

NEVADA STATE BOARD of DENTAL EXAMINERS



BOARD TELECONFERENCE MEETING

THURSDAY, DECEMBER 11, 2025

4:00 P.M.

PUBLIC BOOK

STATE OF NEVADA

JOE LOMBARDO
Governor



DR. KRISTOPHER SANCHEZ
Director

PERRY FAIGIN
NIKKI HAAG
MARCEL F. SCHAEERER
Deputy Directors

A.L. HIGGINBOTHAM
Executive Director

DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA

Meeting Date & Time

Thursday, December 11, 2025
4:00 p.m.

Meeting Location

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

Video Conferencing/ Teleconferencing Available

To access by phone, +1(646) 568-7788

To access by video webinar,

<https://us06web.zoom.us/j/87847418865>

Webinar/Meeting ID#: 878 4741 8865

Webinar/Meeting Passcode: 976487

PUBLIC NOTICE:

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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.

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

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

1. Call to Order

a. 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 the 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 to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

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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 – NRS 631.190 (For Possible Action)

- i. November 12, 2025 – Board Meeting**
- ii. November 19, 2025 – Dental Hygiene, Dental Therapy, and EFDA Committee Meeting**
- iii. November 19, 2025 – Infection Control Committee Meeting**

- b. Review and Discussion of the Initial Licensing and Permitting Report– NRS 631. 190**
(For Informational Purposes Only)

- i. Dentists, Dental Hygienists, and Dental Therapists**
 - ii. Public Health Programs**

5. Executive Team Report: (For Possible Action)

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

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

- i. LCB File No. R074-25 - Department of Business & Industry**
 - ii. LCB File No. R056-24 – Teledentistry**

- c. Review, Discussion and Possible Approval/Rejection of the Revised Proposed Regulations for R079-24 EFDA – NRS 631.190 (For Possible Action)**

- d. Review, Discussion and Possible Approval/Rejection of Remand(s) for Dismissal – NRS 631.3635; NRS 622A.170; NRS 622.330; NRS 631.190 (For Possible Action)**

- i. Review Panel 2**

- 1. Case No. 1612
 - 2. Case No. 1875
 - 3. Case No. 2495
 - 4. Case No. 2496
 - 5. Case No. 1733
 - 6. Case No. 2199

- ii. Review Panel 3**

- 1. Case No. 2437
 - 2. Case No. 2520

- e. Review, Discussion and Possible Approval/Rejection of Stipulation(s) – NRS 631.3635; NRS 622A.170; NRS 622.330; NRS 631.190 (For Possible Action)

- i. Case No. 2260

- f. Review, Discussion and Possible Approval/Rejection of Authorized Investigation(s) – NRS 631.190 (For Possible Action)

- i. Dr. Z

- ii. Dr. Y

6. New Business: (For Possible Action)

- a. Review, Discussion, and Possible Approval/Rejection for Authorizing General Counsel to Draft Proposed NRS or NAC Regulations for the Anesthesia Committee to Develop and Provide Back to the Full Board for Review for Future Legislation– NRS 631.190 (For Possible Action)

- i. 2 Permit Scheme for Moderate Sedation (Pediatric and Adult) and General Anesthesia (Pediatric and Adult) [NRS Regulation Revisions Required]

- ii. 3 Permit Scheme for Minimal/Oral Sedation, Moderate Sedation (Pediatric and Adult) and General Anesthesia (Pediatric and Adult) [NRS Definition Revisions May Be Required]

- b. Review, Discussion, and Possible Approval/Rejection for Authorizing General Counsel to Draft Proposed NRS Regulations to Transition the License Renewal Date from June 30 to the DOB of the Licensee and Provide Back to the Full Board for Review for Future Legislation – NRS 631.190 (For Possible Action)

- c. Review, Discussion, and Possible Approval/Rejection of the Updated Infection Control Inspection Report Survey Form Approved by the Infection Control Committee on November 19, 2025 – NAC 631.1785 (For Possible Action)

- d. Review, Discussion, and Possible Approval/Rejection of Temporary Anesthesia Permit – NAC 631.2234; NRS 631.190 (For Possible Action)

- i. Dr. Sapir Cohen, DMD – Moderate Sedation

- e. Review, Discussion, and Possible Approval/Rejection of Voluntary Surrender of License –NRS 631.190; NAC 631.160 (For Possible Action)

- i. Dr. Reihaneh G. Mauer, DMD

- f. Review, Discussion, and Possible Approval/Rejection of Reinstatement of an Inactive or Other Nonpracticing Status of a License –NRS 631.190; NAC 631.335(b); NAC631.170(b) (For Possible Action)

- i. Christopher Davenport, RDH

- g. Review, Discussion, and Possible Approval/Rejection of the Airtable Operational Software Package Contract with SHI under the Nevada State Purchasing Division Sub-Contract Agreements– NAC 631.190 (For Possible Action)
- h. Review, Discussion, and Possible Approval/Rejection of a 3.5% Merchant Services Processing Fee for All Payments that Use a Credit/Debit Card Effective January 1, 2026 – NAC 631.190 (For Possible Action)
- i. Review, Discussion, and Possible Approval/Rejection of a One-Time Merit Bonus Equivalent to One 40-Hour Workweek to All NSBDE Staff Members – See NRS 281.122 (Non-General Fund Board/Employment Contracts - Public Meeting Required) (For Possible Action)

- 7. **Public Comment (Live public comment 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.

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- 8. **Announcements:**

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

Note: To minimize computer resource and data storage drains, only the copies of the applications (redacted to exclude personal identifying or personal health information) are included with this agenda. However, the Board acknowledges that some records attached to the applications (aside from any included proprietary information, but including such things as permits, licenses, route maps, etc.) are generally public records. The Board will make available copies of the non-confidential documents attached to the applications to any member of the public upon request.

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NEVADA STATE BOARD OF DENTAL EXAMINERS

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA

MEETING MINUTES

Meeting Date & Time

Wednesday, November 12, 2025
6:00 p.m.

Meeting Location

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

Video Conferencing/ Teleconferencing Available

To access by phone, +1(646) 568-7788

To access by video webinar,

<https://us06web.zoom.us/j/85886226810>

Webinar/Meeting ID#: 858 8622 6810

Webinar/Meeting Passcode: 571807

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1. Call to Order

a. Roll Call/Quorum

Board Members' Present: Dr. Ron West (President), Dr. Daniel Streifeil (Secretary-Treasurer),

Dr. Joshua Brnaco, Dr. Lance Kim, Dr. Christopher Hock, Ms. Jana McIntyre, Ms. Yamilka Arias, Ms. Kimberley Petrilla, Dr. Joan Landron, Dr. Ashley Hoban.

Board Members' Absent: Mr. Michele Pontoni, Esq.

Board Staff Present: Director Higginbotham, General Counsel Barraclough, A. Cymerman, M. Kelley, M. Ramirez, S. Barjon, L. Chagolla.

- 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 the 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 to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

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Dan Ta, attorney for the American Association of Orthodontists, provided public

comment. He stated that the AAO supports the Board's implementation of AB 147 and agrees that an in-person visit is required before orthodontic appliances are used. However, he expressed concern that the current draft of Section 2.2 may be interpreted more broadly than intended. To ensure clarity and alignment with statutory requirements, he recommended revisions for the Board's consideration.

Allen Erenbomb, representative of DialCare, stated he wished to note a concern regarding the prior public comment suggesting changes to the proposed teledentistry regulations. He indicated that he had not yet reviewed the suggested language but emphasized that DialCare appreciates the Board and staff's work on the regulations and supports the version currently drafted and included in the meeting materials.

Director Higginbotham communicated that there were two written public comments regarding teledentistry and immunizations, submitted by Dr. Chen, and Vicki Ives from the Department of Health and Human Services, respectively. These were included with the meeting materials.

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

a. Request to Remove Agenda Item(s) (For Possible Action)

Dr. West requested the removal of agenda item 6.f. - Review, Discussion, and Possible Approval/Rejection of 90-Day Extension of Temporary Anesthesia Permit.

A motion to remove agenda item 6.f. was made by Ms. McIntyre, and it was seconded by Dr. Hoban.

No discussion.

All members' voted 'AYE.'

b. Approve Agenda (For Possible Action)

A motion to approve the agenda was made by Dr. Streifel, and it was seconded by

Dr. Landron.

No discussion.

All members' voted 'AYE.'

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

a. Approval/Rejection of Minutes – NRS 631.190 (For Possible Action)

- i. October 15, 2025 – Board Meeting**
- ii. October 29, 2025 – CE Committee Meeting**
- iii. October 29, 2025 – Infection Control Committee Meeting**

A motion to approve the meeting minutes was made by Ms. McIntyre, and it was seconded by Dr. Hoban.

No discussion.

All members' voted 'AYE.'

b. Review and Discussion of the Initial Licensing and Permitting Report– NRS 631. 190
(For Informational Purposes Only)

- i. Dentists, Dental Hygienists, and Dental Therapists**

Director Higginbotham presented the initial licensing and permit report for informational purposes. This report serves as the Board's formal update on dentists, dental hygienists, and dental therapists who have been issued licenses from July 1, 2025, to the present. He noted this will be a recurring agenda item, offering the Board a quarterly list of individuals approved for licensure and signed off by the Board Secretary-Treasurer and the Executive Director.

- ii. Public Health Programs**

Director Higginbotham reported that this item provides information on public

health programs authorized by the Dental Hygiene, Dental Therapy, and EFDA Committee, along with those inspected and approved by Board agents. A list of programs that have completed the full process will also be included under this agenda item in future meetings. This report is for informational purposes only.

5. Executive Team Report: (For Possible Action)

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

General Counsel Barraclough communicated there are no new updates on the one pending litigation case.

b. Regulatory Update (For Informational Purposes Only)

i. Emailed Business Impact Statement to All Licensees

Director Higginbotham communicated that all licensees, including dentists and dental hygienists, will receive an email this week with a series of proposed regulations to begin the workshopping process. Licensees will have the opportunity to submit a business impact statement detailing how each proposed regulation may positively or adversely affect their practice.

c. Review, Discussion and Possible Approval/Rejection of the Revised Proposed Regulations for RO56-24 Teledentistry – NRS 631.190 (For Possible Action)

Director Higginbotham communicated that the intent of the current language was for regarding Public Health Programs, noting it is intended to allow these programs to utilize teledentistry and refer patients to dentists for follow-up care. General Counsel Andrea Barraclough provided further clarification on the matter.

General Counsel Andrea Barraclough explained that the draft regulations have been reviewed by the Legislative Counsel Bureau (LCB), which returned language that is statutorily compliant. The intent of Section 2 is to allow Public Health Programs' RDHs to establish a bona fide relationship with patients solely through an initial consultation and review of patient history, enabling care for underserved rural populations who may not have seen a dentist in many years. While alternate language could be considered to clarify this applies only to public health programs,

the current draft reflects LCB-approved language for the Board's specific intent.

Director Higginbotham clarified the intent is to improve access to care for rural Nevadans who lack existing dentist-patient relationships, allowing them to be guided to appropriate care after seeing a hygienist in a public health program.

Dr. West noted that the discussion reflects a balance between concerns from some orthodontists about remote care and the Board's goal of improving access to care through public health programs, acknowledging that not all stakeholders may be fully satisfied.

General Counsel Barraclough explained that the LCB language includes multiple cross-references to statutes and regulations, which, while complex, ensure that only Public Health Programs can establish bona fide relationships under this provision. She offered to provide a simplified summary for the Board if they choose to table the item for further review, but confirmed that the current language does provide the intended protections against for-profit entities.

Dr. Branco inquired about the intent of RO56-24 as the NRS does already outline how to establish a bona fide relationship, including Public Health.

General Counsel Barraclough explained that NRS 631.34583 generally requires a licensee to establish a bona fide relationship before providing services via teledentistry, with exceptions for emergent care, initial need for orthodontic assessments, and purposes of emergent care in connection with public health programs. The proposed regulation aims to cover situations not explicitly captured by the statute, including public health RDHs outside the statutory definition. She noted that the LCB reviewed the draft, confirmed it does not conflict with NRS 631.34583, and recognized it as a supplemental, not overriding, regulation.

Dr. Branco inquired about data to support benefit to the public for allowing an RDH to establish a the bona fide relationship through teledentistry.

Director Higginbotham communicated that data on the public benefit of allowing an RDH to establish a bona fide relationship via teledentistry has not yet been

researched. The current focus has been on defining when such relationships are applicable, and input from other state agencies suggests tele-dentistry is intended primarily as a tool for public health programs.

Dr. Branco communicated his opposition for an RDH to establish the relationship.

Director Higginbotham clarified that RDHs would use teledentistry to communicate with a dentist, coordinating patient care during a public health event, rather than for direct treatment themselves.

General Counsel Barraclough clarified that public health RDHs may perform duties allowed under their scope of practice without prior dentist authorization or supervision, which is typically required. This provision is intended for RDHS to establish a bona fide relationship to underserved areas, where dentist availability is limited. RDHs still cannot perform procedures outside their scope; their role is limited to preventive and diagnostic services. Any identified dental issues must be referred to a licensed dentist, and the bona fide relationship allows them to coordinate care through tele-dentistry as needed.

Dr. Hoban inquired about the language change from “..determining the need for orthodontic correction...” to “correcting position of teeth using orthodontic appliances.” Dr. Hoban expressed opposition to permitting orthodontic treatment without an in-person examination. She emphasized that in-person exams are necessary for ensuring proper radiographs and study models are made, and stated that any regulation section that allows otherwise should not be included.

Ms. Arias expressed her agreement.

Dr. Branco clarified that NRS requires orthodontists to see patients in person before starting treatment so, the Board should not make a regulation that contradicts NRS.

Dr. Hoban expressed concern that the current language could be misinterpreted, creating gray areas. She noted that the orthodontic provisions seem separate from other public health sections and questioned why they are combined, suggesting potential for misapplication or manipulation.

General Counsel Barraclough noted that the language was included to mirror NS 631.34583 as required by the LCB. While the board could propose revised language or strike it, doing so might prompt the LCB to object, since the current wording reflects their directive to align with the statute.

Dr. John Griffiths, an orthodontist in Las Vegas, expressed concern that the current draft language allowing consultations “in lieu of” an in-person exam could create a loophole for groups to begin orthodontic treatment without a proper bona fide relationship, including required in-person exams and X-rays. He emphasized that the original statute intended to ensure patient safety and proper orthodontic care, and he supports a minor clarification—such as suggested by Dan Taw of the AAO—to reduce ambiguity. He noted that without such clarification, the AO may not support advancing the regulation as currently written.

Alan Erenbaum, representing Dial Care, noted that Section 2.2, or a version of it, is essential to ensure dentists can provide emergent care via teledentistry. He emphasized that the statute does not require an in-person exam for emergent care, but the regulation does, so an exception is necessary. Noted his agreement with the AAO that the LCB language may be overly broad for orthodontics. He cautioned against striking the section entirely, as doing so would limit access to emergent teledentistry care for Nevadans.

Dr. West suggests that the Board table this until concerned parties can submit their items in writing for Board review. He echoed the concern that the intent to preserve emergent care access must remain. Members were asked to submit any comments, whether in agreement or disagreement, to board staff so they can be forwarded to the LCB for consideration, with the goal of returning the regulation for reconsideration promptly. Dr. West noted for the record that the sections the Board is focusing on is the language in 2.2 and section E.

Dr. Branco stated that the current Nevada statutes clearly define how orthodontists must establish bonafide relationships and require necessary in-person follow-up after tele-dentistry. He questioned why the proposed regulations are creating confusion, leading some to believe they allow more than what the statute permits, and identified this misunderstanding as a recurring concern in

orthodontic language/feedback.

Ms. Arias suggested that the language may need be spelled out more thoroughly to cease the misunderstanding with this regulation.

Dr. Hoban expressed strong opposition to adding the current language, noting it could create a loophole allowing orthodontic treatment, such as correcting tooth position via appliances, without an in-person exam - citing SmileDirect as an example and in her experience seeing poor outcomes.

Dr. Branco acknowledges that by adding the provided language into the pending regulation, that goes against current NRS regulations and noting that this is not something the Board can do.

General Counsel Barraclough discussed that NRS 631.3458(3)(c) allows an initial diagnosis of malpositioned teeth and determination of the need for an orthodontic appliance without an existing bona fide relationship, but the diagnosis must be confirmed via an in-person visit before treatment begins. The LCB had requested that the NAC mirror this statute, likely to maintain consistency with other legislation. General Counsel acknowledged the possibility that this mirroring may have been applied without full consideration of the implications. Staff will gather stakeholder feedback and present it to the LCB to determine if mirroring is necessary or if the regulation can rely solely on the statute. This review is the reason for tabling the issue.

Dr. Branco requested documentation be provided that shows how this regulation preserves the existing law in NRS.

Director Higginbotham reviewed public comment regarding immunization reporting. The proposed change in Section 10.2 would replace the current language requiring (a) notification to the patient's primary care provider and (b) maintaining a monthly log, with a single requirement that dentists, dental hygienists, or dental therapists holding a special endorsement report each immunization dose directly to the Nevada Statewide Immunization Information System. He requested discussion or feedback on this proposed language before proceeding.

Dr. Branco expressed that the Board should find out what is done throughout other facilities in the state and mirror that to create consistency.

Ms. Arias expressed her support for the proposed change to Section 10.2, noting that reporting immunizations directly to the statewide system is logical and eliminates redundancy, similar to how prescriptions are recorded through pharmacies, and questioned the utility of maintaining a separate monthly log for the board.

Dr. West directed that all public comments from stakeholders, along with the board's comments from today, be submitted to the LCB. The board requested that the LCB provide specific explanations for their decisions on the language, to help clarify intent and identify any potential gaps or unintended consequences from over-mirroring the statute.

A motion was made to table the revised proposed regulations by Dr. West, and it was seconded by Ms. McIntyre.

Ms. Arias suggested that since the LCB are not dental professionals, perhaps the Board should provide explanations on our requested changes to help the LCB make sense of them.

Director Higginbotham explained that the board is facing pushback when revisions are proposed due to a patchwork of regulations where stakeholders have incorporated conflicting provisions into the NRS and NAC. The LCB is now enforcing that no NAC regulations can conflict with the NRS, and any changes to the NRS would require legislative action. The board is gathering stakeholder input to ensure their voices are heard, but the LCB maintains the final authority.

Dr. West emphasized the importance of providing clarification to the LCB before they finalize decisions. He suggested establishing a clear dialogue so the board can offer opinions and guidance, aligning the language between the NAC and NRS, to minimize back-and-forth and ensure the final draft is as clear and agreeable as possible.

No further discussion.

All members' voted 'AYE'.

- d.** Review, Discussion and Possible Approval/Rejection of Remand(s) for Dismissal –
NRS 631.3635; NRS 622A.170; NRS 622.330; NRS 631.190 (For Possible Action)

i. Review Panel 1

1. Case # 2509

ii. Review Panel 2

1. Case # 2438
2. Case # 2473
3. Case # 2479
4. Case # 2489
5. Case # 2500

iii. Review Panel 3

1. Case # 2501
2. Case # 2503

A motion to group and approve was made by Ms. Arias, and it was seconded by Dr. Kim.

No discussion.

All members' voted 'AYE.'

- e.** Review, Discussion and Possible Approval/Rejection of Remand(s) for Dismissal
with Letters of Concern – NRS 631.3635; NRS 622A.170; NRS 622.330; NRS 631.190
(For Possible Action)

**Disclaimer: Please note that older cases will be identified by case numbers, while new and future cases will be redacted and referred to by pseudonym in accordance with updated Board confidentiality policy. **

i. Review Panel 2

1. Dr. A

2. Case #2028

3. Case #1964

ii. Review Panel 3

1. Dr. B

A motion to group and approve was made by Dr. Landron, and it was seconded by Dr. Hoban.

No discussion.

All members' voted 'AYE.'

f. Review, Discussion and Possible Approval/Rejection of Authorized Investigation(s) – NRS 631.190 (For Possible Action)

i. Dr. Z

A motion to approve investigation was made by Dr. West, and it was seconded by Ms. McIntyre.

No discussion.

All members' voted 'AYE.'

ii. Dr. Y

Dr. Kim inquired if the Board has DHA access to look into this case further.

Director Higginbotham confirmed the Board has access.

General Counsel Barraclough confirmed, but noted for some reason they could not pull the specific documentation for this matter at this time.

Dr. Kim clarified that the reason for asking is the item was filed by a military agency, if the Board had access to DHA to even conduct an investigation.

Dr. West clarified that the information would come out during the investigation

and if there not was access to material needed then the case would be remanded at that point.

A motion to approve investigation was made by Dr. West, and it was seconded by Dr. Branco.

No discussion.

All members' voted 'AYE.'

iii. Dr. X

A motion to approve investigation was made by Ms. Arias, and it was seconded by Dr. Kim.

No discussion.

All members' voted 'AYE.'

6. New Business: (For Possible Action)

- a. Review, Discussion, and Possible Approval/Rejection of the Revised Disciplinary Case Review and Resolution Matrix - NRS 631.190 (For Possible Action)**

General Counsel Barraclough communicated the previously tabled Section I of the disciplinary matrix. The original Section I included non-disciplinary actions, which was not permitted. Following the prior meeting, the section was redrafted to reflect the board's vote, offering two options: non-publication and letters of concern with dismissals. The revised language has been provided, with the old Section I replaced by new Sections I and J for clarity, and the board was asked to confirm agreement with these revisions.

A motion to approve revised Disciplinary Case Review and Resolution Matrix was made by Dr. West, and it was seconded by Dr. Hock.

No discussion.

All members' voted 'AYE.'

- b.** Review, Discussion, and Possible Approval/Rejection of a \$100 Preparation Fee for Review Panel Members to Review Case Files Prior to the Review Panel Discussions- NRS 631.190 (For Possible Action)

A motion to approve preparation fee was made by Dr. Kim, and it was seconded by Dr. West.

No discussion.

All members' voted 'AYE.'

- c.** Review, Discussion, and Possible Approval/Rejection of the Board Bylaws on Board Member and Board Agent Compensation and Reimbursement Rates- NRS 631.190 (For Possible Action)

A motion to approve was made by Dr. Streifel, and it was seconded by Dr. Kim.

No discussion.

All members' voted 'AYE.'

- d.** Review, Discussion, and Possible Approval/Rejection of Permanent Anesthesia Permit – NAC 631.2213; NRS 631.190 (For Possible Action)
 - i.** Michael D. Pearson, DMD – Pediatric Moderate Sedation
 - ii.** Tiffany Lu, DMD – Pediatric Moderate Sedation
 - iii.** Brennan Truman, DMD – Pediatric Moderate Sedation
 - iv.** David Lee, DMD – Moderate Sedation

A motion to group and approve was made by Dr. Landron, and it was seconded by Dr. Branco.

No discussion.

All members' voted 'AYE.'

