licensed dentist may delegate to a *dental therapist or* dental hygienist;

(h) Patient records at any time to the exclusion of the applicable licensed dentist or the applicable patient;

(i) A decision of a licensed dentist to refund payments made by a patient for clinical work that is not performed or is performed incorrectly by:

(1) The dentist; or

(2) A *dental therapist or* dental hygienist employed by the licensed dentist or a professional entity of the licensed dentist;

(j) A decision regarding the advertising of the practice of a licensed dentist if the decision would result in a violation of the provisions of NRS 631.348 by the dentist;

(k) A decision to establish fees for dental services against the advice of a licensed dentist if the dentist reasonably concludes that those fees would impair the ability of the dentist , ~~for~~ a *dental therapist or a* dental hygienist to provide dental care to patients consistent with the standard of care in the community;

(l) A decision relating to the clinical supervision of *dental therapists or* dental hygienists and ancillary personnel regarding the delivery of dental care to patients of a licensed dentist;

(m) The hiring or firing of licensed dentists , *dental therapists* or dental hygienists or the material clinical terms of their employment relationship with a licensed dentist or a professional entity of a licensed dentist;

(n) A decision regarding the hiring of ancillary personnel against the advice of a licensed dentist or a decision by a licensed dentist to fire or refuse to work with ancillary personnel if that advice, firing or refusal is related to the clinical competence of that ancillary personnel to render dental care to patients, regardless of who employs such ancillary personnel; and

(o) The material terms of any provider contracts or arrangements between a licensed dentist or a professional entity of a licensed dentist and third-party payors against the advice of the dentist, if the dentist reasonably concludes that the contract or arrangement would impair the ability of the dentist to provide dental care to patients consistent with the standard of care in the community.

2. For the purposes of this section:

(a) “Ancillary personnel” means a person, other than a licensed dentist , *a dental therapist* or a dental hygienist, who:

(1) Directly provides dental care to a patient under the supervision of a licensed dentist , *a dental therapist* or a dental hygienist; or

(2) Assists a licensed dentist , *a dental therapist* or a dental hygienist in the provision of dental care to a patient.

(b) “Clinical” means relating to or involving the diagnosis, evaluation, examination, prevention or treatment of conditions, diseases or disorders of the maxillofacial area, oral cavity or the adjacent and associated structures and their impact on the human body, as typically provided by a licensed dentist or, if applicable, a *dental therapist or* dental hygienist, within the

scope of the education, experience and training of the dentist , *dental therapist* or dental hygienist, in accordance with applicable law and the ethics of the profession of dentistry.

Sec. 28. NAC 631.279 is hereby amended to read as follows:

631.279 1. Any applicant or licensed dentist , *dental therapist* or dental hygienist may obtain a determination or advisory opinion from the Board as to the applicability of any provision of chapter 631 of NRS or any regulation adopted pursuant thereto by bringing an action for a declaratory judgment before the Board.

2. The Board will construe any statute or regulation reviewed pursuant to this section in a manner consistent with the declared policy of the State of Nevada.

Agenda Item 7(b):
Approval/Rejection of Permanent
Anesthesia Permit – NAC 631.2235

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 631.2235 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)

Agenda Item 7(b)(1):
Daniel H Lee, DDS -- Pediatric
Moderate Sedation



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

Dr. Lalande Holds

PEDIATRIC DENTISTRY SPECIALISTS

PEDIATRIC MODERATE SEDATION ADMIN PERMIT APPLICATION

(Administration of Moderate Sedation to pediatric patients)

Pediatric MS Site Permit+ -SPPMS
191

Name: Daniel Harvey Lee License Number: S6-220C

Dental Practice Name: Little Smiles Pediatric Dentistry & Children's Dental Care

Office Address: 6169 S. Rainbow Blvd. #100 Las Vegas, NV 89118

3600 N. Buffalo Dr. #110 Las Vegas, NV 89129

Office Telephone: _____ Office Fax No: _____

Office Site Permit ☐

*Check box if you are
applying for a Site Permit
for this same office
location as well*

DENTAL EDUCATION

University/
College: Loma Linda University School of Dentistry

Location: 11092 Anderson St. Loma Linda, Ca 92350

Dates attended: 07 / 1999 / Degree Earned:
to DDS
05 / 2003 /

SPECIALTY PROGRAM

University/
College: St. Barnabas Hospital Pediatric Dentistry
Residency

Location: 4422 3rd Ave

Bronx, NY 10457

Dates attended: 06 / 2004 / Degree Awarded:
to Pediatric Dentistry Certificate
06 / 2006 /

The following information and documentation must be received by the Board office prior to consideration of a MODERATE SEDATION permit:

- 1) Completed and signed application form;
- 2) Non-refundable application fee in the amount of \$750.00;
- 3) Certification of completion of a specialty program accredited 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.
- 4) Valid certification in Pediatric Advance Life Support by the American Heart Association or the completion of a course approved by the Board that provides instruction on medical emergencies and airway management

Received

FEB 02 2023

NSBDE

I hereby make application for a Pediatric Moderate Sedation Permit to administer moderate sedation to pediatric patients from the Nevada State Board of Dental Examiners. I understand that if this permit is issued, I am authorized to administer moderate sedation **ONLY** to pediatric patients at the address listed above. If I wish to administer moderate sedation to pediatric patients at another location, I understand that each site must be inspected and issued a "**Pediatric Moderate Sedation Site Permit**" and/or a "**Moderate Sedation Site Permit**" by the Board prior to the administration of moderate sedation to pediatric patients. I understand that this permit, if issued, allows only me to administer moderate sedation to pediatric patients.

I also understand that this permit does **NOT** allow for the administration of deep sedation or general anesthesia by me, a physician, nurse anesthetist, or any other person. I have read and I am familiar with the provisions and requirements of NRS 631 and NAC 631 regarding the administration of moderate sedation to pediatric patients.

I, hereby acknowledge the information contained on this application is true and correct and I further acknowledge any omissions, inaccuracies, or misrepresentations of information on this application are grounds for the revocation of a permit which may have been obtained through this application. It is understood and agreed that the title of all certificates shall remain in the Nevada State Board of Dental Examiners and shall be surrendered by order of said Board.

Signature of Applicant



Date

2/2/2023

****APPLICATION FOR PEDIATRIC MODERATE SEDATION ADMINISTRATION ****

Certification of completion of a specialty program accredited by the Commission on Dental Accreditation of the American Dental Association and which includes education and training in the administration of moderate sedation to pediatric patients that is equivalent to the education and training described in subsection (1) of not less than sixty (60) hours of course study dedicated exclusively to the administration of moderate sedation to pediatric patients and submit proof of the successful administration as the operator of moderate sedation to not less than 25 pediatric patients.

SUBMISSION OF NO LESS THAN 25 CASES OF MODERATE SEDATION ADMINISTRATION

Received
FEB 02 2023
NSBDE

Agenda Item 7(b)(2):
Thomas J Ostler, DDS --
Moderate Sedation



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 ADMIN PERMIT APPLICATION

(Administration of Moderate Sedation to patients 13 years of age or older)

Name: Thomas Ostler License Number: 3366

Dental Practice Name Abbey Dental Khanna PC

Office Address: 4416 S Eastern Ave

Las Vegas, NV 89119

Office Telephone 702-731-5700

Office Fax: _____

Office Site Permit

*Check box if you are
applying for a Site
Permit for this same
office location as well*

DENTAL EDUCATION

University/
College: Creighton University School of Dentistry

Location: Omaha, NE

Dates attended:	09 / 27 / 93	Degree Earned:
	to	DDS
	05 / 17 / 97	

BOARD APPROVED PROGRAM

Name/
Instructor: Kenneth Reed

Location: Oregon Academy of General Denistry

Dates attended:	07 / 07 / 22	Certificate Granted:
	to	10/04/22
	10 / 03 / 22	

The following information and documentation must be received by the Board office prior to consideration of a MODERATE SEDATION permit:

- 1) Completed and signed application form;
- 2) Non-refundable application fee in the amount of \$750.00;
- 3) Certification of completion of a course of study, subject to the approval of the Board, of not less than sixty (60) hours of course study dedicated exclusively to the administration of moderate sedation to patients 13 years of age or older and proof of successful management as the operator of moderate sedation to not less than twenty (20) patients who are 13 years of age or older.

Received
FEB 16 2023
NSBDE

Revised 06/2018

- 4) Valid certification in Advance Cardiac Life Support by the American Heart Association or the completion of a course approved by the Board that provides instruction on medical emergencies and airway management

I hereby make application for a Moderate Sedation Permit to administer moderate sedation to patients 13 years of age or older from the Nevada State Board of Dental Examiners. I understand that if this permit is issued, I am authorized to administer moderate sedation **ONLY** to patients 13 years of age or older at the address listed above. If I wish to administer moderate sedation to patients 13 years of age or older at another location, I understand that each site must be inspected and a "Moderate Sedation Site Permit" must be issued by the Board prior to administration of moderate sedation to patients 13 years of age or older. I understand that this permit, if issued, allows only me to administer moderate sedation to patients 13 years of age or older.

I also understand that this permit does **NOT** allow for the administration of moderate sedation to patients 12 years of age or younger or the administration of deep sedation or general anesthesia by me, a physician, nurse anesthetist, or any other person. I have read and am familiar with the provisions and requirements of NRS 631 and NAC 631 regarding the administration of moderate sedation.

I, hereby acknowledge the information contained on this application is true and correct and I further acknowledge any omissions, inaccuracies, or misrepresentations of information on this application are grounds for the revocation of a permit which may have been obtained through this application. It is understood and agreed that the title of all certificates shall remain in the Nevada State Board of Dental Examiners and shall be surrendered by order of said Board.

Signature of Applicant 

Date

2/16/23

NOTE: In order to administer moderate sedation to patients 12 years of age or younger, you must meet the requirements set forth in NAC 631.2213 and submit an application for a "Pediatric Moderate Sedation Admin Permit"

APPLICATION FOR MODERATE SEDATION ADMINISTRATION

Pursuant to NAC 631.2213; Applicants must submit certification of completion of a course of study, subject to the approval of the Board, of not less than sixty (60) hours of course study dedicated exclusively to the administration of moderate sedation to patients 13 years of age or older and proof of successful management as the operator of moderate sedation to not less than twenty (20) patients who are 13 years of age or older

SUBMISSION OF NO LESS THAN 20 CASES OF MODERATE SEDATION ADMINISTRATION

Received
FEB 16 2023
NSBDE

Agenda Item 7(b)(3):
Troy M Lam, DDS -- General
Anesthesia



Nevada State Board of Dental Examiners

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

*— SPG470-AA —
 Dr. Surpee Hold GA Site Permit*

GENERAL ANESTHESIA ADMIN PERMIT APPLICATION

Office Site Permit ☐

*Check box if you are
 applying for a Site Permit
 for this same office
 location as well*

Name: Troy Lam License Number: S2-200C

Dental Practice Name: Valley Oral and Facial Surgery

Office Address: 1600 W Sunset Rd Suite B Office Telephone: 702-992-7907

Henderson, NV 89014 Office Fax: _____

DENTAL EDUCATION

University/
 College: SUNY - Stony Brook

Location: 101 South Dr
Stony Brook, NY 11794

Dates attended: 08 / 30 / 2010 Degree Earned:
to DDS
06 / 06 / 2014

SPECIALTY EDUCATION

University /
 College: Univ. of California San Francisco

Location: 707 Parnassus Ave, D-1201
San Francisco, CA 94143

Dates attended: 07 / 01 / 2014 Degree Earned:
to OMFS Certificate
06 / 30 / 2020

The following information and documentation must be received by the Board office prior to consideration of a **GENERAL ANESTHESIA** permit:

- 1) Completed and signed application form with all questions answered in full;
- 2) Non-refundable application fee in the amount of \$750.00;
- 3) 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 training program as described in the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students or the completion of a graduate program in oral and maxillofacial surgery or dental anesthesiology approved by CODA
- 4) Valid copy of Advanced Cardiac Life Support or a course providing similar instruction that is approved by the Board

► RECEIVED ◀

JAN 12 2023

QUESTION SECTION:**HAVE YOU:**

- 1) Completed one (1) year advanced training in Anesthesiology? ____ Yes ____ No

Where: _____ When: _____

- 2) Completed a residency program in General Anesthesia of not less than one (1) calendar year approved by the Board of Directors of the American Dental Society of Anesthesiology?

____ Yes ____ No

Where: _____ When: _____

- 3) Completed a graduate program in Oral and Maxillofacial Surgery approved by the Commission of Accreditation of the American Dental Association? X Yes ____ No

Where: Univ. of California San Francisco When: 2014-2020

I hereby make application for a General Anesthesia Permit from the Nevada State Board of Dental Examiners. I understand that if this permit is issued, I am authorized to administer to a patient of any age general anesthesia, deep sedation or moderate sedation ONLY at the address listed above. If I wish to administer general anesthesia, deep sedation or moderate sedation at another location, I understand that each site must be inspected and issued a general anesthesia site permit by the Board prior to administration of general anesthesia. I understand that this permit, if issued allows only me to administer general anesthesia, deep sedation or moderate sedation. I have read and am familiar with the provisions and requirements of NRS 631 and NAC 631 regarding the administration of general anesthesia.

I hereby acknowledge the information contained on this application is true and correct, and I further acknowledge any omissions, inaccuracies, or misrepresentations of information on this application are grounds for the revocation of a permit which may have been obtained through this application. It is understood and agreed that the title of all certificates shall remain in the Nevada State Board of Dental Examiners and shall be surrendered by order of said Board.

Signature of Applicant

Date

01/11/2023

► RECEIVED ◀
JAN 12 2023

Agenda Item 7(c):
Approval/Rejection of Voluntary Surrender of
License – NAC 631.160

NAC 631.160 Voluntary surrender of license. ([NRS 631.190](#))

1. If a licensee desires voluntarily to surrender his or her license, he or she may submit to the Board a sworn written surrender of the license accompanied by delivery to the Board of the certificate of registration previously issued to him or her. The Board may accept or reject the surrender of the license. If the Board accepts the surrender of the license, the surrender is absolute and irrevocable. The Board will notify any agency or person of the surrender as it deems appropriate.

2. The voluntary surrender of a license does not preclude the Board from hearing a complaint for disciplinary action filed against the licensee.

[Bd. of Dental Exam'rs, § XX, eff. 7-21-82]

Agenda Item 7(c)(1):
Paul Sablan Sauget, DDS

05/22/23

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

To the Nevada State Dental Board:

I, Dr. Paul Sauget, voluntarily surrender my retired dental license so as to minimize further renewals and correspondence with the Nevada state dental board. It was a pleasure serving patients there back in 2013.

Per direction of Director Chris Bateman, MBA, this is my signed request to do a voluntary surrender on my license. This hard copy will be mailed to the board imminently. Thank you so much for all your help.

Kindly,

A handwritten signature in black ink, reading "Paul Sablan Sauget, DDS, MSD". The signature is stylized with a long horizontal line extending from the end.