- e.** Review, Discussion, and Possible Approval/Rejection of Temporary Anesthesia Permit – NAC 631.2213; NAC 631.2254; NRS 631.190 (For Possible Action)
 - i.** Dr. Caitlin M. Caraballo, DDS – Moderate Sedation
 - ii.** Dr. Joseph N. Taylor, DDS – Moderate Sedation
 - iii.** Dr. Robert Rodriguez, DMD – Moderate Sedation

A motion to group and approve was made by Dr. Branco, and it was seconded by Dr. Kim.

No discussion.

All members' voted 'AYE.'

~~f. Review, Discussion, and Possible Approval/Rejection of 90-Day Extension of Temporary Anesthesia Permit – NAC 631.2213; NAC 631.2254; NRS 631.190 (For Possible Action)~~

~~i. Dr. Amir H. Mossadegh, DDS – Moderate Sedation~~

This item was removed from the agenda.

g. Review, Discussion, and Possible Approval/Rejection of Voluntary Surrender of License – NRS 631.190; NAC 631.160 (For Possible Action)

i. Dr. Nelson Poliran Jr.

A motion to approve voluntary surrender was made by Dr. Kim, and it was seconded by Dr. West.

No discussion.

All members' voted 'AYE.'

h. Review, Discussion, and Possible Approval/Rejection of the Submission of the FY25 Financial Audit Report to the Nevada State Legislative Counsel Bureau – NRS 631.190 (For Possible Action)

A motion to approve the FY25 audit was made by Dr. West, and it was seconded by Dr. Branco.

No discussion.

All members' voted 'AYE.'

7. **Public Comment (Live public comment 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.

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Vicki Ives, Division of Public and Behavioral Health, clarified for the record that the document included in the board packet was not submitted by the Division of Public Health, but was an informational item shared with the Nevada Cancer Coalition.

8. Announcements:

Dr. West congratulated Director Higginbotham the Board staff on all the hard work and changes made to have a successful audit.

Director Higginbotham communicated that it was a team effort to make the needed changes were done in ensuring accurate revenue tracking.

9. Adjournment: (For Possible Action)

A motion to adjourn was made by Dr. Landron, and it was seconded by Ms. McIntyre.

No discussion.

All members' voted 'AYE.'

Note: To minimize computer resource and data storage drains, only the copies of the applications (redacted to exclude personal identifying or personal health information) are included with this agenda. However, the Board

acknowledges that some records attached to the applications (aside from any included proprietary information, but including such things as permits, licenses, route maps, etc.) are generally public records. The Board will make available copies of the non-confidential documents attached to the applications to any member of the public upon request.

DRAFT

JOE LOMBARDO
Governor

STATE OF NEVADA



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DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA
Dental Hygiene, Dental Therapy, and EFDA Committee

Meeting Minutes

Meeting Date & Time

Wednesday, November 19, 2025
6:00 p.m.

Meeting Location

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

Video Conferencing/ Teleconferencing Available

To access by phone, +1(646) 568-7788

To access by video webinar,

<https://us06web.zoom.us/j/86706486755>

Webinar/Meeting ID#: 867 0648 6755

Webinar/Meeting Passcode: 115451

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

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

1. Call to Order

a. Roll Call/Quorum

Board Members' Present: Dr. Joshua Branco (Co-chair), Ms. Yamilka Arias (Co-chair), Ms. Jana McIntyre, Ms. Kimberly Petrilla.

Board Members' Absent: NA

Board staff present: Director Higginbotham, General Counsel Barraclough, A. Cymerman, M. Kelley, M. Ramirez, L. Chagolla.

- 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 the 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 to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

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No public comments.

3. Chairperson's Report: (For Possible Action)

- a. Request to Remove Agenda Item(s) (For Possible Action)

NA

- b. Approve Agenda (For Possible Action)

A motion to approve the agenda was made by Dr. Branco, and it was seconded by Ms. McIntyre.

No discussion.

All members voted 'AYE.'

4. New Business: (For Possible Action)

- a. Review, Discussion, and Possible Approval/Rejection of Public Health Program Applications – NRS 631.190; NRS 631.34583; NRS 631.287.

- i. The RDH Humanitarian Project

Director Higginbotham communicated for the record that this review for the application for The RDH Humanitarian project is the second review.

Nichelle Venable, representative from The RDH Humanitarian Project, confirmed they had submitted additional information to the Board, including a monthly report format to keep the Board informed about services provided, supervising dentists, and any needed restorative follow-up care. They explained that the RDH Humanitarian Project partners with Adopt a Vet Dental to provide hygiene services to veterans who do not qualify for dental insurance and to low-income uninsured seniors. The project focuses on patients meeting low-income criteria and ensures appropriate referral and supervision.

Dr. Branco inquired about the location where services will be provided.

Nichelle Venable clarified that services are provided at the Medical Volunteers of Southern Nevada clinic on Harrison Drive, where Adopt a Vet Dental currently operates. The clinic is fully equipped with dental operatories, a sterilization area, and a lab. The program does not plan to be on-site daily but will provide services at least monthly, after patients have been screened and diagnosed by volunteer dentists. Dentists from Adopt a Vet Dental volunteer their time, in addition working with a company that provides access to other volunteer dentists who can screen, diagnose, and supervise care. Any such cases would be documented in the monthly tracking report, identifying which dentist performed the diagnosis and supervision when it is not the Adopt a Vet team.

A motion to approve the program was made by Ms. Arias, and it was seconded by Ms. McIntyre.

No discussion.

All members voted 'AYE.'

Director Higginbotham explained that agenda items 2–9 involve historically approved public health programs that have now submitted updated protocols and documentation. These programs were previously authorized, but the Board did not have their full program and emergency protocol materials in its historical records. The items reflect an administrative effort to reorganize, collect, and resubmit the necessary documentation for proper recordkeeping.

Ms. Arias requested clarification on what the Board expects when applicants submit “emergency protocols.” She noted that submitted protocols vary significantly, some describe general steps for responding to a medical emergency (e.g., calling 911, CPR), while others provide more dental or condition-specific responses. She asked the Board to clarify the standard so applicants understand whether they should provide basic medical-emergency procedures, detailed clinical responses, or both.

Dr. Branco confirmed that he had interpreted this requirement to be referring to a medical emergency.

Director Higginbotham clarified that, from an application review perspective, the Board is evaluating whether the submitted emergency protocols align with the types of services each public health program provides. The focus is on whether the protocols are adequate and appropriate for the specific services the program offers, rather than assessing clinical content.

General Counsel Barraclough inquired if the committee advises that the Board staff revise the question on the application form for clarity.

Ms. McIntyre and Ms. Arias stated their agreement.

- ii. Robert Lorber DMD PC - Healthy Smiles Nevada – missing info prior to approval

The committee discussed having the program Healthy Smiles Nevada provide revised emergency protocols.

A motion to approve the program pending revised emergency medical protocols was made by Dr. Branco, and it was seconded by Ms. McIntyre.

No discussion.

All members voted 'AYE.'

- iii. UNLV School of Dental Medicine, Seal Nevada South Program

- iv. UNLV School of Dental Medicine/Early Childhood Caries Prevention Project (ECCPP)
- v. UNLV School of Dental Medicine/Community Outreach

A motion to group and approve items iii, iv, and v was made by Dr. Branco, and it was seconded by Ms. Petrilla.

No discussion.

All members voted 'AYE.'

- vi. Community Health Alliance

A motion to approve the program was made by Dr. Branco, and it was seconded by Ms. McIntyre.

No discussion.

All members voted 'AYE.'

- vii. Exclusively Flossed LLC & Floss the World 501(c)(3)

A motion to approve the program was made by Dr. Branco, and it was seconded by Ms. Petrilla.

No discussion.

All members voted 'AYE.'

- viii. Nevada Oral Health Program/Silver State SEAL

A motion to approve the program was made by Dr. Branco, and it was seconded by Ms. McIntyre.

No discussion.

All members voted 'AYE.'

- ix. Nevada Health Centers

A motion to approve the program was made by Dr. Branco, and it was seconded by

Ms. McIntyre.

No discussion.

All members voted 'AYE.'

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No public comments.

6. **Announcements:**

Director Higginbotham explained the process for approving public health programs. Stating that Programs approved today will receive notice of an infection control inspection. The Infection Control Committee will develop a master checklist to tailor inspections based on the services each program provides. Once inspected and approved, program approval will be presented to the Board as a formal notification, and the program will be listed in the licensing section of the Board Secretary/Treasurer's report. Approved program administrators will receive an automated monthly email (on the 20th) to submit future program locations. They may choose whether this information is publicly shared. The goal is to transform submitted data into accessible information for individuals seeking program services, improving transparency and access to care.

Ms. Arias thank the Board staff for the hard work that has been put in to tracking and streamlining this process.

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

A motion to adjourn was made by Ms. McIntyre, and it was seconded by Ms. Petrilla.

No discussion.

All members voted 'AYE.'

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DRAFT

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Governor

STATE OF NEVADA



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DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA
Infection Control Committee Meeting

Meeting Minutes

Meeting Date & Time

Wednesday, November 19, 2025
7:00 p.m.

Meeting Location

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

Video Conferencing/ Teleconferencing Available

To access by phone, +1(646) 568-7788

To access by video webinar,

<https://us06web.zoom.us/j/88403350099>

Webinar/Meeting ID#: 884 0335 0099

Webinar/Meeting Passcode: 007994

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

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

1. Call to Order

a. Roll Call/Quorum

Board Members Present: Ms. Kimberly Petrilla (Chair), Dr. Joshua Branco, Dr. Daniel Streifel, Dr. Joan Landron, Dr. Ashley Hoban.

Board Members Absent: NA

Board Staff Present: Director Higginbotham, General Counsel Barracrough, Dr. Helen Kanian (Infection Control Program Developer), A. Cymerman, M. Kelley, M. Ramirez, L. Chagolla.

- 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 the 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 to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

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Director Higginbotham noted for the record that several written public comments were submitted. The public comments include submissions from the following:

Mary Bobbett – submitted various technical and typo feedback

Tracy Wells – provided technical feedback

David Moore – submitted comments regarding the TB discussion

George Rosenbaum – provided feedback regarding class V integrators

All attachments referenced are included in the packet for Board review.

No further public comments.

3. Chairperson's Report: (For Possible Action)

- a. Request to Remove Agenda Item(s) (For Possible Action)

NA

- b. Approve Agenda (For Possible Action)

A motion to approve the agenda was made by Dr. Streifel, and it was seconded by Dr. Hoban.

No discussion.

All members voted 'AYE.'

4. New Business: (For Possible Action)

- a. Review, Discussion, and Possible Approval/Rejection of Infection Control Inspection Documents – NAC 631.1785 (For Possible Action)

- i. Infection Control Inspection Survey Form

Ms. Petrilla communicated that the committee would review the provided list of questions/responses created from the 10.29.2025 committee meeting, to approve/discuss revisions made.

The committee discussed the following items:

Question 1 – approved the revision made by staff to only require a hard-copy of infection control manual for inspection.

Question 2 – approved the revised language.

Question 8 – discussion determining the ambiguity of “communicable” diseases and the need for a written policy. Committee opted to revise the wording of this via email with General Counsel after provisional approval.

Dr. Branco recommended that resources be provided to both Dr.'s and inspectors regarding this question to provide consistency for the required written policies.

Dr. Hoban asked for clarification on the requirement for written communicable disease policies, noting that providers follow universal precautions and do not test/diagnose patients, and asked how this differs from standard practice.

General Counsel Barraclough noted that item eight could be revised to state that practitioners will comply with the applicable NAC/NRS provisions for mandatory reporting of communicable diseases, referencing the Southern Nevada Health District, and that the specific provision can be identified for clarity. She added that

the question cannot be removed but can be adjusted for clarity.

Dr. Branco agree that reworking the question to target the list to only what needs to be reported to avoid any potential discrimination would be best.

Dr. Hoban suggested adding language clarifying that dental practitioners should refer patients to appropriate medical care if they suspect a communicable disease, noting that they are not responsible for diagnosing or reporting, only for making referrals when suspicion arises.

General Counsel Barraclough noted she will review the specific NAC/NRS provisions regarding mandatory reporting to clarify whether reporting is required upon suspicion or confirmation. She proposed that if the committee approves the remaining items, she can email members the relevant language and suggest revisions for item eight, allowing for provisional approval based on that guidance.

Ms. Petrilla confirmed that this is the route the committee would take for question 8.

Question 10 – discussion of the requirement for TB screening upon hire per CDC. The committee approved the removing of this item from the checklist and placed this at the end in the acknowledgment section.

Director Higginbotham communicated that the staff and program developer strongly recommend leaving this item in the checklist. However, if item 10 is removed from the infection control checklist, the content should still be referenced in the “Acknowledgement and Receipt of Notice” section of the inspection report. This would ensure that staff and licensees formally acknowledge receipt of the CDC recommendations, even if the item is no longer part of the active checklist.

Question 11 – approved the revised question.

Question 12 – reviewed provided clarification.

Question 17 – reviewed the recommendation by the program developer to leave demonstration items in the checklist. Critical classification will be removed.

Ms. Petrilla and Dr. Branco communicated concern about the demonstration items being made a “critical deficiency.” Committee in agreement to leave question on checklist but remove the critical classification.

Question 20 – approved the revised language.

Question 24– reviewed the recommendation by the program developer to leave demonstration items in the checklist. Critical classification will be removed.

Question 29 – reviewed the recommendation by the program developer to leave demonstration items in the checklist. Critical classification will be removed.

Question 34 – approved the revised language.

Question 40 – approved the revised language and reviewed clarification provided by staff.

Question 42 – approved the revised language.

Question 50 – reviewed the recommendation by the program developer to leave demonstration items in the checklist. Critical classification will be removed.

Question 51 – discussion regarding event-related monitoring, approved the question.

Question 52 – discussion determining the best wording for this question to reflect

current CDC sterilization standards while also making the question clearer. Committee opted to revise the wording of this via email with General Counsel after provisional approval.

Ms. Petrilla communicated that the term “Class V indicators” is outdated and has not been used since 2014. Based on public comment from Tracy Wales, the checklist language should be updated to reflect current standards.

Dr. Branco noted that the original language was intended only for closed cassettes, and the current wording “wrapped/closed cassettes and containers, including pouches” is confusing. The placement of “chemical/heat indicators for pouches” above this also adds to the ambiguity, making the checklist unclear regarding what was originally intended.

General Counsel Barraclough noted agreement with Dr. Branco that “including pouches” should be excluded from the second sentence to avoid conflict with the first. She suggested provisional approval of the item, with staff and Dr. Kanian retooling the language via email to clarify wording, account for differences in terminology (e.g., Class V integrator vs. ISO 11140 Type 5), and ensure consistency with inspection practices.

Ms. Petrilla confirmed that this is the route the committee would take for question 52.

Question 62 & 62(a) – reviewed provided clarification.

Question 64 – discussion determining if there was a need for a log. The committee approved the removal of the requirement for a log.

Various committee members communicated that a log for housekeeping, morning and night is cumbersome and not needed.

Dr. Kanian clarified that it could be a very simple log and General Counsel Barraclough provided example of the log commonly seen in restaurant bathrooms.

Kelly Taylor, dental hygienist, expressed concern about the volume of required documentation for infection control, noting that maintaining logs and storing is excessive.

Question 71 –reviewed provided clarification.

Question 75 – approved the revised language.

Question 77 – approved the revised language.

Question 78 & 79 – discussion regarding placement of the two questions. The committee approved leaving these placed as is.

Dr. Branco communicated concern over the number of items total listed as a “Critical deficiency.”

Director Higginbotham noted that the staff can rework the item ranking and have that presented at the next infection control committee. Once the Infection Control Master Checklist is finalized, the Board will use those determinations to develop standardized operating procedures for Board agents. These procedures will support consistent inspections across all practice settings and inspectors. It was noted that the checklist will serve as the foundation for building training materials and establishing uniform infection control inspection practices statewide.

A motion was made to approve the Infection Control Inspection Survey Form, pending the clarification on verbiage for questions 8 & 51 to be provided to the committee via email, and it was seconded by Ms. Petrilla.

No discussion.

All members voted 'AYE.'

5. **Public Comment (Live public comment 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 Tuesday, November 18, 2025, by 12:00 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 Chairperson 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 speakers.

No public comments.

6. **Announcements:**

Director Higginbotham stated that at the next Infection Control Committee meeting, staff will extract all items currently marked as "critical" so the committee can reassess them. He noted that additional deliverables may also be ready for review. While the team hopes to schedule a December meeting, the holidays may require moving it to early January.

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

A motion to adjourn was made by Dr. Branco, and it was seconded by Dr. Landron.

No discussion.

All members voted 'AYE.'

Note: To minimize computer resource and data storage drains, only the copies of the applications (redacted to exclude personal identifying or personal health information) are included with this agenda. However, the Board acknowledges that some records attached to the applications (aside from any included proprietary information, but including such things as permits, licenses, route maps, etc.) are generally public records. The Board will make available copies of the non-confidential documents attached to the applications to any member of the public upon request.

Total Dental Licenses Added 7/1/2025- 12/4/2025 (current)
80

Licenses Added in July= 21
Licenses Added in August= 22
Lcienses Added in September= 21
Licenses Added in October= 4
Licenses Added in November= 12

8/15/2025	Mooso	Brett		DDS	S3-405C
9/5/2025	Nguyen	Kieu Diem	G.	DDS	8300
9/5/2025	Oh	Dahoon		DDS	8301
9/5/2025	Nelsen	Michael	B.	DMD	8302
9/5/2025	Dubanski	Robert	D.	DMD	8303
9/5/2025	Regnaert	Todd	R.	DMD	8304
9/5/2025	Lundgren	Allison	A.	DMD	8305
9/5/2025	Sloan	Rochelle	J.	DMD	8306
9/5/2025	Kim	Lilian	H.	DMD	8307
9/5/2025	Kingery	Nathan	S.	DMD	8308
9/5/2025	Blough	Brian	E.	DDS	8309
9/5/2025	Nguyen	Elizabeth		DDS	8310
9/12/2025	Muhammad	Akam		DDS	8311
9/12/2025	Hamedian	Malak	A.	DMD	8312
9/12/2025	Lee	Gundong		DDS	8313
9/12/2025	Padilla	Miguel	A.	DMD	8314
9/12/2025	Scott	Connor	R.	DMD	8315
9/12/2025	Chang	Jin-Hao		DMD	8316
9/26/2025	Tavel Santos	Barbara	S.	DMD	8317
9/26/2025	Cheung	Kenny	K.	DDS	8318
9/26/2025	Smith	Christopher	J.	DDS	8319
9/26/2025	Ferrell	Robert	W.	DMD	S4-138C
10/1/2025	Tungol	Ferdinand	R.	DDS	8320
10/24/2025	Michaelian	Marshall	J	DMD	S7-147C
10/24/2025	Sajid	Rida		DMD	8321
10/24/2025	Barin	Bianca	A.	DMD	8322
11/19/2025	Freel	Nicholas	J.	DMD	8323
11/19/2025	Choi	Daihyun		DDS	8324
11/19/2025	Kwon	Thomas	S.	DDS	8325
11/19/2025	Paape	Soren		DDS	8326
11/19/2025	Peifer	Jeffrey	D.	DMD	8327
11/19/2025	Phan	Jeff	H.	DMD	8328
11/19/2025	Tokunaga	Camden	J.	DDS	8329
11/19/2025	Chen	Jeremy	C.	DDS	8330
11/19/2025	Le	Yen	T.	DDS	S4-139C
11/19/2025	Irving	Dale	C.	DDS	S4-140
11/19/2025	Neuer	Eric	S.	DDS	S3-404C
11/19/2025	Nett	Karanjit	K.	DDS	S6-242C

Date of License Approval:	Last Name	First Name	MI	Title	License Number
7/18/2025	Duncan	David	L.	DMD	8226
7/18/2025	Duong	Dominique	N.	DDS	8227
7/18/2025	Padda	Karandeep	K.	DMD	8228
7/18/2025	Nalluri	Haripriya		DDS	8229
7/18/2025	Mallavarapu	Lakshmi	H.	DDS	8230
7/18/2025	Shelton	Henny	j.	DDS	8231
7/18/2025	Younger	Tyesha	T.	DMD	8232
7/18/2025	Olaes	Anna Katrina	C.	DDS	8233
7/18/2025	Mucklewicz	Daria	M.	DMD	8234
7/18/2025	Miller	Lucas	A.	DMD	8235
7/18/2025	Tran	An-Vinh	Q.	DMD	8236
7/18/2025	Jilani	Hemna	N.	DMD	8237
7/18/2025	Parra Sanabria	Erika	A.	DDS	8238
7/18/2025	Zapanta	Julianne	B.	DMD	8239
7/18/2025	Bahar	Nastaran		DMD	8240
7/18/2025	Sampson	Jazmyn	T.	DMD	8241
7/18/2025	Dan Udoka	Eteete	G.	DDS	LL-623-25
7/18/2025	Shen	Kristen	A.	DMD	LL-624-25
7/18/2025	McNabb	Elizabeth	G.	DDS	LL-625-26
7/18/2025	Silvestry	Brandon	A.	DMD	LL-626-25
7/18/2025	Perry	John	F.	DMD	8242
8/1/2025	Carrizales Melendez	Andrea	E.	DDS	LL-629-25
8/1/2025	Cuellar	Jeffery	A.	DMD	8243
8/1/2025	Moparthi	Hyma		DMD	8244
8/1/2025	Sukraw	Jill	A.	DMD	8245
8/1/2025	Golod	Samantha		DDS	8246
8/1/2025	Wong	Darren	D.	DDS	8247
8/1/2025	Nam	Daniel		DMD	8248
8/1/2025	Nasir	Amama		DDS	8249
8/1/2025	McCormick	Christopher	J.	DDS	8250
8/1/2025	Eltagunde	Dianne	E.	DMD	8251
8/1/2025	Lee	Beom Young		DMD	8252
8/1/2025	Lin	Summer		DMD	8253
8/1/2025	Cho	Jason	J.	DMD	8254
8/1/2025	Altenburg	Gary	M.	DDS	S7-147C
8/1/2025	Ambesh	Henna		DDS	8255
8/15/2025	Woo	Hwuk Chan		DDS	8256
8/15/2025	Jeng	Chester	C.	DDS	8257
8/15/2025	Chung	Pei Jung		DMD	8258
8/15/2025	Song	Jason	T.	DDS	8259
8/15/2025	Friesen	Philip	J.	DMD	8260
8/15/2025	Olsen	Kelly	J	DDS	LL-628-25