Paul Sablan Sauget, DDS, MSD
Diplomate, American Board of Orthodontics
Owner, Future Smiles Orthodontics
643 Chalan San Antonio, Suite 104
Tamuning, GU 96913
(671) 864-8809

Agenda Item 7(c)(2):
Anthony Q. Phan, DMD

Nevada State Board of Dental Examiners



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

VOLUNTARY SURRENDER OF LICENSE

I, ANTHONY Q. PHAN, hereby surrender my Dental / Dental Hygiene (circle one)
Print name

License number 4923 on the 6 day of May, 20 23.

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

Provide full current mailing address including city, state and zip on the line below:

3665 Ivy Canyon Ct. San Jose, CA 95121

Email address: dmd92840@yahoo.com

Home Phone: () _____

Cell Phone: (702) 480-1084

[Signature]
 Licensee Signature

May 6, 2023
 Date of Signature (must correspond with notary date)

State of _____

County of _____

The statements on this document are subscribed and sworn before me this _____ day of _____, 20____.

 Notary Public

 My Commission Expires

SEE ATTACHED
 NOTARY CERTIFI-
 CATE

STATE OF CALIFORNIA
 COUNTY OF SANTA CLARA

Received
 MAY 11 2023
 NSBDE
 06/2019

CALIFORNIA JURAT**GOVERNMENT CODE § 8202**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Santa Clara

Subscribed and sworn to (or affirmed) before me on
this 6th day of May, 2023, by
Date Month Year

(1) Anthony phan

(and (2) _____),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to
be the person(s) who appeared before me.

Signature S. Casillas
Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

Completing this information can deter alteration of the document or
fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Voluntary Surrender of License

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Agenda Item 7(c)(3):
Olivia Rodrigues, DDS

Nevada State Board of Dental Examiners



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

VOLUNTARY SURRENDER OF LICENSE

I, Olivia M. Rodrigues, hereby surrender my Dental / Dental Hygiene (circle one)
Print name

License number 7004 on the 17 day of May, 2023.

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

Provide full current mailing address including city, state and zip on the line below:

5712 Brett Drive Sacramento, CA 95842

Email address: orad03@hotmail.com

Home Phone: (9) NA Cell Phone: (916) 501-0967

Olivia M. Rodrigues
 Licensee Signature

May 17, 2023
 Date of Signature (must correspond with notary date)

State of California

County of Sacramento

The statements on this document are subscribed and sworn before me this 17 day of May, 2023



GS
 Notary Public

10-21-2025
 My Commission Expires

Received
 MAY 18 2023
 NSBDE
 06/2019

Agenda Item 7(c)(4):
Erum Majid, RDH

Nevada State Board of Dental Examiners



REC-23
1067
105610

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

VOLUNTARY SURRENDER OF LICENSE

I, ERUM MAJID, hereby surrender my Dental / Dental Hygiene (circle one)
Print name
 License number 3799 on the 2 day of FEBRUARY, 2023.

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

Provide full current mailing address including city, state and zip on the line below:

6693 STEPKOCK CT, LAS VEGAS, NV-89103

Email address: ganzo12@hotmail.com

Home Phone: (702) 218-6900 Cell Phone: (702) 218-6900

Erum Majid

Licensee Signature

2/2/23

Date of Signature (must correspond with notary date)

State of Nevada

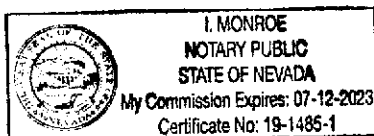
County of Clark

The statements on this document are subscribed and sworn before me this 2 day of February, 2023.