Date of License Approval:	Last Name	First Name	MI	Title	License Number
7/18/2025	Bruce	Sherry		RDH	103227
7/18/2025	Rhoades	Veronika	A.	RDH	103228
7/18/2025	Cepin	Rose	N.	RDH	103229
7/18/2025	Hummel	Allie	J.	RDH	103230
7/18/2025	Combs	Madison	C.	RDH	103231
7/18/2025	Smith	Jordan	P.	RDH	103232
7/18/2025	Smith	Kiera	M.	RDH	103233
7/18/2025	Delgadillo	Stephanie	K.	RDH	103234
7/18/2025	Breland	Sierra	I.	RDH	103235
7/18/2025	DeMarco	Chelsea	E.	RDH	103236
7/18/2025	Ahles	Makena	A.	RDH	103237
7/18/2025	Felton	Clarissa	L.	RDH	103238
7/18/2025	Henderson	Serena	M.	RDH	103239
7/18/2025	Taylor	Jamie	N.	RDH	103240
7/18/2025	Giganian	Pegah		RDH	103241
7/18/2025	Willson	Brittany	A.	RDH	103242
8/1/2025	Nagra	Prabhjot	K.	RDH	103243
8/1/2025	Estrada	Elizabeth		RDH	103244
8/1/2025	Ferrer	Robin Elaine	D.	RDH	103245
8/1/2025	Herzog	Paige	N.	RDH	103246
8/1/2025	Chavez Berrio	Lisandra		RDH	103247
8/1/2025	Mendenhall	Melissa	M.	RDH	103248
8/1/2025	Remigio	Lizzalin		RDH	103249
8/1/2025	Bracamontes	Italia		RDH	103250
8/1/2025	Rosales	Brenda	E.	RDH	103251
8/1/2025	Rodriguez Garza	Yesenia		RDH	103252
8/1/2025	Murillo Diaz	Nelly		RDH	103253
8/1/2025	Hernandez	Brianna		RDH	103254
8/1/2025	Locquiao	Priscilla	A.	RDH	103255
8/1/2025	Mullins	Hanna	N.	RDH	103256
8/1/2025	Arreguin	Giancarlo	A.	RDH	103257
9/5/2025	Hegne	Erin	E.	RDH	103258
9/5/2025	Wall	Vernina	J.	RDH	103259
9/5/2025	Ramos	Ashley	L.	RDH	103260
9/5/2025	Tran	Valeria	Y.	RDH	103261
9/5/2025	Patterson	Shelby	L.	RDH	103262

Total RDH Licenses Added 7/1/2025- 12/4/2025 (current)
59

Licenses Added in July= 16
Licenses Added in August= 15
Licenses Added in September= 14
Licenses Added in October= 9
Licenses Added in November = 5

9/5/2025	Penhallurick	Christine	A.	RDH	103263
9/12/2025	Harley	Raciel Ann	D.	RDH	103264
9/12/2025	Choi	Hyun Ok		RDH	103265
9/12/2025	Drescher	Callie	L.	RDH	103266
9/12/2025	Tasani	Shayna	M.	RDH	103267
9/12/2025	Rivenes	McKena	R.	RDH	103268
9/12/2025	Barfield	Kaytlin	J.S.	RDH	103269
9/26/2025	Williams	Anitra	N.	RDH	103270
9/26/2025	Moody	Leticia	M.	RDH	103271
10/10/2025	Evans	Regene		RDH	103272
10/10/2025	Standley	Cindi	J.	RDH	103273
10/10/2025	Probert	Elle	R.	RDH	103274
10/10/2025	Barbieri	Alexis	G.	RDH	103275
10/10/2025	Trevino	Ashley	A.	RDH	103276
10/24/2025	Hwang	Paul	S.	RDH	103277
10/24/2025	Cowan	Avery	J.	RDH	103278
10/24/2025	Starling	Tawnee	B.	RDH	103279
10/24/2025	Shaffer	Regina	S.	RDH	103280
11/19/2025	Hooper	Vanessa	J.	RDH	45980
11/19/2025	Flanagan	Maureen	E.	RDH	45980
11/19/2025	Miles	Jenna		RDH	45980
11/19/2025	Dixon	Emeline		RDH	45980
11/19/2025	Robles Duenas	Stephanie		RDH	45980

Board Meeting Report- Public Health Programs

Program Name ID	Program Service(s) Category	Program Committee Approval Date	Program Inspection Completion Date
Sagebrush Smiles 3	<div>Diagnostic and Preventive Care</div> <div>Non-Restorative Clinical Procedures</div> <div>Palliative and Protective Treatments</div> <div>Medicaments and Sealants</div>	10/1/2025	11/26/2025
Robert Lorber DMD PC - Healthy Smiles Nevada 6	<div>Diagnostic and Preventive Care</div> <div>Medicaments and Sealants</div>	11/19/2025	9/4/2024
Nevada Oral Health Program/Silver State SEAL 12	<div>Medicaments and Sealants</div> <div>Diagnostic and Preventive Care</div>	11/19/2025	8/28/2025

**PROPOSED REGULATION OF THE DIRECTOR OF THE
DEPARTMENT OF BUSINESS AND INDUSTRY**

LCB File No. R074-25

November 14, 2025

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

AUTHORITY: §§ 1-20, NRS 232.8413.

A REGULATION relating to professional and occupational licensing boards; defining certain terms relating to the regulation of professional and occupational licensing boards; setting forth certain structural standards for a board relating to recordkeeping, officers of the board and attendance; establishing certain requirements relating to the training of board members; establishing certain standards for the internal controls of a board; establishing certain requirements for the Internet website of a board; establishing certain requirements for a board relating to certain bills during a legislative session; authorizing a board to publish certain information for the public; setting forth certain standards relating to complaints to and investigations by or on behalf of a board; requiring a board to provide certain information to the Office of Nevada Boards, Commissions and Councils Standards within the Department of Business and Industry; providing for the Office to conduct performance evaluations of a board; establishing provisions for the enforcement of certain regulatory requirements; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates the Office of Nevada Boards, Commissions and Councils Standards within the Department of Business and Industry and charges the Office with certain duties relating to the regulation of professional and occupational licensing boards, including: (1) centralized administration; (2) establishing uniform sets of standards for investigations, licensing and discipline, internal controls and legal representation; (3) establishing consistent sets of structural standards for boards and commissions; (4) transparency and consumer protection; and (5) efficacy and efficiency. Existing law requires the Director of the Department to adopt regulations and procedures to administer the responsibilities of the Office. (NRS 232.8413, 232.8415) **Sections 3-8** of this regulation defines certain terms relating to the regulation of professional and occupational licensing boards. **Section 2** of this regulation applies these definitions to the provisions of this regulation.

Existing law provides that all professional and occupational licensing boards created by the Legislature are under the purview of the Office. (NRS 232.8415) **Section 9** of this regulation interprets the term “purview” for the purpose of this provision.

Section 10 of this regulation establishes certain structural standards for each board to: (1) maintain certain centralized records relating to each seat on the board, the board members filling the seats, and the terms of the board members serving on the board; (2) appoint or elect officers of the board; and (3) establish certain expectations and policies relating to the attendance of board member at meetings.

Section 11 of this regulation requires: (1) the Executive Director of a board to notify board members regarding certain training and when the training is offered; and (2) the board to notify the Office that a board member has completed a required training.

Section 12 of this regulation requires each board to establish certain standards for internal controls including: (1) developing and implementing a budget; (2) maintaining and protecting information in the records of the board in certain manners; (3) complying and cooperating with all statutory and regulatory reporting and auditing requirements; and (4) taking certain actions to respond to audits that recommend corrective action.

Section 13 of this regulation requires each board to maintain a publicly accessible Internet website of the board which includes certain information.

Section 14 of this regulation requires each board to: (1) track bills during a regular or special legislative session which may impact the operations of or licensees regulated by the board; (2) report certain information to the Office relating to the bills tracked by the board; and (3) take certain steps to implement any bill which is passed during a regular or special legislative session.

Section 15 of this regulation authorizes a board to publish certain materials to inform the public of various information relating to the board and licensees of the board.

Section 16 of this regulation sets forth certain requirements relating to complaints to and investigations conducted by or on behalf of a board. **Section 17** of this regulation requires a board to provide certain quarterly and annual information and reports to the Office relating to complaints, investigations, disciplinary actions and licensees.

Section 18 of this regulation requires a board to submit certain financial information to the Office on a quarterly and annual basis.

Section 19 of this regulation provides that the Office will evaluate the performance of a board using the reports and other information required to be submitted to the Office by **sections 17 and 18**, and, based on the results of the evaluation, may issue recommendations or require a board to take corrective action.

Section 20 of this regulation provides that if a board fails to comply with a requirement in this regulation, the Office may issue a written notice of deficiency and require the board to take corrective action. If the board fails to take such corrective action, **section 20** provides that the Office may: (1) increase the administrative oversight of the board; (2) refer the board members to the Governor for removal; or (3) withhold certain support services provided by the Office.

Section 1. Chapter 232 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 20, inclusive, of this regulation.

Sec. 2. As used in sections 2 to 20, inclusive, of this regulation, unless the context otherwise requires, the words and terms defined in sections 3 to 8, inclusive, have the meanings ascribed to them in those sections.

Sec. 3. “Board” means any professional or occupational licensing body, including, without limitation, a board, commission or council, that has been created by the Legislature and which is under the purview of the Office.

Sec. 4. “Board member” means a person appointed to serve on a board.

Sec. 5. “Executive Director” means a person appointed or employed by a board to oversee the daily operations of the board.

Sec. 6. “License” means any professional or occupational authorization, including, without limitation, a license, permit, registration or certificate, that is issued by a board.

Sec. 7. “Licensee” means any person who holds a license issued by a board.

Sec. 8. “Office” means the Office of Nevada Boards, Commissions and Councils Standards.

Sec. 9. For the purpose of NRS 232.8415, the Office interprets the term “purview” to mean administrative oversight.

Sec. 10. For the purpose of a consistent set of structural standards, each board shall:

1. Maintain a centralized record of:

(a) Each seat on the board, including whether the seat is required by statute to represent certain interests or to serve a certain role;

(b) Each board member who is filling a seat on the board; and

(c) The terms of each board member including, without limitation, the date on which the term began and expires.

2. Elect or appoint the officers of the board in accordance with the applicable statutes and regulations governing the board. Except as otherwise provided by specific statute or regulation adopted by the board, a board shall elect the officers on an annual basis.

3. Establish the expectation that the board members must attend and participate in meetings of the board. Each board shall adopt a policy providing that, if a board member has three or more consecutive unexcused absences or has unexcused absences from 50 percent or more of the meetings of the board within a 12-month period, the board may recommend to the Governor that the board member be removed pursuant to NRS 232A.030.

4. As used in this section, “unexcused absence” means an absence that is not:

(a) Caused by illness, family emergency or other extenuating circumstance;

(b) Approved by the chair of the board; or

(c) Otherwise authorized by statute.

Sec. 11. *1. The Executive Director of each board shall notify the board members of any training that the board members are required to complete pursuant to NRS 622.200 and when such training is offered.*

2. Not more than 30 days after completing any training required pursuant to NRS 622.200, a board shall provide written notice to the Office, on a form prescribed by the Office, confirming that a board member completed the required training.

Sec. 12. *For the purpose of establishing a uniform set of standards for internal controls, each board shall:*

1. Develop a budget for the board and monitor the implementation of the budget.

2. Maintain any information in the records of the board relating to licensees, finances, and complaints in a manner to ensure the information is accurate and verifiable.

3. Protect the confidential and personal identifying information in the records of the board.

4. Comply and cooperate with all reporting and auditing requirements set forth by any applicable statute or regulation, including, without limitation, the requirements of NRS 218G.400, 331.110, 333.705, as amended by section 8 of Assembly Bill No. 506, chapter 153, Statutes of Nevada 2025, at page 859, and 622.100, as amended by section 3 of Senate Bill No. 274, chapter 83, Statutes of Nevada 2025, at page 444, in a timely and accurate manner and in accordance with any deadlines set forth in statute or regulation.

5. Respond to all audits of the board conducted pursuant to statute. Except as otherwise provided by specific statute, each board shall, not more than 60 days after receiving a final report of the results of an audit that recommends corrective action:

(a) Prepare a written plan for corrective action that addresses all recommendations for the corrective action; and

(b) Submit the evidence to the auditing entity that the corrective action set forth in the plan prepared pursuant to paragraph (a) has been taken.

Sec. 13. 1. *Each board shall maintain a publicly accessible Internet website of the board which is accessible to persons with disabilities, including, without limitation, persons who are blind or visually impaired and, in addition to any other information required by statute or regulation of a board, post on the Internet website of the board:*

(a) A citation and link to the enabling statutes of the board and any regulations adopted by the board, including, without limitation, emergency regulations, temporary regulations and permanent regulations of the board which have been adopted and filed with the Secretary of

State pursuant to chapter 233B of NRS but not yet codified in the Nevada Administrative Code;

(b) The mission statement of the board.

(c) For all current members of the board:

(1) The name of each member of the board;

(2) If the member was appointed to represent certain interests or serve a certain role that is required by statute, the interests or role which the member of the board represents or serves; and

(3) The dates on which the term of each member of the board begins and expires;

(d) The name and title of the Executive Director of the board;

(e) The contact information for the board, including, without limitation, an electronic mailing address, mailing address, physical address and telephone number;

(f) Any upcoming meetings of the board or a subcommittee of the board which must include, without limitation, the date, time, location, agenda, when available, and any other information required for notice of an upcoming meeting pursuant to NRS 241.020 or 622.340;

(g) An archive of all agendas and minutes of previous meetings of the board prepared pursuant to NRS 241.035;

(h) Instructions for applying for licensure, renewing a license and reinstatement of a license;

(i) A system for verifying licenses which must be accessible from the homepage of the Internet website with one click and, for each licensee, must include, without limitation, the full name of the licensee, the type and status of the license, the license number, the date of

issuance and the date of expiration of the license and a yes-or-no-indication of whether the licensee has any history of disciplinary actions;

(j) A system for reviewing the history of disciplinary actions of a licensee which must:

(1) Be accessible from the homepage of the Internet website;

(2) Be searchable;

(3) Be updated not more than 15 days after any new disciplinary action is finalized;

(4) Include, without limitation, the full name of the licensee, the license number, the type of disciplinary action and the date of the disciplinary action; and

(5) Unless otherwise declared confidential by statute or court order, provide access to a copy of the final order or settlement agreement for the disciplinary action;

(k) Clear instructions on how to file the complaint with the board accompanied by forms that may be downloaded for filing a complaint or an online system on the Internet website that authorizes a person to file a complaint electronically;

(l) A copy of the most recent financial summary submitted to the Office pursuant to section 18 of this regulation with a copy of any recent financial audits or balance sheets submitted pursuant to NRS 218G.400;

(m) A copy of any review, report, or audit of the board conducted by or on behalf of the Sunset Committee of the Legislature prepared within the previous 5 calendar years;

(n) A link to the Internet website of the Office which must be accessible from the homepage of the Internet website of the board;

(o) Any other reports required by statute or prepared annually by the board; and

(p) Any performance data prepared by the board.

2. As used in this section:

(a) “Emergency regulation” has the meaning ascribed to it in NRS 233B.033.

(b) “Permanent regulation” has the meaning ascribed to it in NRS 233B.036.

(c) “Temporary regulation” has the meaning ascribed to it in NRS 233B.0385.

Sec. 14. *1. During each regular or special legislative session, each board shall track any bills introduced to the Legislature which may impact the operations of or licensees regulated by the board.*

2. Not later than 60 days after the adjournment of every regular or special legislative session, each board shall submit a report to the Office, on a form prescribed by the Office, identifying:

(a) The bills tracked by the board and whether the bills became law;

(b) The potential impact of each bill on the operations of or licensees regulated by the board;

(c) Any actions required by the board to implement any bills which became law during the legislative session; and

(d) The estimated timeline for the board to implement any bills which became law during the legislative session.

3. For any bill tracked pursuant to subsection 2 which a board is required to take action to implement, the board shall:

(a) Update the regulations of the board consistent with the bill;

(b) Ensure that the bank accounts and records of the board are consistent with the requirements of the bill; and

(c) Notify the Office, in a format prescribed by the Office, once the board has implemented the bill.

Sec. 15. To provide outreach and education to the public, each board may publish newsletters, alters or bulletins to inform the public of the activities of the board, professional standards of and ethical requirements for the licensees regulated by the board, the rights of the public and the procedures for reporting the misconduct of a licensee to the board.

Sec. 16. 1. To ensure transparency and access to the public, each board shall make available to any person who wishes to file a complaint with the board a form for filing the complaint or a method to file the complaint electronically.

2. When responding to a complaint filed with the board, a board shall comply with all requirements for confidentiality while ensuring the board is fair and responsive to the complaint.

3. A board shall investigate any complaint filed with the board. For any matter under an investigation conducted by or on behalf of a board, the filed complaint documenting the investigation must include, without limitation:

(a) Any deadlines by which the board is required to complete any step of an investigation;
(b) Whether the board met all the deadlines identified pursuant to paragraph (a); and
(c) If the board did not meet any deadlines identified pursuant to paragraph (a), the reason why the board did not meet the deadline.

4. For the purposes of subsection 3, the steps of an investigation may include, without limitation, the receipt or acknowledgment of a complaint, the issuance of a notice to a licensee, the determination of probable cause, the filing of a formal complaint, the scheduling of a hearing and the issuance of a final decision by the board.

5. Upon the request of the Office and to the extent permitted by law, a board shall provide to the Office any files, documents, data or other information relating to an investigation

conducted by the board, including, without limitation, any disciplinary action instituted during an investigation.

Sec. 17. *On or before the 20th day of January, April, July and October, each board shall submit to the Office on a form prescribed by the Office:*

1. All information required to be submitted to the Director of the Legislative Counsel Bureau pursuant to NRS 622.100, as amended by section 3 of Senate Bill No. 274, chapter 83, Statutes of Nevada 2025, at page 444. A board may submit a copy of the report submitted to the Director of the Legislative Counsel Bureau pursuant to NRS 622.100, as amended by section 3 of Senate Bill No. 274, chapter 83, Statutes of Nevada 2025, at page 444, to satisfy this requirement;

2. A summary of all complaints filed with the board during the immediately preceding calendar quarter, which must include, without limitation, all complaints received, pending and resolved by the board for the calendar quarter;

3. A summary of all cases in which an investigation conducted by or on behalf of the board missed a statutory deadline for completing the investigation along with an explanation of the reason for missing the deadline; and

4. Any other information requested by the Office.

Sec. 18. *1. All money in the possession of a board must be deposited and used in accordance with any applicable statutes governing the board. The Office will not request or attempt to access, redirect or use any money of a board.*

2. Each board shall submit to the Office:

(a) On or before December 15 of each year, a copy of the balance sheet or report of an audit required to be filed with the Legislative Auditor and Chief of the Budget Division of the Office of Finance pursuant to NRS 218G.400;

(b) Not later than 30 days after the close of each fiscal quarter, a simplified financial report, in the form prescribed by the Office, summarizing the finances of the board for that fiscal quarter, which must include, without limitation, the total revenue, total expenditures and cash balances at the end of the fiscal quarter; and

(c) Not later than 9 months after the close of the fiscal year, a simplified financial report, in the form prescribed by the Office, summarizing the finances of the board for that fiscal year, which must:

(1) Include, without limitation, the total revenue, total expenditures and cash balances at the end of the fiscal year;

(2) Reconcile the financial information included in the report pursuant to subparagraph (1) with the balance sheets or audits prepared pursuant to NRS 218G.400;

(3) Include, without limitation, a statement identifying any significant financial or structural concerns of the board identified by the board; and

(4) Review the adequacy of the existing fees which the board is authorized to charge under statute.

Sec. 19. 1. The Office will evaluate the performance of each board using the reports and information submitted to the Office pursuant to sections 17 and 18 of this regulation.

2. Each board shall cooperate with the Office in any performance evaluation conducted by the Office pursuant to subsection 1 or audits conducted by the Office and provide any

information requested by the Office that the Office has determined is necessary to assess the efficiency and effectiveness of the operations of the board.

3. Based on the results of the performance evaluations conducted pursuant to subsection 1, the Office may issue recommendations or require a board to take corrective action to improve efficiency and effectiveness, reduce costs or enhance consumer protections.

4. Unless the Office specifies in writing that the board must take such action in a different timeframe, if the Office requires a board to take corrective action pursuant to subsection 3, the board shall take such corrective action not more than 90 days after receiving notice from the Office regarding the corrective action.

Sec. 20. *1. Except as otherwise provided in section 19 of this regulation, if a board fails to comply with the requirements set forth in sections 2 to 20, inclusive, of this regulation, the Office may issue a written notice of deficiency to the board and require the board to take corrective action. Any such corrective action must be taken not more than 60 days after the written notice is received by the board.*

2. If a board fails to take corrective action pursuant to subsection 1, the Office may:

- (a) Increase the administrative oversight of the board;*
- (b) Refer the members of the board to the Governor for removal for malfeasance or nonfeasance pursuant to NRS 232A.030; or*
- (c) Withhold any administrative or fiscal support services provided by the Office to the board.*

Sec. 2.

1. Except where a licensee is allowed to establish a bona fide relationship through teledentistry under subsection 1 of NRS 631.34583. as otherwise provided in subsections 2 and 3, and for the purposes of subsection 1 of NRS 631.34586, “bona fide relationship” means a relationship between a patient and a licensee where the licensee has:

(a) Reviewed any available medical records of the patient, including, without limitation:

(1) Any relevant information concerning a current illness; and

(2) Any diagnostic or radiographic records obtained within the immediately preceding 6 months;

(b) Performed an in-person examination of the patient’s oral cavity within the immediately preceding 6 months for the purposes of diagnosing, assessing or determining the current medical condition of the patient or reviewed the medical records of such an examination that was performed within the immediately preceding 6 months by another licensee; and

(c) A reasonable expectation that he or she will provide follow-up care and treatment to the patient.

2. To establish a bona fide relationship through teledentistry under subsection 1 of NRS 631.34583:

(a) If the licensee is a dentist, the licensee may engage in any defined method of teledentistry outlined in NRS 631.107 that is within the definition of telehealth at subsection 6 of NRS 629.515. In lieu of the examinations and the review of medical records described in paragraphs (a) and (b) of subsection 1, the licensee who is establishing a bona fide relationship with a patient through teledentistry under the circumstances authorized by subsection 1 of NRS 631.34583 may perform:

(i) If the patient is an adult, a consultation with the patient in which the licensee reviews the dental history of the patient before the licensee examines or treats the patient suffices to create a bona fide relationship.

(ii) If the patient is a minor and a parent or guardian is present with the minor, a consultation with the patient’s parent or guardian in which the licensee reviews the dental history of the patient before the licensee examines or treats the patient suffices to create a bona fide relationship. If the patient is a minor and a parent or guardian is not present with the minor, but the dentist otherwise has

written consent to examine and treat the minor, a review of any notes made by a parent or guardian of the patient on the consent form before the licensee examines or treats the patient suffices to create a bona fide relationship.

(iii) Regardless of whether the patient is an adult or minor seen in or outside the physical presence of a parent or guardian, if the patient is first seen and evaluated by a public health specially-endorsed dental hygienist consistent with paragraph (b) of this subsection, a consultation with the public health specially-endorsed dental hygienist wherein they relay to the dentist their preliminary examination findings and a summary of the patient history as reported suffices to create a bona fide relationship.

(b) If the licensee is a dental hygienist meeting patients in person and practicing in the scope of a public health special endorsement under NRS 631.287, the licensee may engage in the methods of teledentistry outlined in subsections 2 and 3 of NRS 631.107 that are within the definition of telehealth at subsection 6 of NRS 629.515. ~~In lieu of the examinations and the review of medical records described in paragraphs (a) and (b) of subsection 1, the licensee a review of any notes made by a parent or guardian of the patient on the consent form for the patient before the licensee examines or treats the patient.~~

(i) If the patient is an adult, a consultation with the patient in which the licensee reviews the dental history of the patient before the licensee examines or treats the patient suffices to create a bona fide relationship such that if any treatment is required that exceeds the scope of dental hygiene practice allowances under NRS 631.287, NRS 631.310, NRS 631.311, NRS 631.317, and NAC 631.210, the public health endorsed dental hygienist can then contact a dentist through the use of teledentistry for consultation and, if applicable, referral.

(ii) If the patient is a minor and a parent or guardian is present with the minor, a consultation with the patient's parent or guardian in which the licensee reviews the dental history of the patient before the licensee examines the patient suffices to create a bona fide relationship. If the patient is a minor and a parent or guardian is not present with the minor, but the dentist otherwise has written consent to examine the minor, a review of any notes made by a parent or guardian of the patient on the consent form before the licensee examines or treats the patient suffices to create a bona fide relationship. In either instance, if any treatment is required that exceeds the scope of dental hygiene practice allowances under NRS 631.287, NRS 631.310, NRS 631.311, NRS 631.317, and

NAC 631.210, the public health endorsed dental hygienist can then contact a dentist through the use of teledentistry for consultation and, if applicable, referral.

3. Except as otherwise provided in this subsection, a bona fide relationship is not required to include the reasonable expectation of providing follow-up care and treatment to a patient as required by paragraph (c) of subsection 1 if the patient receives treatment from a public health specially-endorsed dental hygienist or in connection with a public health program. A dental hygienist who holds a special endorsement to practice public health dental hygiene shall refer a patient that receives services through teledentistry ~~in connection with a public health program~~ to a dentist in accordance with the requirements of subparagraph (2) of paragraph (b) of subsection 6 of NAC 631.210.

Sec. 3.

1. Subject to the provisions of subsection 3, a licensee may only provide the following services through teledentistry, as defined at NRS 631.107 and NRS 631.109:

(a) Consultation and recommending treatment.

(b) Issuing a prescription that he or she deems necessary to treat an emergent need of the patient.

(c) Providing a limited diagnosis based on information provided by the patient during a visit conducted through teledentistry.

(d) Initially determining the need for orthodontic corrections to address identifiable problems related to the malposition of teeth. However, unless a bona fide relationship has already been established by meeting paragraphs a, b, and c, of subsection 1 above, this initial diagnosis and determination must be confirmed through an in-person visit before the patient begins using the orthodontic appliance.

(e) ~~Correcting the position of teeth~~ Remotely monitoring the correction of teeth position using orthodontic appliances once an initial conforming in-person visit and appliance placement has taken place, if applicable consistent with paragraph (d).

2. A licensee who provides services through teledentistry shall maintain a list of licensees to whom the licensee may refer a patient to receive services in person when necessary in accordance with subsection 2 of NRS 631.34585.

3. A licensee shall not provide services through teledentistry if the licensee is not authorized to provide those services in person.

4. A licensee who issues a prescription through teledentistry shall:

(a) Comply with the relevant provisions of chapter 639 of NAC; and

(b) Transmit the prescription by telephone or electronic transmission to the pharmacy designated by the patient.

Sec. 4.

1. In addition to the information required by NRS 631.34583, prior to commencing treatment, a licensee who is seeking informed consent pursuant to paragraph d of subsection 2 of NRS 631.34583:

(a) must provide to the patient or his or her parent or guardian:

(i) The contact information of the licensee and any other licensee providing services to the patient, including the electronic mail address and telephone number of the licensee and the physical address of the office at which the licensee practices;

(ii) Information that may be used to contact the licensee in an emergency;

(iii) The actions that the licensee will take in an emergency, including, without limitation, the contact information for the medical facility to be used in the event of a medical emergency; and

(iv) The licensee's Board issued license number.

(b) may provide to the patient or his or her parent or guardian:

(i) A list of the services that the patient may receive during follow-up;

(ii) A list of costs for the teledentistry services provided; and

(iii) A copy of the licensee's Board issued license to meet the requirement of paragraph (iv) of subsection (a) above.

2. Before providing services to a patient through teledentistry, a licensee shall obtain from the patient:

(a) A signed acknowledgment that the patient received the notice of privacy practices required by 45 C.F.R. § 164.520;

- (b) The relevant medical history of the patient; and*
- (c) If applicable:*
 - (1) Information concerning the policy of insurance covering the patient; and*
 - (2) A financial agreement for the compensation of the licensee.*
- 3. As used in this section, “medical facility” has the meaning ascribed to it in NRS 449.0151.*

Sec. 5.

1. A licensee may use teledentistry to collaborate with a physician, physician assistant or advanced practice registered nurse, or the designees thereof, for the purposes of:

- (a) Obtaining the relevant medical history of a patient; or*
- (b) Collaborating on the care of a patient.*

*2. A licensee may use teledentistry to collaborate with a licensee who does not practice in the same specialty area for the purpose of: **patient through teledentistry, which:***

- (a) Obtaining the relevant medical history of a patient;*
- (b) Collaborating on the care of a patient; or*
- (c) Developing a plan for the treatment of a patient.*

3. When more than one licensee provides care to the same patient, any licensee who provides care to the patient through teledentistry shall:

- (a) Obtain from the patient, to the extent that the patient is willing to provide such information, the names and contact information of the other licensees providing care to the patient; and*
- (b) If the patient provides information to the licensee pursuant to paragraph (a):*
 - (1) Communicate with the other licensees concerning the relevant medical history and care of the patient; and*
 - (2) Provide all relevant information and recommendations concerning the care of the patient to the other licensees.*

Sec. 6. *In addition to the requirements of NRS 631.3123, the written practice agreement required by NRS 631.3122 between an authorizing dentist and a dental therapist who has not completed the hours of clinical practice under the*

direct supervision of an authorizing dentist required by subsection 1 of NRS 631.3122 must include, without limitation:

- 1. Procedures for the supervision of the dental therapist through teledentistry; or*
- 2. A statement that all supervision of the dental therapist will occur in person.*

Sec. 7. *As used in sections 8 to 11, inclusive, of this regulation, unless the context otherwise requires, “special endorsement” means a special endorsement to administer immunizations issued pursuant to NRS 631.285.*

Sec. 8. 1. *An application for a special endorsement must include, without limitation, copies of:*

(a) The written policies and procedures for the handling and disposal of used or contaminated equipment required by paragraph (b) of subsection 1 NRS 631.2851; and

(b) The written plan for addressing emergencies required by paragraph (c) of subsection 1 of NRS 631.2851; and

(c) The written plan for compliance with NRS 439.265 and NAC 439.870 through NAC 439.897 NV WebIZ reporting requirements.

2. A course of training in the administration of immunizations completed by a dentist, dental therapist or dental hygienist to satisfy the requirements of NRS 631.285 and to obtain an initial special endorsement, must include at least 20 hours of instruction.

Sec. 9.

1. In addition to complying with the requirements of NRS 631.2851, a dentist who holds a special endorsement and who administers immunizations, or under whose authorization a dental hygienist or dental therapist who holds such an endorsement administers immunizations, shall adopt written policies and procedures for the storage of immunizations.

2. The written policies, procedures and plans adopted pursuant to this section and NRS 631.2851, must comply with all applicable provisions of chapter 639 of NAC.

Sec. 10.

1. A dentist, dental hygienist or dental therapist who holds a special endorsement may only administer immunizations for influenza, COVID-19 and human papillomavirus.

2. A dentist, dental hygienist or dental therapist who holds a special endorsement shall:

(a) ~~Notify the primary care provider of the patient, if any, of each dose of an immunization that is administered to the patient. Report the immunization to NV WebIZ in compliance with NRS 439.265 and NAC 439.870 through NAC 439.897.~~

(b) Maintain and update at least monthly a log of each immunization administered by the dentist, dental hygienist or dental therapist, as applicable.

3. A dentist who holds a special endorsement and who administers immunizations, or under whose authorization a dental hygienist or dental therapist who holds a special endorsement administers immunizations, shall ensure that the equipment that may be needed in an emergency is:

(a) Present at the physical location where an immunization is administered and immediately accessible, as required by paragraph (c) of subsection 1 of NRS 631.2851; and

(b) Inspected at least quarterly to ensure that the equipment remains functional.

4. A dental hygienist or a dental therapist may not issue or obtain a standing order for the administration of an immunization.

5. As used in this section, "COVID-19" means:

(a) The novel coronavirus identified as SARS-CoV-2;

(b) Any mutation of the novel coronavirus identified as SARS-CoV-2; or

(c) A disease or health condition caused by the novel coronavirus identified as SARS-CoV-2.

Sec. 11.

1. ~~In addition to the continuing education requirements outlined in paragraph (6) of subsection (2) of NRS 631.342, a dentist, dental hygienist or dental therapist who holds a special endorsement must biannually annually complete at least 2 hours of continuing education on the administration of immunizations and regarding public health emergencies and the role of immunizations.~~

2. The continuing education completed pursuant to subsection 1 may be used to satisfy the requirements of subsection 6 of NRS 631.342.

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

LCB File No. R079-24

July 3, 2025

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

AUTHORITY: §§ 1, 10 and 19, NRS 631.190; § 2, NRS 631.190 and 631.3129; § 3, NRS 631.190 and 631.31286; § 4, NRS 631.190 and 631.31287; § 5, NRS 631.190 and 631.31288; § 6, NRS 631.190 and 631.288; § 7, NRS 631.190 and 631.287; § 8, NRS 631.190, 631.220 and 631.345; § 9, NRS 631.190, 631.220 and 631.31285; § 11, NRS 631.190 and 631.260; §§ 12 and 13, NRS 631.190 and 631.240; §§ 14 and 15, NRS 631.190 and 631.342; § 16, NRS 631.190, 631.330, 631.335 and 631.342; § 17, NRS 631.190 and 631.385; § 18, NRS 631.190 and 631.215; § 20, NRS 631.190 and 631.3121.

A REGULATION relating to oral health; interpreting certain terminology; prescribing certain requirements for licensure as an expanded function dental assistant and the issuance of a special endorsement to practice restorative dental hygiene; establishing certain requirements for the supervision of dental assistants and expanded function dental assistants; establishing the fees for licensure as an expanded function dental assistant; updating the name of a certain organization; requiring certain information be included in an application for a license to practice as an expanded function dental assistant; establishing requirements governing continuing education for expanded function dental assistants; subjecting an expanded function dental hygienist to certain provisions applicable to other dental professionals; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law provides for the licensure and regulation of dentists, dental hygienists and dental therapists by the Board of Dental Examiners of Nevada. (Chapter 631 of NRS) Senate Bill No. 310 (S.B. 310) of the 82nd Legislative Session provided for the licensure and regulation of expanded function dental assistants. (Senate Bill No. 310, chapter 523, Statutes of Nevada 2023, at page 3403) S.B. 310 also authorized dental hygienists to receive special endorsements to perform additional tasks relating to restorative dental hygiene. (NRS 631.288, 631.3129)

Existing law authorizes an expanded function dental assistant or a dental hygienist with a special endorsement to practice restorative dental hygiene to use an ultrasonic scaling unit for the removal of bonding agents, but does not authorize such a person to use an ultrasonic scaling unit on a natural tooth. (NRS 631.3129) For the purposes of those provisions, **section 2** of this regulation interprets: (1) “using an ultrasonic scaling unit only for the removal of bonding

agents” to mean using an ultrasonic scaling unit for the purpose of orthodontic care; and (2) “use an ultrasonic scaling unit on any natural tooth” to mean using an ultrasonic scaling unit for the purpose of dental cleaning.

Existing law requires an applicant for a license as an expanded function dental assistant to provide proof that he or she passed a written clinical examination given by the Board. (NRS 631.31286) **Section 3** of this regulation prescribes the written clinical examinations that such an applicant may pass to satisfy that requirement.

Existing law requires an applicant for a license by endorsement as an expanded function dental assistant to complete any training the Board deems necessary to ensure the competence of the applicant. (NRS 631.31287) **Section 4** of this regulation requires such an applicant to provide proof to the Board that he or she has: (1) passed certain examinations; or (2) successfully completed a course on restorative dental assisting that is approved by the Board. **Section 5** of this regulation: (1) prohibits a dentist from supervising more than two expanded function dental assistants at one time; and (2) requires a dentist to develop written protocols for expanded function dental assistants to follow in the event of a medical emergency.

Existing law requires an applicant for a special endorsement to practice restorative dental hygiene to complete a course on restorative dental hygiene. (NRS 631.288) **Section 6** of this regulation requires that such a course be: (1) offered by an organization accredited by the Commission on Dental Accreditation; or (2) approved by the Board. **Sections 8, 12, 13 and 20** of this regulation update the name of an organization that administers clinical examinations for dentists.

Existing law authorizes a dental assistant or expanded function dental assistant to perform certain tasks under the direct supervision of a dental hygienist with a special endorsement to practice public health dental hygiene. (NRS 631.287) **Section 7** of this regulation requires a supervising dental hygienist to enter into a written practice agreement with a dental assistant or expanded function dental assistant before authorizing the dental assistant or expanded function dental assistant to perform any such tasks.

Existing law authorizes the Board to establish and collect certain fees relating to licensure as an expanded function dental assistant. (NRS 631.190, 631.345) **Section 8** of this regulation establishes the fees to apply for, renew or reinstate a license as an expanded function dental assistant. **Section 9** of this regulation requires an application for licensure as an expanded function dental assistant to include contents similar to other applications for licensure submitted to the Board. **Section 11** of this regulation authorizes the Board to reject an application for licensure as an expanded function dental assistant under the same conditions as those under which the Board may reject other applications for licensure. **Sections 10 and 17-19** of this regulation make conforming changes treat expanded function dental assistants similarly to dental hygienists for various purposes, including unprofessional conduct and obtaining a determination or an advisory opinions from the Board.

Existing law requires the Board to adopt requirements governing continuing education for expanded function dental assistants. (NRS 631.342) **Sections 14 and 15** of this regulation require an expanded function dental assistant to complete 12 hours of continuing education annually or 24 hours of continuing education biennially, depending on the type of license the assistant holds. **Section 15** requires such continuing education to include instruction in certain subjects. **Section 14** also: (1) requires an expanded function dental assistant to maintain certification in administering cardiopulmonary resuscitation or another medically acceptable means of basic life support; and (2) authorizes an expanded function dental assistant to receive

credit for continuing education in the same manner as dental hygienists. **Section 16** of this regulation requires an expanded function dental assistant to submit a signed, written statement concerning completion of the required continuing education in the same manner as dentists and dental hygienists.

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 purpose of NRS 631.3129, the Board will interpret:*

1. “Use an ultrasonic scaling unit on any natural tooth” to mean using an ultrasonic scaling unit for the purpose of dental cleaning.

2. “Using an ultrasonic scaling unit only for the removal of bonding agents” to mean using an ultrasonic scaling unit for the purpose of orthodontic care.

Sec. 3. *In order to fulfill the requirements of subsection 3 of NRS 631.31286 to pass a written clinical examination, an applicant for a license to practice as an expanded function dental assistant may pass:*

1. The written examination offered by the Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western Regional Examining Board, or its successor organization, for expanded function dental auxiliary; or

2. All of the written examinations offered by the Dental Assisting National Board, or its successor organization, for certification as a Certified Preventive Functions Dental Assistant and a Certified Restorative Functions Dental Assistant.

Sec. 4. *1. In addition to the requirements of subsection 1 of NRS 631.31287, an applicant for licensure by endorsement as an expanded function dental assistant must include in his or her application proof that he or she:*

(a) Has passed all of the written examinations offered by the Dental Assisting National Board, or its successor organization, for certification as a Certified Preventive Functions Dental Assistant and a Certified Restorative Functions Dental Assistant; or

(b) Has successfully completed a course on restorative dental assisting that is approved by the Board pursuant to subsection 2.

2. The Board will approve a course on restorative dental assisting for the purposes of paragraph (b) of subsection 1 if the course is substantially similar in rigor and educational quality to a course on restorative dental assisting offered by the Dental Assisting National Board, or its successor organization. The Board will publish on an Internet website of the Board such courses that the Board has approved.

Sec. 5. *1. A dentist may supervise not more than two expanded function dental assistants at one time.*

2. A dentist who supervises an expanded function dental assistant shall develop and implement written protocols for the expanded function dental assistant to follow if a medical emergency occurs.

Sec. 6. *1. A course on restorative dental hygiene completed to satisfy the requirements of subsection 2 of NRS 631.288 must be:*

(a) Offered by an accredited organization; or

(b) Approved by the Board pursuant to subsection 2.

2. The Board will approve a course on restorative dental hygiene for the purposes of paragraph (b) of subsection 1 if the course is substantially similar in rigor and educational quality to a course on restorative dental hygiene offered by an accredited organization. The

Board will publish on an Internet website of the Board such courses that the Board has approved.

Sec. 7. 1. *Before a dental hygienist who holds a special endorsement to practice public health dental hygiene issued pursuant to NRS 631.287 may authorize a dental assistant or expanded function dental assistant to perform tasks specified in subsection 3 of NRS 631.287 under his or her direct supervision, the supervising dental hygienist and the dental assistant or expanded function dental assistant, as applicable, must enter into a signed written practice agreement prescribing the tasks specified in subsection 3 of NRS 631.287 which the dental assistant or expanded function dental assistant is authorized to perform.*

2. *A dental assistant or expanded function dental assistant practicing under the supervision of a dental hygienist with a special endorsement to practice public health dental hygiene may perform a task specified in subsection 3 of NRS 631.287 only:*

(a) If the dental assistant or expanded function dental assistant, as applicable, is authorized to do so pursuant to the written practice agreement entered into pursuant to subsection 1; and

(b) In accordance with any limitations or procedures set forth in the written practice agreement.

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} <i>Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western</i> 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 dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	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 dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	150
Application fee for a specialist's license to practice dentistry	125
Application fee for a limited license or restricted license to practice dentistry, dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	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
Fee for a second or subsequent inspection of a facility required by the Board to ensure compliance with infection control guidelines	150
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 dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Biennial license renewal fee for a general license to practice dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Annual license renewal fee for a limited license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	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 dental therapist , for dental hygienist <i>or expanded function dental assistant</i>	50

Fee for a second or subsequent audit to ensure compliance with continuing education requirements.....	200
Reinstatement fee for a suspended license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Reinstatement fee for a revoked license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	500
Reinstatement fee to return an inactive or retired dentist, dental therapist , for dental hygienist <i>or expanded function dental assistant</i> or a dentist, dental therapist , for dental hygienist <i>or expanded function dental assistant</i> 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 , ~~for~~ from an accredited school or college of dental hygiene ~~or~~ *or from an accredited program for dental assisting*, 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 , ~~for~~ dental hygiene *or expanded function dental assistance* 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 , *if applicable*, 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 misuse or substance use disorder and, if so, any documents relevant to the substance 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 , ~~for~~ dental hygiene *or expanded function dental assistance* suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene ~~for~~ *or expanded function dental assistance*, including, without limitation, being subject to mandatory supervision, 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 , ~~for~~ dental hygiene *or expanded function dental*

assistance 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;

(2) Dental hygiene pursuant to NRS 631.290; ~~for~~

(3) Dental therapy pursuant to NRS 631.312; *or*

(4) Expanded function dental assistance pursuant to NRS 631.31285;

(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 *to practice dentistry or dental hygiene* 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 631.045 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 ~~or~~ *or expanded function dental assistant*, 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. 11. 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 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 , ~~for~~ dental hygiene *or expanded function dental assistance* suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene ~~for~~ *or expanded function dental assistance*, 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~~ *Current involvement* in any disciplinary action concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* 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. 12. 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~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board must:

(a) Pass the Dental Simulated Clinical Examination or a comparable examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board, as applicable;

(b) Demonstrate proficiency in endodontics as the organization administering the clinical examination requires;

(c) Demonstrate proficiency in fixed prosthodontics as the organization administering the clinical examination requires;

(d) Demonstrate proficiency in restorative dentistry as the organization administering the clinical examination requires;

(e) Demonstrate proficiency in periodontics as the organization administering the clinical examination requires; and

(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. 13. NAC 631.140 is hereby amended to read as follows:

631.140 1. Except as otherwise provided in NRS 622.090, an applicant who does not pass all sections of the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board may apply for a reexamination. The application must be made on a form furnished by the Board.

2. An applicant who does not pass the examination may not take another examination without completing such additional professional training as is required by the Board.

3. An applicant who does not pass the examination solely because he or she fails one of the demonstrations required pursuant to NAC 631.090 may, at the next scheduled examination,

complete the remaining demonstration. If the applicant does not successfully complete the remaining demonstration at the next scheduled examination or within the timeline approved by the American Board of Dental Examiners or by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board for a person who takes the examination as part of an integrated curriculum, he or she must retake the entire examination.

4. For the purposes of NRS 631.280, an applicant who attempts to complete successfully a demonstration pursuant to subsection 3 shall not be deemed to have failed the examination twice if he or she fails to complete that demonstration successfully.

Sec. 14. 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.

4. *Each expanded function dental assistant licensed to practice in this State must annually complete at least 12 hours of instruction in approved courses of continuing education or biennially complete at least 24 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 expanded function dental assistant. Hours of instruction may not be transferred or carried over from one licensing period to another.*

5. In addition to the hours of instruction prescribed in subsections 1 ~~1, 2 and 3~~ to 4, *inclusive*, each dentist, dental therapist, ~~and~~ dental hygienist *and expanded function dental assistant* 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.

~~5.1~~ 6. Any provider of or instructor for a course in continuing education relating to the practice of dentistry, dental therapy, ~~or~~ dental hygiene *or expanded function dental assistance* 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.

~~{6}~~ 7. 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.

~~{7}~~ 8. Study by group may be approved for continuing education if the organizer of the group complies with the requirements of subsection ~~{6}~~ 7 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.

~~{8}~~ 9. Credit may be allowed for attendance at a meeting or a convention of a dental, dental therapy, ~~{or}~~ dental hygiene *or dental assistance* society.

~~{9}~~ 10. 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.

~~{10}~~ 11. Credit may be allowed for dental, dental therapy, ~~{and}~~ dental hygiene *and expanded function dental assistance* services provided on a voluntary basis to nonprofit agencies and organizations approved by the Board.

Sec. 15. 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 *and expanded function dental assistance* 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, an expanded function dental assistant 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 expanded function dental assistant.

5. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist, *a* dental therapist ~~or~~, *a* dental hygienist *or an expanded function dental assistant* 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 ~~or~~ *or expanded function dental assistant*.