[Signature]
 Notary Public

7-12-2023

My Commission Expires



Agenda Item 7(d):
Approval/Rejection of Temporary
Anesthesia Permit – 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 7(d)(1):
Won Jong Lee, DDS -- General
Anesthesia



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

Dr. Steve Huang Lic# S2-122
Hold GA site Permit - AA
SPG454-AA

GENERAL ANESTHESIA PERMIT APPLICATION

Office Site Permit ☐

Check box if you are
applying for a Site
Permit for this same
office location as well

Name: Lee, Won Jong License Number: S2-203C

Dental Practice Name: Henderson Oral Surgery & Dental Implant Center

Office Address: 2835 St Rose Pkwy Ste. 100 Office Telephone: 702-270-2999

Henderson, NV 89052

Office Fax: _____

DENTAL EDUCATION

University /

College: University of California, Los Angeles

Location: 714 Tiverton Ave,
Los Angeles, CA 90024

Dates attended: 09/01/2012 to 06/30/2016 Degree Earned: DDS

SPECIALTY EDUCATION

University /

College: University of California, San Francisco

Location: 707 Parnassus Ave.
San Francisco, CA 94143

Dates attended: 07/01/2016 to 06/30/2022 Degree Earned: MD & Oral and maxillofacial surgery

The following information and documentation must be received by the Board office prior to consideration of a general anesthesia permit:

- 1) Completed and signed application form with all questions answered in full;
- 2) Non-refundable application fee in the amount of \$750.00;
- 3) Proof of completion of approved training requirements in general anesthesia;
- 4) Copy of current certification in Advanced Cardiac Life Support, or in Pediatric Advance Life Support if you have a current Nevada specialty license for Pediatric Dentistry

Received

MAY 05 2023

NSBDE

Revised 1/2014

CIC \$750⁰⁰ 05/10/23 MN

HAVE YOU:

- 1) Completed one (1) year advanced training in Anesthesiology? _____ Yes ☒ No

Where: _____ When: _____

- 2) Completed a residency program in General Anesthesia of not less than one (1) calendar year approved by the Board of Directors of the American Dental Society of Anesthesiology? _____ Yes ☒ No

Where: _____ When: _____

- 3) Completed a graduate program in Oral and Maxillofacial Surgery approved by the Commission of Accreditation of the American Dental Association? ☒ Yes _____ No

Where: University of California, San Francisco When: 07/01/2016 - 06/30/2022

I hereby make application for a General Anesthesia Permit from the Nevada State Board of Dental Examiners. I understand that if this permit is issued, I am authorized to administer general anesthesia ONLY at the address listed above. If I wish to administer general anesthesia at another location, I understand that each site must be inspected and certified by the Board prior to administration of any general anesthesia. I understand that this permit, if issued allows only me to administer general anesthesia. I have read and am familiar with the provisions and requirements of NRS 631 and NAC 631 regarding the administration of general anesthesia.

It is understood and agreed that the title of all certificates shall remain in the Nevada State Board of Dental Examiners and shall be surrendered by order of said Board.

Signature of Applicant _____

Date _____

5/5/2023

Received

MAY 05 2023

NSBDE

Agenda Item 7(e):
Discussion, Consideration, and Possible
Approval/Rejection of Public Health
Endorsement Application – NRS 631.287

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

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

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

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

Agenda Item 7(e)(1):
Carrie Wucinich, RDH -- Heavenly Smiles



Nevada State Board of Dental Examiners

2651 N. Green Valley Pkwy, Ste. 104

Henderson, NV 89014

(702)486-7044 – (800) DDS-EXAM – Fax (702)486-7046

APPLICATION FOR PUBLIC HEALTH ENDORSEMENT

Name: CARRIE Wucinich License No: 101473
 Address: [REDACTED] Home Phone: [REDACTED]
 City, State & Zip Code: Las Vegas NV 89129
 E-mail: [REDACTED] Work Phone: _____
 Agency Affiliation for Endorsement: Heavenly Smiles Agency Phone: 702-445 1060
 Agency Address: 7200 W. Azure Dr. Suite 140-14
 Dental Hygiene Education Institution: CSN
 Year of Graduation: 2008 Degree Received: AS

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

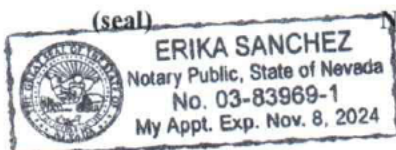
Service to the community in southern Nevada w/in schools, assisted living and individuals that are homeless. The goal is to serve all of those individuals in the most vulnerable population.