~~5.1~~ 6. *In completing the hours of continuing education required pursuant to NAC 631.173, an expanded function dental assistant must annually complete at least 2 hours in the clinical subject of the identification and prevention of medical emergencies or biennially complete at least 4 hours in the clinical subject of identification and prevention of medical emergencies, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the expanded function dental assistant.*

7. 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.

~~6.1~~ 8. 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 , ~~for~~ dental hygiene *or dental assistance* 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, 2 , ~~for~~ 3 *or 4* 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 , ~~for~~ dental hygienist ~~for~~ *or expanded function dental assistant.*
- (e) For approved dental, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* 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. 16. 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 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

(d) *Expanded function dental assistant 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 12 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 Expanded Function Dental Assistant

(e) Dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* 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, *a* dental therapist ~~or~~, *a* dental hygienist *or an expanded function dental assistant* at an approved course in continuing education must be retained by the dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* 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 *or expanded function dental assistant* 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 second or subsequent failure of a dentist, *a* dental therapist, ~~or~~ *a* dental hygienist *or an expanded function dental assistant* 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 expanded function dental assistants* and additional follow-up audits, as necessary, to ensure compliance with the requirements of this section and NAC 631.173 and 631.175.

Sec. 17. 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 *or expanded function dental assistant* associated with the practice.

Sec. 18. NAC 631.275 is hereby amended to read as follows:

631.275 1. For the purposes of paragraph (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 , *an expanded function dental assistant* 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 ,* ~~for~~ a dental hygienist *or an expanded function dental assistant* 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 , *an expanded function dental assistant* or a dental assistant;

(d) The length of time a licensed dentist, a dental therapist , ~~for~~ a dental hygienist *or an expanded function dental assistant* spends with a patient or if the person otherwise places conditions on the number of patients a licensed dentist, a dental therapist , ~~for~~ a dental hygienist *or an expanded function dental assistant* may treat in a certain period of time;

(e) The length of time a licensed dentist, a dental therapist, a dental hygienist , *an expanded function dental assistant* 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 , *expanded function dental assistant* 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~~ , a dental hygienist *or an expanded function dental assistant* 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~~ , a dental hygienist ~~or~~ *or an expanded function dental assistant*;

(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~~ , a dental hygienist *or an expanded function dental assistant* 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, a dental therapist , ~~or~~ a dental hygienist *or an expanded function dental assistant* 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 , *expanded function dental assistants* 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 expanded function dental assistants* 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 ~~or~~ *or an expanded function dental assistant*, who:

(1) Directly provides dental care to a patient under the supervision of a licensed dentist, a licensed 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~~, *a dental hygienist ~~H~~ or an expanded function dental assistant*, within the scope of the education, experience and training of the dentist, dental therapist, ~~or~~ dental hygienist ~~H~~ *or expanded function dental assistant*, in accordance with applicable law and the ethics of the profession of dentistry.

Sec. 19. NAC 631.279 is hereby amended to read as follows:

631.279 1. Any applicant or licensed dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* 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.

Sec. 20. Section 3 of LCB File No. R072-22 is hereby amended to read as follows:

Sec. 3. 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~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board must pass a simulated clinical examination in dental therapy or a comparable examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board, as applicable.

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Case No. 2357-1612

Complainant,

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

vs.

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

Respondent.

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 02/11/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 13:57:20 PDT)

Ronald West, DMD
Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:51:11 PST)

Yamilka Arias, RDH
Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Nov 2, 2025 19:04:29 MST)

Todd Thomspen, DMD
Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Complainant,

vs.

Respondent.

Case No. 4669-1875

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 29/10/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 13:59:33 PDT)

Ronald West, DMD

Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:52:07 PST)

Yamilka Arias, RDH

Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Oct 29, 2025 14:01:29 PDT)

Todd Thompspon, DMD

Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Complainant,

vs.

Respondent.

Case No. S2-172-2495

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes only and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 29/10/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 13:58:56 PDT)

Ronald West, DMD

Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:51:40 PST)

Yamilka Arias, RDH

Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Oct 29, 2025 14:01:54 PDT)

Todd Thompspon, DMD

Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Complainant,

vs.

Respondent.

Case No. S2-172-2495

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 29/10/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 13:58:56 PDT)

Ronald West, DMD

Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:51:40 PST)

Yamilka Arias, RDH

Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Oct 29, 2025 14:01:54 PDT)

Todd Thompspon, DMD

Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Case No. 3252-1733

Complainant,

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

vs.

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

Respondent.

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 29/10/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 14:01:07 PDT)

Ronald West, DMD
Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:52:37 PST)

Yamilka Arias, RDH
Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Oct 29, 2025 14:00:32 PDT)

Todd Thompspon, DMD
Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Case No. 1098-2199

Complainant,

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

vs.

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

Respondent.

On October 21, 2025, the Nevada State Board of Dental Examiners' Review Panel 2 ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as

appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 29/10/2025

By:

Ronald West DMD

Ronald West DMD (Oct 29, 2025 13:57:58 PDT)

Ronald West, DMD
Member, Nevada State Board of Dental Examiners

Yamilka Arias, RDH

Yamilka Arias, RDH (Nov 10, 2025 00:53:01 PST)

Yamilka Arias, RDH
Member, Nevada State Board of Dental Examiners

W Todd Thompson

W Todd Thompson (Oct 29, 2025 13:59:49 PDT)

Todd Thompspon, DMD
Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Complainant,

vs.

Respondent.

Case No. 6498-2437

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

On November 20, 2025, the Nevada State Board of Dental Examiners' Review Panel Three (3) ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.

Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:

From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand for dismissal with no further action.

Having found as noted herein, this matter shall be returned to the Executive Director as appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC

Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 23/11/2025

By: *Lance J Kim*
Lance J Kim (Nov 23, 2025 13:46:12 PST)
Lance Kim, DMD
Member, Nevada State Board of Dental Examiners

Kimberly Petrilla
Kimberly Petrilla (Nov 25, 2025 21:13:05 PST)
Kimberly Petrilla, RDH
Member, Nevada State Board of Dental Examiners

John Gallob
John Gallob, DMD (Nov 23, 2025 19:39:09 AST)
John Gallob, DMD
Member, Review Panel

STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Case No. S7-92-2520

Complainant,

**REVIEW PANEL FINDINGS AND
RECOMMENDATIONS**

vs.

(These findings are confidential pursuant to NRS 631.368(1). To the extent that Respondent and/or his or her attorney receive a copy of these findings, they are for settlement purposes **only** and are not to be further distributed or made public except as provided in SB 256 NRS 631.355(1), 631.3635 and/or NRS 631.368(2).)

Respondent.

On November 20, 2025, the Nevada State Board of Dental Examiners' Review Panel Three (3) ("Review Panel") met to review and discuss the preliminary investigation conducted by the Board's Preliminary Screening Consultant assigned to this matter pursuant to NRS 631.363 in the above-captioned matter.

The Review Panel reviewed and evaluated the Verified Complaint, Respondent's Response to the Verified Complaint, records concerning the Respondent's treatment of the complainant, and the Preliminary Screening Consultant's preliminary findings and recommendations. "Records" as used in these findings and recommendations include any available x-rays or radiographs.


Having reviewed and assessed the above-referenced materials, and following discussion regarding the same, the Review Panel finds and recommends as follows:


From the review of the records there is not a preponderance of evidence to support any allegation of treatment below the standard of care. Therefore, the Panel recommends remand for dismissal with no further action.


Having found as noted herein, this matter shall be returned to the Executive Director as appropriate based upon the findings herein for remand consistent with NRS Chapter 631, NAC

Chapter 631 and/or any other applicable statutory or administrative provision applicable to the above-captioned matter.

DATED this 21/11/2025

By: 
Lance J Kim (Nov 23, 2025 13:49:19 PST)
Lance Kim, DMD
Member, Nevada State Board of Dental Examiners


Kimberly Petrilla (Nov 25, 2025 21:12:36 PST)
Kimberly Petrilla, RDH
Member, Nevada State Board of Dental Examiners


John Gallob, DMD (Nov 21, 2025 21:19:45 AST)
John Gallob, DMD
Member, Review Panel

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STATE OF NEVADA
BEFORE THE BOARD OF DENTAL EXAMINERS

NEVADA STATE BOARD OF DENTAL
EXAMINERS,

Case No. 6133-2260

Complainant,

vs.

**CORRECTIVE ACTION PLAN
NON-DISCIPLINARY
STIPULATION AGREEMENT**

Respondent.

IT IS HEREBY STIPULATED AND AGREED via this *Corrective Action Plan Non-Disciplinary Stipulation Agreement* (Stipulation Agreement or Stipulation), by and between [Redacted] (Respondent) [Redacted] and the NEVADA STATE BOARD OF DENTAL EXAMINERS (the Board), by and through the Board's General Counsel, Andrea Barraclough, Esq., as follows:

I.
Background

1. Respondent is a dentist licensed to practice dentistry in the State of Nevada by the Board pursuant to Chapter 631 of the Nevada Revised Statutes (NRS) and Chapter 631 of the Nevada Administrative Code (NAC). Respondent was licensed in Nevada [Redacted] License No. [Redacted]

2. On or about August 15, 2023, the Board received a Verified Complaint from patient [Redacted] regarding issues with the dental care they received from [Redacted] alleging possible violations of NRS Chapter 631 and/or NAC Chapter 631.

3. On or about August 17, 2023, via a *Notice of Complaint & Request for Records*, the Board notified Respondent of the Verified Complaint received from [Redacted]. The [Redacted]

1 ///

2 Authorized Complaint sought a response from Respondent, as well as the records of patient

3 [REDACTED]

4 4. On or about June 12, 2024, the Board received Respondent's written response to
5 the Notice of Complaint and Request for Records.

6 5. A Preliminary Screening Consultant (PSC) was subsequently assigned to clinically
7 review the facts of the case and produce a report regarding this matter.

8 6. On August 27, 2024, the Verified Complaint, the PSC Report, and information and
9 documentation described in Paragraph 4 were independently reviewed by the Nevada State Board
10 of Dental Examiner's Review Panel established pursuant to NRS 631.3635. The PSC did not
11 participate in the Review Panel review of this matter.

12 II.

13 Review Panel's Findings and Recommendations

14
15 7. Pursuant to NRS 631.3635 and for this matter alone and not for any other purpose
16 (including any pending or subsequent civil action(s)), the Review Panel established, based upon
17 the investigation conducted to date, that Respondent's actions as described in the investigated
18 Complaint constitute unprofessional conduct as follows:

19
20 (a) A preponderance of evidence supports that the Respondent's treatment
21 was below the standard of care, to wit: Respondent failed to obtain informed
22 consent prior to extraction of tooth #30.

23 8. Respondent acknowledges that the PSC's preliminary review proceeded through
24 the Review Panel process as required pursuant to NRS 631.3635; that the Review Panel found
25 there is sufficient evidence to support the findings and recommendations contained herein; and
26 that the above findings and recommendations were made and/or adopted by the Review Panel.

27 9. Respondent understands and acknowledges the following: (1) that the PSC's
28 findings and recommendations were not binding on the Review Panel; (2) neither the PSC's

1 ///

2 findings and recommendations, nor the findings and recommendation of the Review Panel, are
3 binding on the Board; and (3) Respondent understands and acknowledges that he has the right to
4 dispute these findings at a full Board hearing pursuant to NRS 631.360, including the right to call
5 and examine witnesses and present evidence, but he has knowingly waived this right in order to
6 resolve this matter via this Stipulation Agreement.

7 10. For settlement purposes only, and not for any other purpose (including any
8 subsequent civil or administrative action), and without admitting to the accuracy of the opinions
9 of the PSC or Review Panel, Respondent acknowledges that, if this matter were to proceed to a
10 full board hearing, a sufficient quantity and/or quality of evidence could be proffered sufficient to
11 meet a preponderance of the evidence standard of proof demonstrating that Respondent violated
12 the regulatory and/or statutory provisions noted above in Paragraph 7.

13 III.

14 Terms and Conditions

15
16 11. Based upon the investigation conducted to date, the opinions of the PSC, the
17 findings of the Review Panel contained in Paragraph 7, and the acknowledgments of Respondent
18 contained in Paragraphs 8 through 10, the parties have agreed to resolve the above-referenced
19 investigation pursuant to the following terms and conditions:

20 (a) In addition to completing the required continuing education necessary for
21 license renewal, Respondent agrees to obtain an additional eight (8) hours of
22 supplemental continuing education with an emphasis on risk management
23 and/or informed consent.

24 Information, documents, and/or descriptions for the above-referenced supplemental
25 education must be submitted in writing to the Executive Director of the Board for
26 approval prior to attendance. Upon receipt of the written request to attend the
27 supplemental education, the Executive Director of the Board shall notify
28 Respondent in writing whether the requested supplemental education is approved
for attendance and meets the requirement outlined in Paragraph 11.A. Respondent
agrees that at least 50% of the required supplemental education shall be completed.

1 through attendance at live presentations and/or via live lecture webinar; up to 50%
2 of the required supplemental education may be completed through online/home
3 study courses. The cost associated with this supplemental education shall be paid
4 by Respondent. All supplemental education must be completed within six (6)
5 months of the adoption of this Agreement by the Board.

6 In the event Respondent fails to complete the supplemental education set forth in
7 Paragraph 11.A within six (6) months of the adoption of this Agreement by the
8 Board; and/or fails to complete and pass the Nevada Dental Jurisprudence Exam
9 within one (1) year of the adoption of this Agreement by the Board, Respondent
10 agrees that his license to practice dentistry in the State of Nevada may be
11 automatically suspended by the Board's Executive Director without any further
12 action of the Board other than the issuance of an Order of Suspension by the
13 Executive Director. Respondent agrees not to seek injunctive relief from any
14 Federal or State of Nevada District Court to prevent the automatic suspension of
15 Respondent's license to practice dentistry in the State of Nevada due to
16 Respondent's failure to comply with either or both Paragraphs 11.A. and 11.B and
17 also agrees to waive any other legal claims and remedies resulting from the
18 automatic suspension of Respondent's license to practice dentistry in the State of
19 Nevada due to Respondent's failure to comply with either or both Paragraphs 11.A
20 and 11.B.

21 If Respondent later completes the required continuing education and submits
22 written proof of the completion of the supplemental education and/or later takes
23 and passes the Nevada Dental Jurisprudence Exam and submits written proof of
24 passage, and he also pays the reinstatement fee pursuant to NRS 631.345,
25 Respondent's license to practice dentistry in the State of Nevada will automatically
26 be reinstated by the Executive Director of the Board without further notice,
27 provided that there are no other violations of any of the provisions contained in this
28 Agreement.

Respondent shall be responsible for any costs or attorneys' fees incurred in the
event the Board must seek injunctive relief or other legal remedies to prevent
Respondent from practicing dentistry during the period Respondent's license is
automatically suspended pursuant to this paragraph.

Respondent understands and acknowledges that the completion of these continuing
education classes and the Nevada Dental Jurisprudence Exam for purposes of
fulfilling the obligations of this Stipulation does not relieve him of the continuing

1 education obligations required of a dental licensee upon license renewal, including
2 but not limited to the courses required by NRS 631.342, NAC 631.173, NAC
3 631.175 and/or AB 474.

4 **(b) Respondent agrees that, within sixty (60) days of adoption of this**
5 **Stipulation Agreement by the Board, Respondent shall reimburse the Board**
6 **One Thousand, Five Hundred dollars and zero cents (\$1,500.00), which was**
7 **the flat rate costs and fees of the investigation and compliant resolution process**
8 **in effect on the date of complaint submission. Payment shall be made payable**
9 **to the Nevada State Board of Dental Examiners and mailed directly to 2651 N.**
10 **Green Valley Pkwy, Ste 104, Henderson, NV 89014.**

11 Respondent acknowledges and agrees that the costs and fees described in Paragraph
12 11.B do not include court reporter costs. If a Court Reporter or Recorder was used
13 at any stage of proceedings related to investigation, resolution, or effectuation of
14 the Verified Complaint, Respondent shall be solely responsible for the costs of the
15 court reporter or recorder. If the court reporter or recorder direct bills Respondent
16 and/or their counsel, Respondent shall pay the court reporter or recorder directly
17 and will be subject to private right of action from the court reporter or recorder for
18 failure to pay their fees and costs. If the court reporter or recorder bills the Board,
19 Respondent will be notified of the costs and fees and will be expected to reimburse
20 the Board the full amount of costs and fees within thirty (30) days of the written
21 request for reimbursement of same. Failure to timely reimburse the Board will
22 trigger the same default events described in the remainder of this paragraph.

23 In the event Respondent defaults on any payment set forth in this Stipulation
24 Agreement (which includes failure to timely pay the fees outlined in Paragraph
25 11.B), Respondent agrees that his license to practice dentistry in the State of Nevada
26 may be suspended upon further action of the Board if they determine that
27 Respondent has failed to comply with the terms of this Stipulation.

28 If suspension results from not paying the required fees outlined in Paragraph 11.B,
subsequent to the issuance of the Order of Suspension from the Board, Respondent
agrees to pay a liquidated damage amount of Twenty-Five dollars and zero cents
(\$25.00) for each day Respondent is in default on the payment(s) outlined in
Paragraph 11.B.

Upon curing the applicable defaulted payment contained in this Stipulation
Agreement and paying the reinstatement fee plus any liquidated damage amount

1 Respondent's license to practice dentistry in the State of Nevada will automatically
2 be reinstated by the Board's Executor Director without further notice, provided that
3 there are no other violations by Respondent of any of the provisions contained in
4 this Stipulation Agreement.

5 Respondent shall be responsible for any costs or attorney's fees incurred in the
6 event the Board must seek injunctive relief or other legal remedies to either or both
7 prevent Respondent from practicing dentistry during the period Respondent's
8 license is automatically suspended pursuant to this paragraph and/or recoup fines,
9 fees, damages or assessments addressed in this paragraph. In the event Respondent
10 fails to cure any defaulted payments within forty-five (45) days of the default,
11 Respondent agrees that the total amount owed to the Board in recoup fines, fees,
12 damages or assessments may be reduced to a civil judgment; Respondent's review
13 of this Paragraph and signature below will act as a Confession of Judgement should
14 this subsection become effective. Respondent waives any right to have any fines,
15 fees, damages or assessments owed pursuant to this Stipulation discharged in
16 bankruptcy.

17 **IV.**
18 **Consent**

19 12. **Acknowledgement of Review of this Agreement.** Respondent acknowledges that
20 they have read the entirety of this Stipulation Agreement and agrees with all provisions contained
21 herein in their entirety. They acknowledge that their counsel has fully discussed the terms and
22 conditions of this Stipulation with them to their satisfaction; however, they have not relied solely
23 on counsel to read and understand this Stipulation and has also read this Stipulation on their own.

24 13. **Representation by Counsel.** Respondent acknowledges that they have been
25 advised that they have the right to have this matter, including this Stipulation Agreement, reviewed
26 by independent counsel; that review and advice by independent counsel is in their best interest;
27 and that they had ample opportunity to seek independent counsel. Having been advised of their
28 right to independent counsel, as well as having had the opportunity to seek independent counsel,
Respondent did seek the advice of counsel and was represented by counsel during the investigation
of this matter and at the time of the execution of this Stipulation Agreement. Respondent
specifically acknowledges that they have been advised by said counsel with respect to this

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2 Stipulation Agreement, and that after consultation with, and upon the advice of, independent
3 counsel, Respondent understands this Stipulation Agreement's terms and conditions and consents
4 to the same.

5 14. **Waiver of Rights.** Respondent is aware that, by entering into this Stipulation
6 Agreement, they are waiving certain valuable due process rights contained in, but not limited to,
7 NRS 631, NAC 631, NRS 233B and NAC 233B. Respondent knowingly, willingly and
8 intelligently waives these due process rights, and any other legal rights that may apply in
9 connection with the administrative proceedings resulting from the Authorized Investigative
10 Complaint. Respondent further agrees to settle and resolve this matter as set forth in this Stipulation
11 Agreement without a hearing or any further proceedings, other than Board approval of this
12 Stipulation Agreement. Respondent agrees that, in the event the Board adopts this Stipulation
13 Agreement, he hereby waives any and all rights to seek judicial review or appeal, or otherwise to
14 challenge or contest the validity of the provisions contained herein.

15 15. **No Coercion or Duress.** Respondent acknowledges they are consenting to and
16 have signed/initialed this Stipulation Agreement voluntarily, without coercion, duress, undue
17 influence or intimidation, and in the exercise of their own free will.

18 16. **Result of Voluntary Negotiations.** Respondent recognizes and agrees that this
19 Stipulation Agreement is the result of voluntary settlement negotiations, and that this Stipulation
20 Agreement is a voluntary compromise and a final agreement.

21 17. **Joint Agreement.** Respondent and the Board agree that this Stipulation Agreement
22 has been jointly drafted; therefore, no rule of construction shall be applied. In the event this
23 Stipulation Agreement is construed by a court of law or equity to contain ambiguous terms, such
24 court shall not construe it or any provision hereof against the Board, Respondent, or any party as
25 the drafter. The parties hereby acknowledge that all parties have contributed substantially and
26 materially to the preparation of this Stipulation Agreement.

27 18. **Entire Agreement.** Respondent acknowledges the provisions in this Stipulation
28 Agreement contain the entire agreement between Respondent and the Board and the provisions of,


Respondent's Attorney's Initials


Respondent's Initials

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2 this Stipulation Agreement can only be modified in writing, with Board approval. Respondent
3 further acknowledges that no other promises in reference to the provisions contained in this
4 Stipulation Agreement have been made by any agent, employee, counsel or any person affiliated
5 with the Nevada State Board of Dental Examiners.

6 19. **Contingent Upon Board Approval.** Respondent understands and acknowledges
7 that this Stipulation Agreement is contingent upon approval of same by the Board. Respondent
8 further understands and acknowledges that said approval will be sought during a Board meeting
9 governed by Nevada's Open Meeting Laws.

10 20. **Release From Liability.** In consideration of the execution of this Stipulation
11 Agreement, Respondent hereby releases, remises, and forever discharges the State of Nevada, the
12 Board, and each of their members, agents, investigators, panel members, employees and legal
13 counsel in their individual and representative capacities, from any and all manner of actions, causes
14 of action, suits, debts, judgments, executions, claims, and demands whatsoever, known and
15 unknown, in law or equity, that Respondent ever had, now has, may have, or claims to have against
16 any or all of the persons or entities named in this section, arising out the investigation or complaint
17 authorized as a result of information in the Complaint.

18 21. **Board Consideration of Stipulation Agreement.** Respondent understands and
19 acknowledges that this Stipulation Agreement will be considered by the Board in an open meeting,
20 to which Respondent hereby specifically waives any and all notice requirements for same, whether
21 required by NRS 241.033 or any other statute or regulation. It is understood and stipulated that it
22 is within the Board's sole discretion to accept or reject this Stipulation Agreement.