Previous Public Health Dental Hygiene Endorsements: I also provide dental supplies and education to children fighting cancer, and in underserved areas.

Please sign and have notarized:

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

Signature: [Signature] Date: 4-18-2023



Notary: [Signature] Date: 4/18/2023

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

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

Received
 APR 24 2023
 Revised 12/2021
 NSBDE



April 12, 2023

Nevada Board of Dental Examiners Members of the Board

Good Day,

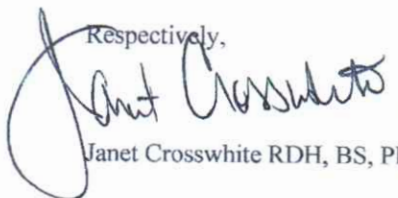
I hope this letter finds you all well. My name is Janet Crosswhite. I am the Program Director of Heavenly Smiles Mobile Dental LLC. I am sending this letter for consideration for approval for a Public Health Endorsement Application for Ms. Carrie Wucinich RDH.

Heavenly Smiles Mobile Dental LLC service our community here in Southern Nevada in the public health capacity within schools, Assisted Living, and individuals experiencing homelessness. We are here to save one tooth at a time. Our program has grown tremendously within the past few years, and we would love to continue to service our community most vulnerable population. In doing so we want to bring aboard only qualifying, experienced, passionate Registered Dental Hygienist and supporting staff, Ms. Wucinich has those qualifications and many more. Ms. Wucinich bring years of expertise in the public health sector by identifying and assessing disparities within our community. Ms. Wucinich has a nonprofit in servicing children with cancer by bringing resources to the parents and patients, she also has a program called girls with pearls helping young girls grow in confidence.

During our interviewing process Ms. Wucinich stated she is up to date on the CDC guidelines and recommendations in Infection Control Protocols during the Covid pandemic and post pandemic. Keeping our community safe is top priority of our program and we have been very successful in doing so. Please note that Ms. Wucinich has many years in the dental field as a RDH and has proven that she is committed to providing our community with safe dental hygiene services under her scope of practice.

Thank you for your consideration

Respectively,

 RDH, BS, PHE

Janet Crosswhite RDH, BS, PHE

Received
APR 24 2023
NSBDE



Association Member Benefits Advisors, LLC.
In CA dba Assn. Member Benefits & Insurance Agency
P.O. Box 14576
Des Moines, IA 50306-3576
www.proliability.com

April 12, 2023

Carrie Wucinich
[REDACTED]

Re: Allied Health Professional Liability

Customer Number: [REDACTED]

Policy Number: [REDACTED]

Expiration Date: [REDACTED]

Dear Carrie Wucinich,

I am pleased to enclose your insurance policy through the Liberty Insurance Underwriters Inc. Please review the material carefully and take specific notice of any endorsements to the policy. These policy documents should be kept with your important papers.

Please note the important information below:

Address or Mid-Term Changes: Any change of address or request for mid-term change should be sent to the following address to assure timely receipt of future notices. All requests must be signed and dated by the policy holder. Also note that requests for mid-term changes to your coverage must be approved by an underwriter prior to binding coverage.

Association Member Benefits Advisors, LLC.
In CA dba Assn. Member Benefits & Insurance Agency
P.O. Box 14576
Des Moines, IA 50306-3576
Fax: 212-948-1509
Phone: 1-800-375-2764

If you have any questions, please contact our office Monday through Friday from 8:15 a.m. to 5:00 p.m. (CT). Thank you for the opportunity to serve your insurance needs.