23 22. **Effect of Acceptance of Agreement by Board.** Respondent understands and
24 agrees that this Stipulation Agreement will only become effective if and when the Board has
25 approved the same in an open meeting. Should the Board adopt this Stipulation Agreement, such
26 adoption shall be considered a final disposition of a contested case; upon acceptance of this
27 Stipulation Agreement by the Board, this Stipulation becomes binding and enforceable.
28 Respondent understands and acknowledges that, upon approval by the Board, this Stipulation

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2 Agreement will become a public record, and the terms and conditions herein will be effective
3 immediately, without any requirement of a further Order from the Board. Respondent understands
4 it is his responsibility to follow up with the Board to ascertain the status of this Stipulation and
5 when and if it becomes effective.

6 23. **Use in Future Board Proceeding(s).** Respondent acknowledges that, in the event
7 the Board adopts this Stipulation Agreement, it may be considered in any future Board
8 proceeding(s) concerning Respondent or in any future judicial review concerning Respondent
9 and/or this Stipulation Agreement, whether such judicial review is performed by either the State
10 or Federal District Court(s).

11 24. **Effect of Rejection of Agreement by Board.** Respondent acknowledges that, in
12 the event this Stipulation Agreement is rejected by the Board, the Board may take other and/or
13 further action as allowed by statute, regulation, and/or appropriate authority. In the event that this
14 Stipulation Agreement is not approved by the Board and this matter proceeds to a full Board
15 hearing, Respondent expressly waives any right to challenge the Board or its members appearing,
16 considering and deciding the resolution of the Complaint at the full Board hearing based upon an
17 assertion of bias as a result of the Board having reviewed this Stipulation Agreement prior to
18 rejecting this Stipulation Agreement.

19 25. **Non-Disciplinary Nature of this Stipulation Agreement.** Respondent
20 understands, and the Board agrees, that the Board considers this Stipulation Agreement to be non-
21 disciplinary in nature and that that Board will not report this action to the National Practitioner
22 Data Bank unless ordered or required to do so by the National Practitioner Data Bank based upon
23 the National Practitioner Data Bank's interpretation of this Stipulation Agreement.

24 26. **Choice of Law.** In the event Respondent resides in or moves to another jurisdiction
25 while the Complaint is being investigated, resolved, or effectuated, and Respondent and/or the
26 Board seek court intervention related to any aspect of Respondent's case, both parties
27 acknowledge and agree that any court intervention will be solely filed in a Nevada state or federal
28 district court and/or justice court with appropriate jurisdiction, and that, aside from any applicable

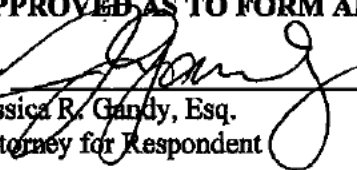
1 federal law, Nevada law will govern the adjudication of all legal claims related to the investigation,
2 resolution, and effectuation of the Complaint and/or Stipulation Agreement. In the event any trial
3 (jury or bench) results from any legal action related to the investigation, resolution, or effectuation
4 of the Complaint and/or Stipulation Agreement, and said proceedings began in a court outside of
5 Clark County, Las Vegas, NV, both parties agree to the removal of the case to a trial court located
6 in Clark County, Las Vegas, NV.

7 27. **Headings.** All sections, titles, captions or headings contained in this Stipulation
8 Agreement are for convenience only and shall not affect the meaning or interpretation of this
9 Stipulation Agreement.

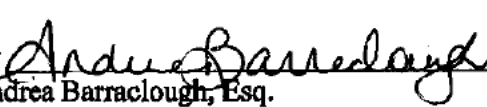
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12 DATE 

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15 Respondent

16 **APPROVED AS TO FORM AND CONTENT**

17 By  this 29 day of October, 2025.
18 Jessica R. Gandy, Esq.
19 Attorney for Respondent

20
21 **APPROVED AS TO FORM AND CONTENT**

22 By  this 25th day of November, 2025.
23 Andrea Barraclough, Esq.
24 Nevada State Board of Dental Examiners
25 General Counsel

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Respondent's Attorney's Initials


Respondent's Initials

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APPROVED AS TO FORM AND CONTENT

By Yamilka Arias, RDH this 10 day of November, 2025.
Yamilka Arias, RDH
Review Panel Member

BOARD ACTION

This *Corrective Action Non Disciplinary Stipulation Agreement* in the matter captioned as
Nevada State Board of Dental Examiners vs [REDACTED]
was (check appropriate action):

Approved _____ Disapproved _____

by a vote of the Nevada State Board of Dental Examiners at a properly noticed meeting
DATED this ____ day of _____, 2025.

Ronald West, DMD
President
NEVADA STATE BOARD OF DENTAL EXAMINERS



Respondent's Attorney's Initials

**ATTESTATION/DECLARATION OF THE EXECUTIVE DIRECTOR
AND GENERAL COUNSEL FOR
THE NEVADA STATE BOARD OF DENTAL EXAMINERS
(OWN MOTION INVESTIGATION INITIATION)**

In compliance with Nevada Administrative Code (NAC) Chapter 631 requirements, we,

- (1) Adam Higginbotham, Executive Director for the Nevada State Board of Dental Examiners (the Board); and
- (2) Andrea Barraclough, General Counsel for the Board,

hereby attest and declare based on personal knowledge and/or information and belief, that the following is true and accurate:

1. The Board received information that led both the Executive Director and General Counsel for the Board to conclude that a licensee may have engaged in conduct that is grounds for disciplinary action. *possible impairment due to drug use; failure to report this case*

2. Based on this information, we submitted a written recommendation to the Board that the information received be further investigated. The written recommendation supplied by us to the Board included a list of allegations potentially constituting grounds for discipline and evidence supporting the veracity of the information. The written recommendation and all supporting documents had from them the personally identifying information of the subject of the allegations redacted.


3. We each attest that we are aware of the identity of the person who is the subject of the allegations and recommendation, but that we have not and will not disclose the identity of the proposed Respondent to either or both the screening consultant and/or the Review Panel. Any identifying information will be kept confidential until or unless a full Board hearing is requested and/or the allegations are resolved by a stipulated resolution agreement.

We each attest that, in reviewing the redacted Complaint, we had no knowledge of the identity of the person who was the subject of the complaint; we have not communicated with any person concerning the subject matter of the Complaint prior to our review; and we have not been unduly influenced in our decision concerning whether the Complaint establishes jurisdiction.

We each declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct per NRS 53.045.



Adam Higginbotham
Executive Director, NSBDE

11/20/2025  *11/20/2025*
Date Andrea Barraclough Date
General Counsel, NSBDE

Received

NOV 17 2025

NSBDE

To Whom It May Concern:

I wish to remain anonymous. However, a matter of public safety has recently come to my attention that I feel compelled to share and believe it should be investigated. Public court documents [REDACTED] reveal that Dr. [REDACTED] tested positive for cocaine and marijuana on April 26, 2022, and again tested positive for marijuana on June 18, 2022. In those court documents, Dr. [REDACTED] admits to habitual marijuana use. These positive tests were during a time period in which he was operating and performing surgery on patients in Nevada. Dr. [REDACTED] admitted to these positive tests. There may be additional positive tests or continued use of cocaine and other controlled substances. This is a matter worthy of a thorough investigation.

**ATTESTATION/DECLARATION OF THE EXECUTIVE DIRECTOR
AND GENERAL COUNSEL FOR
THE NEVADA STATE BOARD OF DENTAL EXAMINERS
(OWN MOTION INVESTIGATION INITIATION)**

In compliance with Nevada Administrative Code (NAC) Chapter 631 requirements, we,

- (1) Adam Higginbotham, Executive Director for the Nevada State Board of Dental Examiners (the Board); and
- (2) Andrea Barraclough, General Counsel for the Board,

hereby attest and declare based on personal knowledge and/or information and belief, that the following is true and accurate, regarding information received on _____ related to licensee with initials _____:

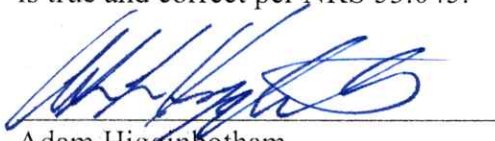
1. The Board received information that led both the Executive Director and General Counsel for the Board to conclude that a licensee may have engaged in conduct that is grounds for disciplinary action.

2. Based on this information, we submitted a written recommendation to the Board that the information received be further investigated. The written recommendation supplied by us to the Board included a list of allegations potentially constituting grounds for discipline and evidence supporting the veracity of the information. The written recommendation and all supporting documents had from them the personally identifying information of the subject of the allegations redacted.

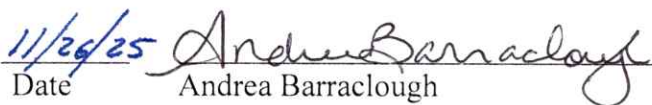
3. We each attest that we are aware of the identity of the person who is the subject of the allegations and recommendation, but that we have not and will not disclose the identity of the proposed Respondent to either or both the screening consultant and/or the Review Panel. Any identifying information will be kept confidential until or unless a full Board hearing is requested and/or the allegations are resolved by a stipulated resolution agreement.

We each attests that, in reviewing the redacted Complaint, we had no knowledge of the identity of the person who was the subject of the complaint; we have not communicated with any person concerning the subject matter of the Complaint prior to our review; and we have not been unduly influenced in our decision concerning whether the Complaint establishes jurisdiction.

We each declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct per NRS 53.045.


Adam Higginbotham
Executive Director, NSBDE

11/26/25
Date


Andrea Barraclough
General Counsel, NSBDE

11/26/2025
Date

Joe Lombardo
Governor

Richard Whitley,
MS
Director



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Dena Schmidt
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical
Officer

August 19, 2025

CERTIFIED MAIL: 9489 0090 0027 6499 8602 51



NOTICE OF INTENT TO IMPOSE ADMINISTRATIVE FINES

YOU ARE HEREBY NOTIFIED the Division of Public and Behavioral Health ("Division") intends to impose an administrative fine on The Nassar Smile Design Center, P.C. (03-02-2227) ("Registrant") totaling \$200.00 for violations, pursuant to Nevada Administrative Code (NAC) Chapter 459. Payment of the fine is due within fifteen business days following receipt of this notice.

Legal Authority

The Division intends to impose an administrative fine in accordance with the following regulatory provisions: NAC 459.949 (3) – NAC 459.949(4) and NAC 459.150(6).

NAC 459.949(3) states, in relevant part:

3. The Division may, after providing a notice of violation as described in subsection 2, impose an administrative fine:
 - (a) Except as otherwise provided in paragraphs (b), (c), and (d), of not more than \$2,000 per day for each violation of NAC 459.010 to 459.950, inclusive, or any provision of chapter 459 of NRS, or for a violation of any regulation or order, or any term, condition, or limitation of any license issued pursuant to those provisions.
 - (b) Of not more than \$5,000 per day for each violation that the Division determines is necessary to protect health and minimize danger to life or property.
 - (c) In the amount of \$500 for the failure to satisfy the requirement of notifying the Division within the period specified in paragraph (b) of subsection 1 of NAC 459.210.

- (d) In an amount equal to the fee required for the proposed activity if the person fails to receive written permission from the Division, as required pursuant to paragraph (b) of subsection 1 of NAC 459.210, to proceed with the proposed activity before engaging in the proposed activity.
- 4. Except in cases of willfulness or those in which the public health, interest, or safety requires otherwise, the Division may not impose an administrative fine against a licensee or registrant pursuant to this section unless prior to the institution of proceedings pursuant to this section:
 - (a) The Division provides written notice to the licensee or registrant of the facts or conduct which may warrant the imposition of the administrative fine.
 - (b) The licensee or registrant has been given an opportunity to demonstrate or achieve compliance with all lawful requirements; and
 - (c) The licensee or registrant failed to achieve compliance within 30 days after receipt of the written notice or a time period prescribed by the Division as necessary to protect the public health, interest, or safety.

See NAC 459.949(3)-(4).

Further, NAC 459.150(6) states, in relevant part,

[...]

- 6. A person may operate a radiation machine only if there is a valid registration or the operator is registered with the Division to install, service or repair the machine.

See NAC 459.150(6).

Factual Background

On April 30, 2025, the Division conducted a radiation safety inspection of [REDACTED] and at that inspection, identified a violation where the Registrant operated an unregistered intra-oral radiation machine, contrary to NAC 459.150(6). The violation is being substantiated because Registrant failed to correct the violation or submit a Plan of Correction after the Findings Report was issued on May 2, 2025, and again failed to respond following the Division's "Failure to Respond" letter dated June 25, 2025; therefore, the Division is imposing an administrative fine of \$200.00.

Other Circumstances Considered

Following the April 30, 2025, inspection, the Division provided Registrant two opportunities to resolve the violation. A Findings Report was emailed on May 2, 2025, requesting a written Plan of Correction within 30 days. When a response was not received, the Division issued a "Failure to Respond" letter on June 25, 2025, allowing an additional ten-day period for compliance; however, Registrant has not yet documented the radiation producing machine was removed from service or properly registered. Accordingly, the Division is assessing an administrative fine of \$200.00.

Registrant is still required to address the violations issued at the time of the inspection. Failure to come into compliance may result in additional penalties being imposed. Failure to pay an assessed fine within 30 days may result in further enforcement actions.

Pursuant to NRS 353C.1965, the State Controller shall establish and maintain a list of persons who owe a debt to an agency that has been assigned to the State Controller for collection. NRS 353C.1965 also states that until your case is settled with the State Controller, your professional board or licensing agency in your municipality will be notified and your license will be in jeopardy. Failure to pay the fine assessed by the Division may result in the debt being reported to the State Controller.

Notice of Right to Appeal

To oppose the imposition of the administrative fine(s), a written request for a hearing must be submitted to Dena Schmidt, Administrator, DPBH, 4150 Technology Way, Suite 300, Carson City, Nevada, 89706 or fax your written appeal to (775) 684-4211, or via email to dpbh@health.nv.gov. Your rights of appeal are set forth at NAC 439.300 to NAC 439.395, available at: <https://www.leg.state.nv.us/NAC/NAC-439.html>

To receive a hearing, the Administrator must receive this written appeal by 5:00 pm on the 10th working day after receipt of this notice. The written appeal must include a request to appeal the imposition of fines, the name of the individual who signed this notice and the reasons why the Division of Public and Behavioral Health should not impose the fine(s).

You are entitled to be represented by counsel at your own expense in the proceedings. If you retain an attorney, your counsel must notify the Administrator of his or her representation of you.

If you have any questions, please feel free to contact Ron Woodburn at (775) 687-7846.

Sincerely,

Ron Woodburn
Supervisor, Radiation Control Program

cc: Dena Schmidt
Division Administrator
Division of Public and Behavioral Health

Mellisa Bullock
State Epidemiologist
Division of Public and Behavioral Health

Janice Hadlock-Burnett
Bureau Chief
Health Planning & Preparedness

Courtney Leverty
Deputy Attorney General
State of Nevada Office of the Attorney General

Nevada State Board of Dental Examiners
2651 North Green Valley Parkway, Suite 104
Henderson, Nevada 89014

Shane Barjon

From: Bill Gorman
Sent: Thursday, November 20, 2025 7:48 AM
To: [REDACTED]
Subject: Unpaid Fine Invoice 043848

Good morning, Dr. [REDACTED]

We created a Fine Invoice 043848 on 08/19/2025 in the amount of \$200.00 Administrative Fine with a due date of 09/12/2025 that is still unpaid. We sent the original notice of the Administrative Fine on 08/19/2025 Certified and it was signed for on 08/22/2025. We sent another email on 09/26/2025, trying to get this invoice paid. As of 10/22/2025 we will be forwarding this matter to the Controllers Office if the invoice is not paid.

Please let me know if I can be of any assistance.

Bill Gorman

Administrative Assistant III | Radiation Control Program
Division of Public and Behavioral Health
Nevada Department of Health and Human Services
2080 E. Flamingo Rd Ste 319
Las Vegas, NV 89119
T(702) 486-5280 | Fax (702) 486-5024
Hours: Monday – Thursday 7:00AM – 5:00PM Friday 7:00AM – 11:00AM
bgorman@health.nv.gov | <https://dpbh.nv.gov>



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



988 is a confidential, free hotline that connects those experiencing a mental health, substance use, or suicidal crisis with trained crisis counselors 24/7/365. Call, text, or chat 988lifeline.org.

Need help with anything else? Nevada **211** can connect you with information and referrals to local health and human services agencies. It is free, confidential, and available 24/7/365. Call **211**, text **898211**, or visit www.nevada211.org.



Please take our customer satisfaction survey by clicking [here](#).

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the use of the individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that your use of this information is in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Such actions may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message and any attachments.

2 Permit Scheme				
Permit	Patient group	Depth / Patient response	Routes authorized	Key delineators
1A) Moderate Sedation (MS-A)	Adult (≥13)	<i>Moderate sedation</i> : purposeful response to verbal/tactile stimulation; airway usually self-maintained; spontaneous ventilation adequate.	Enteral and/or parenteral; single or multi-drug techniques.	Not intended to enter deep/GA; if deeper level is likely or airway intervention anticipated → use GA.
1B) Moderate Sedation (MS-P)	Pediatric (<13)	Same depth as MS-A, but applied to children; higher drift risk recognized.	Enteral and/or parenteral; single or multi-drug techniques.	Requires pediatric-specific training, dosing, monitoring, equipment, and rescue capability.
2A) General Anesthesia (GA-A) (includes Deep)	Adult (≥13)	<i>Deep → GA</i> : response to painful stimulation only (deep) or unarousable (GA); airway support commonly required; ventilation may be inadequate.	Any route (IV, inhalational, etc.); multi-drug regimens; NMBAs where indicated.	Highest level: authorizes planned deep/GA and rescue from all lighter levels.
2B) General Anesthesia (GA-P) (includes Deep)	Pediatric (<13)	Same as GA-A but for children.	Any route as above.	Adds pediatric airway expertise, pediatric-sized equipment, and pediatric life



3 Permit Scheme				
Permit (code)	Patient group	Depth / patient response	Routes / techniques	Key delineators
1) Oral/Minimal Sedation (OMS)	All	Minimal (anxiolysis): normal response to verbal command; airway/ventilation/cardiovascular function unaffected.	Single enteral dose at/under FDA MRD; ± nitrous if overall level remains minimal; no parenteral , no multi-drug titration to deeper levels.	If multiple enteral drugs, any parenteral route, or deeper level is intended/likely → use Moderate or GA permits.
2A) Moderate Sedation (MS-A)	Adult (≥13)	Moderate : purposeful response to verbal or light tactile stimulation; spontaneous ventilation adequate; airway usually self-maintained.	Enteral and/or parenteral ; single or multi-drug techniques intended to remain moderate.	If deep/GA is intended or airway intervention anticipated → GA-A .
2B) Moderate Sedation (MS-P)	Pediatric (<13)	Same depth as MS-A; higher drift risk in children.	Enteral and/or parenteral with pediatric dosing/monitoring/equipment.	Requires pediatric-specific training and ability to rescue to deeper level; if deep/GA likely → GA-P .
3A) General Anesthesia (GA-A) (includes Deep)	Adult (≥13)	Deep → GA : response to painful stimulation only (deep) or unarousable (GA); airway support commonly required; ventilation may be inadequate.	Any route (IV, inhalational, etc.); multi-drug regimens; advanced airway skills/equipment.	Highest level; authorizes planned deep/GA and rescue from lighter levels.
3B) General Anesthesia (GA-P) (includes Deep)	Pediatric (<13)	Same as GA-A, applied to children.	Any route ; weight-based pharmacology; pediatric-sized equipment.	Requires pediatric airway expertise and pediatric advanced life-support capabilities.

NRS 631.055 “General anesthesia” defined. “General anesthesia” means a controlled state of unconsciousness, produced by a pharmacologic or nonpharmacologic method or a combination thereof, and accompanied by partial or complete loss of protective reflexes and the inability independently to maintain an airway and respond purposefully to physical stimulation or verbal commands.

(Added to NRS by [1989, 1739](#))

NRS 631.027 “Deep sedation” defined. “Deep sedation” means a controlled state of depressed consciousness, produced by a pharmacologic or nonpharmacologic method or a combination thereof, and accompanied by a partial loss of protective reflexes and the inability to respond purposefully to verbal commands.

(Added to NRS by [2001, 2691](#))

NRS 631.078 “Minimal sedation” defined. “Minimal sedation” means a minimally depressed level of consciousness, produced by a pharmacologic or nonpharmacologic method, that retains the patient’s ability to independently and continuously maintain an airway and respond normally to tactile stimulation and verbal command, and during which cognitive function and coordination may be modestly impaired, but ventilatory and cardiovascular functions are unaffected.

(Added to NRS by [2015, 3874](#))

NRS 631.079 “Moderate sedation” defined. “Moderate sedation” means a drug-induced depressed level of consciousness, produced by a pharmacologic or nonpharmacologic method or a combination thereof, during which:

1. The patient retains the ability to respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation;
2. Spontaneous ventilation is adequate and no interventions are required to maintain a patent airway; and
3. Cardiovascular function is usually maintained.

(Added to NRS by [2001, 2691](#); A [2015, 3874](#))



**DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS**

Review, Discussion, and Possible Approval/Rejection for Authorizing General Counsel to Draft Proposed NRS Regulations to Transition the License Renewal Date from June 30 to the DOB of the Licensee and Provide Back to the Full Board for Review for Future Legislation – NRS 631.190 (For Possible Action)

Pros:

- Stabilizes cash flow across 12 months instead of mid-April to early-July influx of cash; which can increase interest earned on a reserve balance which gets slowly reduced from late-August to early-April.
- Smooths workload across 12 months instead of June “cliffs,” reducing staff burnout and overtime.
- Reduces the collision of new graduate initial license application timing with large influx of renewals during the same period.
- Lowers risk of system crashes or payment bottlenecks near a single deadline.
- Improves turnaround times for renewals, CE audits, and deficiency follow-up.
- Easier for licensees to remember (birthday) and plan for renewal, potentially improving on-time compliance.
- Supports more predictable staffing and training needs year-round.

Cons

- One-time transition complexity (shorter initial terms, rule changes, communication campaign).
- IT and vendor changes needed to support DOB-based expirations and billing.
- Possible confusion for licensees during the changeover period.



INFECTION CONTROL INSPECTION/SURVEY FORM

Rev 12/2025

Dental Office Name:			Date of Inspection:	
Licensee/Owner Name:			Opening date:	
Address:			INSPECTOR(S) (1) _____ (2) _____	
City:	State: NV	Zip Code:	PURPOSE OF INSPECTION Initial Inspection: <input type="checkbox"/> Random Inspection: <input type="checkbox"/>	

COMPLIANCE CRITERIA

ITEMS INDICATED IN RED ARE NOTED AS CRITICAL DEFICIENCIES: Failure to meet these standards will result in a non-compliant status. This will require immediate corrective action and a re-inspection from the Board to be issued within 72 hours of this inspection.


ALL OTHER ITEMS ARE NOTED AS NON-CRITICAL DEFICIENCIES: Failure to meet these standards will result in a non-compliant status. This will require corrective action be submitted to the Board for review, and may require an in person re-inspection if applicable.

ALL ITEMS IDENTIFIED AS DEMONSTRATE: 1 team member will be selected by the Infection Control inspector to demonstrate the required task or process. The selected team member must demonstrate satisfactory knowledge, proper technique, and evidence of training in line with the written policies to the specific practice being evaluated.

ADMINISTRATIVE MEASURES

1	Infection Control Program Manual: Is there a written infection control program that is <u>specific</u> to this location and easily accessible by all staff available as a single printable document on your computer server? Is there an Infection Control Coordinator? Name: _____ **Prior to inspection, print a physical hard-copy of your IC Program for inspectors review.**	Y	N
2	<u>Bloodborne Pathogen Policy</u> : Are there written policies and procedures for preventing and controlling the transmission of bloodborne pathogens?	Y	N
3	<u>Bloodborne Pathogen Training</u> : Is there documentation of bloodborne pathogens training at the date of hire for each clinical staff member?	Y	N
4	<u>Critical & Semi-Critical Instruments</u> : Is there 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?	Y	N
5	<u>Annual Review</u> : Is there documentation of review of the infection control plan at least annually to ensure compliance with best practices?	Y	N
6	<u>Training Records</u> : Are there written policies and procedures for training records to be kept for a minimum of 3 years?	Y	N
7	<u>Corrective Action</u> : Are there written policies and procedures for corrective action for deviations from the infection control program including documentation of corrective actions taken?	Y	N
8	<u>Medical Conditions, Patients</u> : Does the practice have written policies to ensure compliance with NAC 441A.225 for reporting cases or suspected cases of communicable diseases to the state health authority? Does the policy include the list of reportable diseases from NAC 441A.040 and provide contact information for the applicable local health department?	Y	N
9	<u>Medical Conditions, Staff</u> : Are there written policies and procedures for <u>PROVIDERS/STAFF</u> with an acute or chronic medical condition(s) that may expose others to infection?	Y	N
10	<u>Vaccinations</u> : Are there written policies and procedures requiring that the following vaccinations be offered at no cost to all DHCP, and is a signed, confidential form documenting the offered vaccinations included in each employee's record? **Policy review only** <u>Vaccines offered should include:</u> 1. Hepatitis B 2. Influenza 3. MMR 4. Varicella 5. Tetanus <u>This form should consist of the following:</u> a. Informed Consent b. Exposure Risk c. Employee Acceptance/Declination d. Employee Signature	Y	N

ADMINISTRATIVE MEASURES cont.				
11	<u>Exposure Management</u> : Are there written policies and procedures regarding all occupational exposures, which include a post-exposure medical plan, and is this documented in a log?	Y	N	
12	<u>24/7 Contact Telephone Number</u> : Is a 24/7 contact telephone number for a qualified healthcare provider to handle occupational/post exposure care posted in an accessible area?	Y	N	
13	<u>Records</u> : Does the office maintain a confidential employee health record that includes any exposure and post exposure care received? **Y/N only – cannot review confidential records**	Y	N	
STANDARD PRECAUTIONS				
Section 1: Hand Hygiene				
14	<u>Hand Hygiene</u> : Are there written policies and procedures for hand hygiene, including documentation of training?	Y	N	
15	<u>Demonstrate</u> : Are team members adequately able to demonstrate appropriate hand hygiene techniques in line with the written policies and procedures?	Y	N	
16	<u>Accessible Supplies</u> : Are there supplies for hand hygiene accessible to employees at point of need? (e.g. soap, water, alcohol rub if used)	Y	N	
Section 2: Personal Protective Equipment (PPE)				
17	<u>PPE</u> : Are there written policies and procedures for proper use of personal protective equipment?	Y	N	
18	<u>Demonstrate</u> : Do health care workers display appropriate use of PPE?	Y	N	
19	<u>Occupational Safety</u> : Are there written policies and procedures and supplies available for personnel to wear puncture resistant heavy duty utility gloves when processing contaminated instruments? (not exam/patient care gloves)	Y	N	
20	Are gloves available in appropriate sizes, including both latex and latex-free options, utility gloves and sterile surgical gloves IF surgeries are performed in the office?	Y	N	
21	Is the level of masks appropriate to the procedure type performed in the office?	Y	N	
22	Are safety glasses with side shields and/or full-face shields, and/or loupes used in conjunction with safety glasses available?	Y	N	
23	Are disposable and/or laundered gowns available for use in the office?	Y	N	
Section 3: Respiratory Hygiene				
24	Are there written policies and procedures to manage patients who exhibit signs of respiratory infection/illness?	Y	N	
25	<u>Prevention</u> : Is there documentation of education and training on infection prevention measures to contain/prevent the spread of respiratory pathogens?	Y	N	
26	<u>Patient Resources</u> : Is there signage posted in the public lobby instructing proper cough etiquette? Are there appropriate supplies available for patients to minimize spread of illness? (e.g. tissues, masks, hand sanitizer)	Y	N	
Section 4: Sharps Safety				
27	<u>Occupational Safety</u> : Are there written policies and procedures for the handling and management of sharps and safe injection practices, as well as exposure, incident reporting forms, including a sharps injury log?	Y	N	
28	<u>Demonstrate</u> : Are safe recapping techniques/devices used and demonstrated by the staff?	Y	N	
29	Are approved sharps containers utilized, accessible and secured to counter/wall?	Y	N	
30	Do employees use engineering controls (e.g., forceps, hemostat, etc) to retrieve contaminated sharps from syringe, handles, trays or containers?	Y	N	
31	Are single use sharps (blades, needles, sutures, etc) disposed of after use?	Y	N	
32	Are sharps containers removed from service when full and processed appropriately?	Y	N	
Section 5: Sterilization and Disinfection of Patient-Care Items and Devices				
33	Is the instrument processing area CLEARLY marked and separated into "Dirty/Clean" sections following the outlined workflow: 1. Decontamination/Packaging 2. Sterilization 3. Storage	Y	N	
34	Is sterilization equipment available and fully functional?	Y	N	
	a. What is the number of working ultrasonic cleaners? _____	N/A	Y	N
	b. What is the number of working autoclaves? _____	N/A	Y	N
	c. What is the number of working flash steam sterilizers (statim)? _____	N/A	Y	N
	d. Other sterilizers: _____	N/A	Y	N
35	<u>Instrument transport</u> : Are there written policies and procedures outlining the entire sterilization process, beginning with transporting contaminated instruments through the completion of the sterilization process?	Y	N	

Section 5: Sterilization and Disinfection of Patient-Care Items and Devices cont.				
36	<u>Testing & Maintenance Logs:</u> Are appropriate testing and maintenance logs kept for each piece of equipment such as sterilizers, ultrasonic cleaners, eyewash station(s)?			Y N
37	<u>Instrument loading:</u> Are there written policies and procedures for proper sterilization loading techniques for each sterilizer?			Y N
38	<u>Sterilizer Testing:</u> Are there written policies and procedures for sterilization, biological monitoring, including how to handle a failed biological monitoring test?			Y N
39	Is biological testing of sterilizer(s) completed weekly according to manufacturer recommendations? Is testing performed on each cycle with a full bio burden load under normal processing parameters? (e.g. full load of instruments, not overloaded, using spore test strip or vial)			Y N
	a. Is in-office or mail-in biological testing used? _____		Y N	
	b. If in-office: Is a control processed for each test?		N/A Y N	
	c. Is this documented in a log?		Y N	
40	Are weekly biological monitoring logs kept for each sterilizer that include the machine tested, date tested, date test was sent, date test results were returned, and the results of testing?			Y N
41	Are weekly biological monitoring logs kept for a minimum of 3 years or since the office opened?			Y N
42	Are biofilm and organic matter removed from critical and semi-critical instruments using detergents or enzymatic cleaners prior to sterilization, following manufacturer recommendations that may require temperature and time?			Y N
43	Are single-use items, supplies or devices and items labeled with  discarded after use and not re-processed?			Y N
44	Are critical items (any instrument that penetrates soft tissue or bone) sterilized after each use?			Y N
45	Are heat tolerant handpieces sterilized after each use, such as high & low speed handpieces, prophylaxis angles and motors, ultrasonic and sonic handpiece and tips, air abrasion devices, air and water syringe tips, and motors, with exception of some electric type models?			Y N
46	Are semi-critical items sterilized after each use if not heat sensitive?			Y N
47	Are semi-critical items, such as digital sensors, intraoral cameras, intraoral scanners, and curing lights that are not heat- or chemical-tolerant, used with FDA-approved barriers and then cleaned and disinfected with an intermediate-level disinfectant between patients?			Y N
48	Are heat sensitive semi-critical item processed at a minimum of high-level disinfection or chemical sterilization after each use according to manufacturer's instructions?		N/A Y N	
49	<u>Demonstrate:</u> Is proper sterilization loading technique demonstrated by staff in accordance with the manufacturer guidelines?			Y N
50	Is event-related monitoring used to ensure package integrity according to manufacturer guidelines? Including folding along the dotted lines, reprocessing if compromised, proper storage, date stamp, sterilizer used, (if multiple sterilizers used) and cycle or load number?			Y N
51	Are sterilization cycles verified as follows: for pouches without cassettes and containers, by chemical/heat processes; for wrapped/closed cassettes and containers (either wrapped in pouches or not), by a class V integrator (also known as a multiple variable indicator or ISO-1440 Type V)?			Y N
Section 6: Environmental Infection Prevention and Control				
52	<u>Patient Operatory:</u> Are there written policies and procedures for aseptic management during patient care, including disinfection and environmental barrier protection?			Y N
53	Are appropriate barrier products available for patient use during procedures? (e.g. dental dams, protective eyewear, etc.)			Y N
54	<u>Radiographs:</u> Are there written policies and procedures in place to prevent cross contamination when taking and processing dental radiographs?			Y N
55	Are all clinical contact surfaces protected with barriers, especially areas that are difficult to clean?			Y N
56	Are there written policies and procedures for cleaning and disinfecting dental chair between patients?			Y N
57	Are barriers removed, followed by cleaning and disinfection of surfaces, before new barriers are applied between patients?			Y N
58	Are unprotected clinical contact surfaces cleaned and then disinfected after each patient using an EPA-registered hospital disinfectant, low-intermediate level, in accordance with the manufacturer's instructions?			Y N
59	Is an intermediate-level disinfectant with tuberculocidal (TB) claim used if surfaces are visibly contaminated by blood?			Y N
60	Are EPA registered disinfectants prepared following the manufacturer's instruction of use? (shelf life, storage, use of material compatibility)		N/A Y N	

Section 6: Environmental Infection Prevention and Control cont.				
61	<u>Biological Spills</u> : Are there written policies and procedures for decontaminating biohazardous fluids with necessary supplies present for decontamination?		Y	N
	a. Is there a biological spill kit?		Y	N
62	<u>Medical Waste</u> : Are there written policies and procedures for medical waste management and is the name telephone number of licensed waste hauler for regulated waste available?		Y	N
	a. Name of company used: _____		Y	N
	b. Is biohazardous waste stored properly?		Y	N
63	Housekeeping: Are there written policies and procedures for housekeeping surfaces (e.g., sinks, floors, walls, drawers, supply containers) to be cleaned and disinfected with an EPA-registered low to intermediate-level disinfectant regularly as a part of routine maintenance?		Y	N
	a. In house?	N/A	Y	N
	b. Hired? If yes, name of company: _____ Is there a written job description which outlines proper sharps safety and management?	N/A	Y	N
Section 7: Laboratory				
64	<u>Lab</u> : Are there written policies and procedures to maintain asepsis and prevent cross-contamination during dental laboratory procedures?		Y	N
65	Are splash shields and equipment guards used on dental laboratory lathes and grinders?	N/A	Y	N
66	Is fresh pumice and a sterilized or new rag wheel used for each patient?	N/A	Y	N
67	Are devices used to polish, trim or adjust contaminated intraoral devices disinfected and/or sterilized between patients?	N/A	Y	N
68	Are intraoral items such as impressions, bite registrations, prosthetics, crown and bridge, and orthodontic appliances cleaned and disinfected before lab procedures and before delivering to the patient?		Y	N
DENTAL UNIT WATER QUALITY				
69	Is sterile saline or sterile water coolant used for surgical procedures?		Y	N
70	<u>Water Lines</u> : Are there written policies and procedures for meeting EPA potable water standard and treating biofilm, including treating, testing and re-testing water lines?		Y	N
71	<u>Water Line Documentation</u> : Is documentation kept for dental unit water line testing to meet the potable water standard of EPA <500 CFU/ml?		Y	N
	a. Product used to treat water to meet the potable water standard: _____		Y	N
	b. How are the water lines tested? _____		Y	N
	c. Are the water lines being tested quarterly and is this documented in a log?		Y	N
72	<u>Line Flushing</u> : Are there written policies and procedures for dental unit water lines to be flushed for 2 minutes each day prior to use and in between patients for a minimum of 20 seconds?		Y	N
OTHER				
73	Are basic first aid products and equipment available?		Y	N
74	Are emergency medical supplies available? (Recommended to include: Nitroglycerin, Benadryl, Epinephrine Auto Injector for adult and child if applicable, Aspirin, Albuterol, Glucose, or Glucose substitute, Oxygen etc.)		Y	N
75	<u>Medical History Form</u> : Is a comprehensive and annually updated medical history form used to evaluate patients?		Y	N
76	Is there a working eyewash station available?		Y	N
77	Is an FDA-approved chemical sterilant being used, and are written policies and procedures in place to ensure proper exposure time is followed?	N/A	Y	N
78	Are all applicable label instructions followed on the FDA approved chemical sterilant including expiration date, shelf life, storage, safe use, disposal and material compatibility?	N/A	Y	N

OWNER/AUTHORIZED AGENT ACKNOWLEDGEMENT AND RECEIPT OF COPY

1. 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.
2. The owner of the dental practice hereby acknowledges that NAC 631.178 requires every licensee to comply with CDC guidelines related to infection control. One such CDC guideline states, "dental health care personnel who have contact with patients can also be exposed to persons with infectious [tuberculosis], and should have a baseline tuberculin skin test (TST), preferably by using a two-step test, at the beginning of employment." Based on same, I acknowledge that, during the interview process with prospective employees, I will enquire whether the applicant has had a recent negative tuberculosis test. The Board has determined that this screening question meets compliance requirements, as employers are not entitled to personal health information of applicants absent consent per the Health Insurance Portability and Accountability Act, and the CDC does not require an employer to provide or pay for tuberculosis testing.
3. 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.
4. If the initial inspection or random inspection is failed, the licensee has 72 hours to correct any defects before the Board schedules a re-inspection. If the re-inspection is also failed, the licensee may refer to NAC 631.1785 for information on further reinspection procedures and failure consequences.
5. In the event the deficiencies pose an immediate threat to the safety and/or welfare of the public, the President of the Board may, without further action of the Board, issue an Order of Summary Suspension pursuant to NAC 631.179(4). This action can be taken at any time, including after the initial inspection or before the re-inspection.

Receipt of a copy of the foregoing is hereby acknowledged:

By: _____

Print name: _____

This ____ day of _____, 20__ at ____:____.m.

Title and/or Position/Capacity: _____

NEVADA STATE BOARD OF DENTAL EXAMINERS



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

(TEMPORARY)
MODERATE SEDATION ADMIN PERMIT APPLICATION
(Administration of Moderate Sedation restricted to patients 13 years of age and older)
QUALIFICATIONS OF APPLICANTS

Sapir Cohen, DMD

APPLICANT NAME



NEVADA LICENSE (licensed 06/01/2025)

Yes

No

COMPLETED APPLICATION

Yes

No

PAYMENT RECEIVED (CC 11/07/2025 / \$ 750.00)

SEE ATTACHED

CERTIFICATION OF MINIMUM 60 HOURS APPROVED
COURSE STUDY DEDICATED EXCLUSIVELY TO THE
ADMINISTRATION OF MODERATE SEDATION:

Program: Meharry Medical College affiliated with DOCS Education

SEE ATTACHED

CERTIFICATION OF THE ADMINISTRATION OF A MINIMUM
OF 20 SEDATION CASES SUCCESSFULLY MANAGED BY
THE APPLICANT

Location: Happy Smiles, Salt Lake City Utah

Yes

No

Specialty:

CERTIFICATION OF SPECIALTY PROGRAM
COMPLETION APPROVED BY ADA CODA WHICH
INCLUDES EDUCATION/TRAINING IN MS
ADMINISTRATION (EQUIVALENT TO 60 HOURS/20 CASES)

Yes

No

ACLS CERTIFICATION IN COMPLIANCE WITH AMERICAN
HEART ASSOCIATION STANDARDS
ACLS VALID DATES: **10/08/2025 – 10/2027**

CERTIFICATION CAN INCLUDE LETTER FROM PROGRAM DIRECTOR ON INSTITUTION'S
LETTERHEAD (W/SEAL) OR CERTIFICATE OF COMPLETION BY RECOGNIZED SPECIALTY
BOARD PURSUANT TO NAC 631.190.

REVIEW CONTINUED – APPLICANT: Sapir Cohen, DMD

Review by Chair of Anesthesia Committee:

RECOMMEND APPROVAL: YES ☒ NO

IF NO,

Reasons/Concerns: _____

Josh Branco DMD

Josh Branco DMD (Nov 11, 2025 06:12:41 PST)

Joshua Branco, DMD
Anesthesia Chair

11/11/2025

Date

Review by Secretary-Treasurer:

APPLICATION APPROVED: YES NO

IF REJECTED,

Reasons/Concerns: _____

Daniel Streifel, DDS
Secretary-Treasurer

Date



Nevada State Board of Dental Examiners

6010 S. Rainbow Blvd., Bldg. A, Ste. 1

Las Vegas, NV 89118

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

MODERATE SEDATION ADMIN PERMIT APPLICATION

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

Name: Sapir Cohen

DENTAL EDUCATION

University/
College: Nova Southeastern University

Location: Davie, Florida

Dates attended: 8 / 18 to 5 / 13 / 22 | Degree Earned: DMD

BOARD APPROVED PROGRAM

Name/
Instructor: Dr. Henry Young DDS/DOCS Education

Location: Salt Lake City, UT

Dates attended: 9 / 2 to 10 / 11 / 25 | Certificate Granted: Moderate Sedation

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.

- 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

11/06/2025

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

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, Reihaneh G Mauer, hereby surrender my Dental / Dental Hygiene (circle one)
Print name

License number 54-13 on the November day of 05, 2025.

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:

Email address: mauer.peris@gmail.com

Home Phone: [REDACTED]

Cell Phone: [REDACTED]

Licensee Signature [Signature]

11/5/25
Date of Signature (must correspond with notary date)

State of NC

County of Buncombe

The statements on this document are subscribed and sworn before me this 5th day of November, 2025.

[Signature]
Notary Public

11.20.2027
My Commission Expires

Jackie D Stewart JR
Notary Public
Buncombe County, NC
My Commission Exp: 11/20/2027
202232700167

BEFORE THE NEVADA STATE BOARD OF DENTAL EXAMINERS

PETITION FOR REINSTATEMENT OF REVOKED LICENSE

COMES NOW Petitioner, Christopher Dean Davenport, and hereby petitions the Nevada State Board of Dental Examiners (“NSBDE”), pursuant to NRS 622A.410, to reinstate the following license, Nevada dental/dental hygienist/dental therapist license (circle correct license type), which was revoked by the Board on or about July 12, 2012. In support hereof, Petitioner affirms, attests and states that the following is true, accurate, and correct:

- 1) Petitioner submits herewith a properly completed, signed and notarized application for licensure on a form supplied on the NSBDE’s website along with the proper fees.
- 2) Petitioner satisfies all of the current requirements for issuance of an initial Nevada license as set forth in the relevant Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC).
- 3) Petitioner attests and states that , in this state of Nevada or any other jurisdiction:
 - a) Petitioner has not , during the period of revocation, violated any state or federal law governing the practice of dentistry, or the licensed occupation or profession or any related occupation or profession, and no criminal or civil action involving such a violation is pending against Petitioner; and,
 - b) No other regulatory body having jurisdiction over the practice of dentistry, or the licensed occupation or profession or any related occupation or profession has, during the period of revocation, taken disciplinary action against Petitioner, and no such disciplinary action is pending against Petitioner.
- 4) Petitioner acknowledges and agrees that Petitioner will satisfy any additional requirements for reinstatement of the license as prescribed by the NSBDE.
- 5) Petitioner acknowledges and agrees that if the NSBDE reinstates the license, NSBDE may place any conditions, limitations or restrictions of the license as the NSBDE deems necessary.
- 6) Petitioner acknowledges and agrees that Petitioner is aware of, and has read and understood, all of the provisions of NRS 622A.410.
- 7) Petitioner further acknowledges and agrees that the NSBDE may deny reinstatement of the license if Petitioner fails to comply with any provision of NRS 622A.410.



NEVADA STATE BOARD OF DENTAL EXAMINERS

2651 N Green Valley Parkway, Suite 104,
Henderson, Nevada 89014

nsbde@dental.nv.gov

Phone (702) 486-7044 | (800) DDS-EXAM | Fax (702) 486-7046

OFFICE USE ONLY

Date Received: **Received**

Payment Amount: **NOV 13 2025**

Staff Initials: **NSBDE**

LICENSURE STATUS CHANGE REQUEST

LICENSURE STATUS CHANGE REQUESTS ARE COMPLETE UPON THE BOARD'S PHYSICAL RECEIPT OF ALL REQUIRED INFORMATION AND NECESSARY PAYMENT. INCOMPLETE AND ILLEGIBLE APPLICATIONS WILL NOT BE PROCESSED.

A. CURRENT LICENSURE

PROVIDE YOUR CURRENT LICENSURE STATUS IN THE STATE OF NEVADA

CURRENT LICENSE STATUS

☐ Active ☐ Inactive ☒ Retired ☐ Disabled ☐ Revoked

CURRENT LICENSE TYPE

Dentistry Licenses:	<input type="checkbox"/> General Dentist	<input type="checkbox"/> Specialty Dentist	<input type="checkbox"/> Restricted Geographical
	<input type="checkbox"/> Restricted License	<input type="checkbox"/> Limited License Resident	<input type="checkbox"/> Limited License Instructor
	<input type="checkbox"/> Limited License Supervising CE		
Dental Hygiene Licenses:	<input checked="" type="checkbox"/> Registered Dental Hygienist	<input type="checkbox"/> Restricted Geographical	<input type="checkbox"/> Limited License Instructor
Dental Therapist:	<input type="checkbox"/> Dental Therapist	<input type="checkbox"/> Restricted Geographical	<input type="checkbox"/> Limited License Instructor
Expanded Function Dental Assistant (EFDA):	<input type="checkbox"/> EFDA	<input type="checkbox"/> Restricted Geographical	<input type="checkbox"/> Limited License Instructor

B. CONTACT INFORMATION

1. First Name:	Middle Name:	Last Name:	License No:
Christopher	Dean	Davenport	3131

NOV 13 2013

C. LICENSE STATUS CHANGE REQUEST**REQUESTED LICENSE STATUS**

NSBDE

Select the box you are requesting to update your current license status to:

☐ Active (Reactivation)

 ☐ Inactive

 ☒ Retired

 ☐ Disabled
If your license is currently at an ACTIVE status, provide the date your license became active and the date your license expires:

Active Licensure Dates: Begin: 7/1/12 DD/ YYYY Expiration: MM/ DD/ YYYY

If your license is currently at a NON-ACTIVE status (INACTIVE/RETIRED/DISABLED/REVOKED), provide the date your license became that status:

Non-Active Licensure Dates: Begin: 7/1/12 DD/ YYYY

D. REINSTATEMENT**ONLY COMPLETE IF YOU WANT TO CHANGE YOUR CURRENT LICENSE STATUS TO ACTIVE**

A fee of \$300.00 will be assessed to change an INACTIVE or RETIRED/DISABLED license to ACTIVE.

A fee of \$500.00 will be assessed to REVOKED licenses IN ADDITION to the renewal fee (the renewal fee cost will vary upon selecting an ACTIVE or Non-Active (INACTIVE or RETIRED/DISABLED license)

☒ **By selecting this box,** I hereby affirm and attest that I have completed the requisite continuing education hours per my license type (as detailed below) within the previous 12 months AND have attached proof of completion with this application

Dentists: 20 continuing education hours with at least 10 hours being live-instruction and 2 hours being in infection-control

Dental Hygienists: 15 continuing education hours with at least 7.5 hours being live-instruction and 2 hours being in infection-control

Dental Therapists: 18 continuing education hours with at least 9 hours being live-instruction and 2 hours being in infection-control

EFDAs: 2 continuing education hours being in infection-control

Provide your employment history during the period of your non-active (INACTIVE, RETIRED/DISABLED, or REVOKED license) license status below:

Employment History 1**Employment History 2**

Received

NOV 13 2025

NSBDE

Employment History 3			
Employer Name: N/A			
Street Address:	City	State	Zip Code
Start Date:		End Date	

**If your employment history during the period of your non-active license status exceeds the spaces provided above, please provide on an additional sheet of paper and attach to application.*

☒ **By selecting this box**, I hereby affirm I have attached proof of CPR certification (*online certification is NOT accepted*)

Select the box to the left of the option that applies to you and ATTACH the supplementary information needed:

☐ During the time my Nevada license was INACTIVE, RETIRED, OR REVOKED, I maintained an ACTIVE license and practiced OUTSIDE the State of Nevada.

☐ 1. Self-query report from the National Practitioner Data Bank. (no later than 90 days from application date)

☐ 2. Provide a certification letter(s) confirming good standing and no pending actions on your license from each state board where you practice

☐ 3. 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. Attach supporting documentation and written explanation.

☐ 4. Report any civil or criminal liabilities 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. Attach supporting documentation and written explanation.

☐ 5. Report any peer review appearances, attach supporting documentation and written explanation

☐ My license has been on INACTIVE, RETIRED, or REVOKED status for LESS THAN two (2) years **AND** I have NOT held an active license or practice outside the State of Nevada.

☐ 1. Submit a notarized petition for reinstatement.

☒ I have had a license on INACTIVE, RETIRED, or REVOKED status for GREATER THAN two (2) years **AND** have NOT held an active license or practiced outside the State of Nevada.*

**The Board may prescribe additional examinations be completed prior to reinstatement*

☒ 1. Submit a notarized petition for reinstatement.

My license is at a DISABLED status.*

☐ **If your license is at a DISABLED status, the Board may prescribe additional examinations be completed prior to reinstatement*

☐ 1. Submit a notarized petition for reinstatement.

☐ 2. Submit to the Board a statement signed by a licensed physician setting forth that you are able, mentally and physically, to practice dentistry

E. APPLICANT ATTESTATIONS

1. **By selecting this box**, I affirm that I am in compliance with the reporting requirements regarding service of claims or complaints of malpractice, felony or misdemeanor convictions, the suspension, revocation or probation of my license by another licensing jurisdiction or child support order (if applicable) pursuant to NAC 631.155 and NRS 631.225. If not previously reported, **FULL DISCLOSURE OF EACH SUCH CASE MUST BE ENCLOSED WITH THIS APPLICATION.**



2. By selecting this box, I authorize and empower the Nevada State Board of Dental Examiners or its agent to contact any person, firm, service, agency, or the like to obtain information deemed necessary or desirable by the Board to verify any information contained in my application to reactivate my inactive/retired license based upon this affidavit. I acknowledge I have a continuing responsibility to update all information contained in this application until such time as the Board takes action on this application. Failure of an applicant to update the information prior to final action of the Board is grounds for subsequent disciplinary action.	<input checked="" type="checkbox"/>
3. By selecting this box, I understand that I must renew my ACTIVE, INACTIVE, RETIRED/DISABLED license before the renewal deadline to maintain the status of my license. Failure to renew by the deadline will cause the license to go into suspended status. Licensee will incur a suspension fee of \$300.00 in addition to the renewal fee for the license status (INACTIVE, RETIRED/DISABLED) to reinstate license. Failure to renew your license within the 12-month suspension period will automatically cause your license to go into REVOKED status. Upon reinstating a REVOKED license, a licensee will need to submit a fee of \$500.00 in addition to the renewal fees for the INACTIVE, RETIRED/DISABLED, or ACTIVE status license.	<input checked="" type="checkbox"/>

Received

F. STATUS CHANGE FEES			
Those whose license is in REVOKED status must pay the revoked fee in addition to the renewal fee for the requested license type.			
REINSTATEMENT FEES (applies to all license types)			
<input type="checkbox"/> Reinstatement Fee for Inactive/Retired/Disabled Status			\$300.00
<input type="checkbox"/> Reinstatement Fee for Revoked Status			\$500.00
DENTAL RENEWAL FEES			
<input type="checkbox"/> Active General Dentist	\$600.00	<input type="checkbox"/> Active Specialty Dentist	\$600.00
<input type="checkbox"/> Active Restricted Geographical	\$600.00	<input type="checkbox"/> Active Limited License Dentist	\$200.00
<input type="checkbox"/> Active Restricted Dental License	\$100.00		
<input type="checkbox"/> Inactive Dentists (ALL)	\$200.00	<input type="checkbox"/> Retired/Disabled Dentist	\$50.00
DENTAL HYGIENIST RENEWAL FEES			
<input type="checkbox"/> Active Dental Hygienist	\$300.00	<input type="checkbox"/> Active Restricted Geographical	\$300.00
<input type="checkbox"/> Active Limited License	\$200.00		
<input type="checkbox"/> Inactive Dental Hygienist (ALL)	\$50.00	<input type="checkbox"/> Retired/Disabled Dental Hygienist	\$50.00
DENTAL THERAPIST RENEWAL FEES			
<input type="checkbox"/> Active Dental Therapist	\$600.00	<input type="checkbox"/> Active Restricted Geographical	\$600.00
<input type="checkbox"/> Active Limited License	\$200.00		
<input type="checkbox"/> Inactive Dental Therapist (ALL)	\$50.00	<input type="checkbox"/> Retired/Disabled Dental Therapist	\$50.00
EXPANDED FUNCTION DENTAL ASSISTANT RENEWAL FEES			
<input type="checkbox"/> Active EFDA	\$600.00	<input type="checkbox"/> Active Limited License	\$200.00
<input type="checkbox"/> Inactive EFDA (ALL)	\$50.00	<input type="checkbox"/> Retired/Disabled EFDA	\$50.00
OPTIONAL REQUEST			
<input type="checkbox"/> Name Change	\$25.00		

	<p>CONTINUE TO PAGE 5 AND SIGN AND ATTEST TO THE APPLICATION TO COMPLETE APPLICATION. APPLICATIONS THAT ARE NOT SIGNED ARE NOT COMPLETE AND WILL NEED TO BE RESUBMITTED.</p>	
---	---	---

By signing below, I hereby affirm and attest, that I have answered the above questions truthfully, accurately, and by my personally, the licensee so named on this form and so stating, under penalties of perjury, that all answers provided herein are provided willfully. I further state that I authorize and empower the Nevada State Board of Dental Examiners or its agents, staff, or appointed authority to contact any person, firm, service, agency, entity, or the like to obtain information deemed necessary or desirable by the Board to verify any information contained in my license renewal application and affidavit.

Licensee Signature:

Date:

Christopher Davenport

11/10/25

To submit your application to the Nevada State Board of Dental Examiners (NSBDE), choose one of the following options:

1. Email your completed application in a PDF format to nsbde@dental.nv.gov
2. Mail or drop off application at NSBDE office location:

2651 N Green Valley Parkway, Ste 104,
Henderson, NV 89014

Received
NOV 13 2025
NSBDE



American Red Cross
Training Services

Received
NOV 20 2025
NSBDE *W*

Certificate of Completion

Christopher Davenport

has successfully completed requirements for

Basic Life Support

Date Completed: 10/29/2025

Valid Until: 10/31/2027

Conducted by: Certification Classes, LLC.



To verify certificate, scan code or visit redcross.org/digitalcertificate and enter ID.

Learn and be inspired at LifesavingAwards.org



0240UM3



Nevada
DENTAL HYGIENISTS'
ASSOCIATION

Certificate of Attendance for Completing
7.25 Hours of Live Continuing Education
At the Nevada Dental Hygienists' Association Annual Session
October 25, 2025 8AM-5PM
College of Southern Nevada-Student Union

Received

NOV 20 2025

NSBDE

Amanda, Hill, RDH

**CURIOSITY REVIVED THE CAT: DIGGING INTO THE MOST IMPORTANT TRAIT FOR PATIENT
COMMUNICATION AND CAREER FULFILLMENT (1 CE)**

Carrie Wucinich, RDH

SMILES OF STRENGTH: WHAT EXPERIENCE TEACHES THAT BOOKS DON'T (1 CE)

Shane Young

LIFE & LEGACY PLANNING. WILLS, TRUSTS, AND ASSET PROTECTION TIPS (1 NON-CLINICAL CE)

Sponsor Seminar

*Signature, Phillips, Gum Hero, PDS, Young Innovations, Ivoclar, Young Law Group, Bluetree, Heartland,
Absolute, Haleon, Crest, Cloud, 3M/Solventum, Ultradent, Tepe, Lumadent, Exceptional Airways, Perio
Precise, All Things Toothy, Flaus, ReLeaf, Q-Optics, WestPaC, 2N Twice as Nice Uniforms/CPR Sisters (1.5 CE)*

Katrina Klein

**PROTECT YOUR MONEY MAKER!: PREVENTING MUSCULOSKELETAL INJURIES WHILE PROLONGING A PAIN
FREE CAREER AS A DENTAL HYGIENIST (1 CE)**

Lynsee Freeman

BRUSH UP ON YOUR FINANCES: BUILD WEALTH BEYOND THE CHAIR (.75 NON-CLINICAL CE)

Deborah Carrier, RDH

DRESSING FOR PROFESSIONALISM, COMFORT, & SAFETY: ELEVATE YOUR WORKPLACE PRESENCE (1 CE)

Attendee Signature

3131

NV/CA License #

nevadadentalhygiene@gmail.com | www.nvdha.com | (775) 453-0605

The Nevada Dental Hygienists' Association (NDHA) is a subsidiary of the American Dental Hygienists' Association (ADHA)
The ADHA is deemed an approved provider by the Nevada State Board of Dental Examiners. (NAC 631.173)
NDHA is a continuing education registered provider with the Dental Board of California. Permit RP 3969

Course Attendance Verification

Provider: Biologix Solutions LLC, P O Box 9219, Naperville, IL 60567
Provider ID: 352738 | <https://blxtraining.com> | (630) 984 0093 | admin@blxtraining.com

Participant's Name: **CHRISTOPHER DAVENPORT**

Course Title: **Infection Control for Dental Healthcare Professionals**

Contact Hours: **2 CE Hours**

Course Completion Date: **October 9, 2025**

Method: Online Independent Self-Study | Verification Code: BLXT01 | CA # 02-5003-22001 | Cert: 68E83A491367B

Participant's AGD PACE Membership #:

State License #:

Speaker: Dr. Tom Karginis, DMD | Location: Online (<https://blxtraining.com>)

Received
NOV 20 2025
NSBDE



The Biologix Solutions LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by the AGD for Fellowship/Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from 05/01/2027 to 04/30/2029. Provider ID # 352738


Authorized Signature



Keep this attendance verification for your records. **AGD Members:** Biologix Solutions LLC will submit attendance verification to the AGD on your behalf. Please allow at least 30 days for documentation of participation to be added to your transcript. **State Approvals:** Dental Boards throughout the United States and Canada accept CE from AGD PACE (National Approval) approved providers to re-licensure/renew as per board rules and regulations. Approved by the Dental Board of California (RP 5003), and Florida Board of Dentistry (CE Broker 50-12950)

Course Attendance Verification

Provider: Biologix Solutions LLC, P O Box 9219, Naperville, IL 60567
Provider ID: 352738 | <https://blxtraining.com> | (630) 984 0093 | admin@blxtraining.com

Participant's Name: **CHRISTOPHER DAVENPORT**

Course Title: **Prevention and Management of Periodontal Disease**

Contact Hours: **3 Hours**

Course Completion Date: **October 26, 2025**

Method: Online Independent Self-Study | Verification Code: BLXT24 | Certificate: 68FE671E95DBF

Participant's AGD PACE Membership #:

State License #:

Speaker: Dr. Robert Vaughn, DDS | Location: Online (<https://blxtraining.com>)

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NOV 20 2025
NSBDE


Authorized Signature



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Keep this attendance verification for your records. **AGD Members:** Biologix Solutions LLC will submit attendance verification to the AGD on your behalf. Please allow at least 30 days for documentation of participation to be added to your transcript. **State Approvals:** Dental Boards throughout the United States and Canada accept CE from AGD PACE (National Approval) approved providers to re-licensure/renew as per board rules and regulations. Approved by the Dental Board of California (RP 5003), and Florida Board of Dentistry (CE Broker 50-12950)

Certificate of Completion

This is to certify that

CHRISTOPHER DAVENPORT

has successfully completed an approved online continuing education activity in

TERRORISM RESPONSE FOR HEALTHCARE PROFESSIONALS

Course Completion Date: **October 26, 2025**

Contact Hours: **4**

Certificate: 68FE538526688

Approvals: Biologix Solutions is an approved provider of online continuing education (CE) for Nursing, Dentistry, Pharmacy, Physical Therapy, Occupational Therapy, Massage Therapy, Speech-Language Pathology and Audiology, Athletic Trainers, and other healthcare professionals. **Course Registration # 13-034.** Please visit <https://blxtraining.com/accreditations/> for a full list of approvals.


Biologix Solutions LLC



P. O. Box 9219, Naperville, IL 60567
www.blxtraining.com | admin@blxtraining.com

Received
NOV 20 2025
NSBDE

Course Attendance Verification

Provider: Biologix Solutions LLC, P O Box 9219, Naperville, IL 60567
Provider ID: 352738 | <https://blxtraining.com> | (630) 984 0093 | admin@blxtraining.com

Participant's Name: **CHRISTOPHER DAVENPORT**

Course Title: **Oral Health in Pregnant Patients**

Contact Hours: **2 CE Hours**

Course Completion Date: **October 26, 2025**

Method: Online Independent Self-Study | Verification Code: BLXT68 | Certificate: 68FE6DDFAE6BD

Participant's AGD PACE Membership #:

State License #:

Speaker: Dr. Ritika Agrawal MDS (OMFS), FHNSO | Location: Online (<https://blxtraining.com>)

Received
NOV 20 2025
NSBDE


Authorized Signature



The Biologix Solutions LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by the AGD for Fellowship/Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from 05/01/2027 to 04/30/2029. Provider ID # 352738



Keep this attendance verification for your records. **AGD Members:** Biologix Solutions LLC will submit attendance verification to the AGD on your behalf. Please allow at least 30 days for documentation of participation to be added to your transcript. **State Approvals:** Dental Boards throughout the United States and Canada accept CE from AGD PACE (National Approval) approved providers to re-licensure/renew as per board rules and regulations. Approved by the Dental Board of California (RP 5003), and Florida Board of Dentistry (CE Broker 50-12950)



Contract 99SWC-NV23-12771

Header Information

Purchase Order Number:	99SWC-NV23-12771	Release Number:	0	Short Description:	Software Value Added Reseller (SVAR) (NASPO ValuePoint - Arizona)
Status:	3PS - Sent	Purchaser:	Ryan Vradenburg	Receipt Method:	Quantity
Fiscal Year:	2023	PO Type:	Contract	Minor Status:	
Organization:	Statewide Contracts	Location:	9999 - Statewide Contracts		
Department:	SWC - Statewide Contracts	Entered Date:	09/13/2022 11:41:36 AM		
Alternate ID:	State of Arizona RFP BPM002338/99SWC-S1312	Retainage %:	0.00%	Discount %:	0.00%
Days ARO:	30	Actual Cost:	\$0.00		
Release Type:	Direct Release				
Contact Instructions:	Ryan Vradenburg - rvradenburg@admin.nv.gov				

Print Format:

Emergency purchase:	No
Federal funding:	Yes
Procurement type:	Goods (commodities, supplies, materials, or equipment)
Purchase from an existing contract (agency or statewide)?:	No
One-time or on-going purchase:	On-Going
Contract start date:	09/30/2022
Original contract end date:	04/24/2024
Current contract end date:	04/24/2027
State Purchasing facilitated solicitation:	Yes, State Purchasing facilitated
Statewide contract usage:	Permissive for State Agencies and Political Subdivisions
Administrative fee:	Yes
Agency Attachments:	SHI PA.pdf SHI Master Agreement.pdf 99SWC-NV23-12771 Cooperative Contract Links.pdf

Vendor Attachments:

Primary Vendor Information & PO Terms

Vendor: [VEN2822 - SHI International Corp](#)
 Amelia Jakubczyk
 1125 17th St.
 Suite 730
 denver, CO 80202
 US
 Email: amelia_jakubczyk@shi.com
 Phone: (303) 723-5256
 FAX: (866) 941-6845

Payment Terms: Net 30

Shipping Method: Best Way

Shipping Terms: F.O.B., Destination

Freight Terms: Freight Prepaid

PO

Acknowledgements:	Document	Notifications	Acknowledged Date/Time
	Purchase Order	Emailed to teamnevada@shi.com at 10/03/2022 03:23:46 PM	10/03/2022 03:23:37 PM
	Change Order 1	Emailed to teamnevada@shi.com at 09/30/2025 04:02:00 PM	

Contract Vendor Distributor List

Vendor ID	Vendor Name	Preferred Delivery Method	Vendor Distributor Status
VEN2822	SHI International Corp	Email	Active

Contract Controls

Contract Begin Date: 09/30/2022 **Contract End Date:** 04/24/2027

Cooperative Purchasing Allowed: Yes

Organization	Department	Dollar Limit	Dollars Spent to Date	Minimum Order Amount
ALL ORG - Organization Umbrella Master Control	AGY - Agency Umbrella Master Control	\$0.00	\$823,242.90	\$0.00

Item Information

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[1](#) [2](#) [3](#) [4](#) [5](#) [6](#) [7](#) [8](#) [9](#) [10](#)

Print Sequence # 1.0, Item # 1: NASPO ValuePoint Software Value Added Reseller (VAR). This contract is permissive and may be used by all public entities in the State of Nevada. When ordering, use the punchout if possible. A PDF copy of the quote must be attached to the requisition in NevadaEPro for review by EITS. If punchout is out-of-service orders can be placed as a release requisition. Purchases that include Professional Services require a service agreement approved by the Board of Examiners or Clerk of the Board. 3PS - Sent

NIGP Code: [208-80](#)
 Software, Microcomputer (Not Otherwise Classified)

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Total Cost
Quantity	1.0	\$0.00	EA - Each	0.00	\$0.00	\$0.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

Print Sequence # 2.0, Item # 2: Accounting/Financial: Bookkeeping, Billing and Invoicing, Budgeting, Payroll, Taxes, etc., Microcomputer 3PS - SentNIGP Code: 208-10

Accounting/Financial: Bookkeeping, Billing and Invoicing, Budgeting, Payroll, Taxes, etc., Microcomputer

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Total Cost
Quantity	1.0	\$0.00	EA - Each	0.00	\$0.00	\$0.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

Print Sequence # 3.0, Item # 3: Application Software, (Not Otherwise Classified), Microcomputer 3PS - SentNIGP Code: 208-11

Application Software, (Not Otherwise Classified), Microcomputer

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Total Cost
Quantity	1.0	\$0.00	EA - Each	0.00	\$0.00	\$0.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

Print Sequence # 4.0, Item # 4: Architectural Software, Microcomputer 3PS - SentNIGP Code: 208-12

Architectural Software, Microcomputer

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Total Cost
Quantity	1.0	\$0.00	EA - Each	0.00	\$0.00	\$0.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

Print Sequence # 5.0, Item # 5: Aviation Software, Flight Control, Ground Support, Testing, etc., Microcomputer 3PS - SentNIGP Code: 208-15

Aviation Software, Flight Control, Ground Support, Testing, etc., Microcomputer

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Total Cost
Quantity	1.0	\$0.00	EA - Each	0.00	\$0.00	\$0.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

1-5 of 110

1 [2](#) [3](#) [4](#) [5](#) [6](#) [7](#) [8](#) [9](#) [10](#)

Exit

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NOCODE_NV_AWS_PROD



Pricing Proposal
Quotation #: 26883989
Created On: 11/19/2025
Valid Until: 12/30/2025

NV-State Board of Dental Examiners

Adam Higginbotham

2651 North Green Valley Parkway
Henderson, NV 89014
United States
Phone:
Fax:
Email: ahigginbotham@dental.nv.gov

Inside Account Manager

Mike Gandera

290 Davidson Ave
Somerset, NJ 08873
Phone: 800-527-6389 x.555-3595
Fax:
Email: mike_gandera@shi.com

All Prices are in US Dollar (USD)

Product	Qty	Your Price	Total
1 Airtable Business Airtable - Part#: NPN-AIRTA-BUSIN-A Contract Name: NASPO SOFTWARE VALUE ADDED RESELLER (SVAR) Contract #: CTR060028 Subcontract #: 99SWC-NV23-12771 Coverage Term: 12/26/2025 – 12/25/2026	45	\$577.80	\$26,001.00
Total			\$26,001.00

Additional Comments

Thank you for choosing SHI International Corp! The pricing offered on this quote proposal is valid through the expiration date listed above. To ensure the best level of service, please provide End User Name, Phone Number, Email Address and applicable Contract Number when submitting a Purchase Order. For any additional information including Hardware, Software and Services Contracts, please contact an SHI Inside Sales Representative at (888) 744-4084. SHI International Corp. is 100% Minority Owned, Woman Owned Business. TAX ID# 22-3009648; DUNS# 61-1429481; CCR# 61-243957G; CAGE 1HTF0

The products offered under this proposal are resold in accordance with the terms and conditions of the Contract referenced under that applicable line item.