Sincerely,

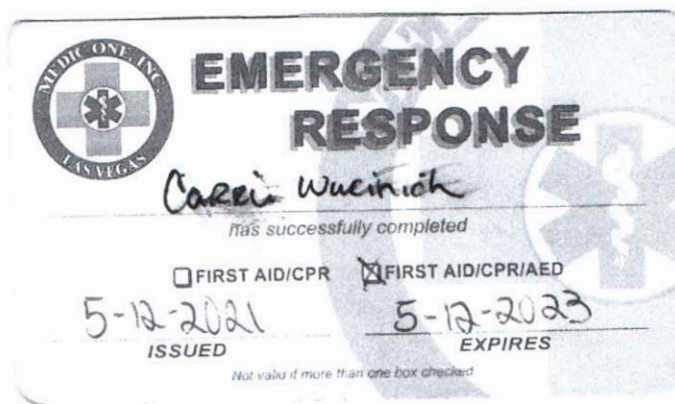
Brad J. Feller
Principal | CA License #0M07073
AMBA

Enclosure

Dental Hygienist Employed
New Submission

Received
APR 24 2023
NSBDE

Received
APR 24 2023
NSBDE



Agenda Item 7(f):
Approval/Rejection of Volunteer Service
Provider Application – NRS 631.190

NRS 631.190 Powers and duties. [Effective January 1, 2020.] In addition to the powers and duties provided in this chapter, the Board shall:

1. Adopt rules and regulations necessary to carry out the provisions of this chapter.
2. Appoint such committees, review panels, examiners, officers, employees, agents, attorneys, investigators and other professional consultants and define their duties and incur such expense as it may deem proper or necessary to carry out the provisions of this chapter, the expense to be paid as provided in this chapter.
3. Fix the time and place for and conduct examinations for the granting of licenses to practice dentistry, dental hygiene and dental therapy.
4. Examine applicants for licenses to practice dentistry, dental hygiene and dental therapy.
5. Collect and apply fees as provided in this chapter.
6. Keep a register of all dentists, dental hygienists and dental therapists licensed in this State, together with their addresses, license numbers and renewal certificate numbers.
7. Have and use a common seal.
8. Keep such records as may be necessary to report the acts and proceedings of the Board. Except as otherwise provided in [NRS 631.368](#), the records must be open to public inspection.
9. Maintain offices in as many localities in the State as it finds necessary to carry out the provisions of this chapter.
10. Have discretion to examine work authorizations in dental offices or dental laboratories.

[Part 4:152:1951; A [1953, 363](#)] — (NRS A [1963, 150](#); [1967, 865](#); [1993, 2743](#); [2009, 3002](#); [2017, 989, 2848](#); [2019, 3205](#), effective January 1, 2020)

Agenda Item 7(f)(1):
Charlotte Worthley, RDH -- Adopt a
Vet Dental Program



Nevada State Board of Dental Examiners

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

VOLUNTEER SERVICE PROVIDER APPLICATION

Volunteer Entity Name:	Adopt a Vet Dental Program
Business Address:	1301 Cordone Ave. Suite 100
City, State, Zip Code:	Reno, NV 89502
Business Telephone:	775-470-8707
Email Address:	
Volunteer Service Program [Must relate directly to the practice of dentistry and/or dental hygiene and provide details of the volunteer service]:	<p>The Adopt a Vet Dental Program currently has 142 dentists participating in our program. These dentists provide probono dental care to low income veterans that do not qualify at the VA for dental care, nor can they afford to see a dentist on their own. Adopt a Vet tracks all donated services for all the cases.</p>
Number of Participants:	135-142 Dentist in Private Practice
Location for Volunteer Service:	At the office of each dentist
Date(s) of Volunteer Service:	Varies throughout the year
Individual Submitting Request:	Demetrio Gonzalez, Executive Director of Adopt A Vet Dental
Business Address:	1301 Cordone Ave. Suite 100
City, State, Zip Code:	Reno, NV 89502
Business Telephone:	775-470-8707
Email Address:	deme.gonzalez@aavdp.com
Date of Request:	4/17/2023

Signature of Person Authorized to Represent the Volunteer Service Entity

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Approved by:
Effective Date or Approval:
Disapproved [Explanation]: