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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 & ADMINISTRATIVE HEARING
AGENDA

Meeting Date & Time
Tuesday, March 10, 2026
5:00 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/81926753335>

Webinar/Meeting ID#: 819 2675 3335

Webinar/Meeting Passcode: 500228

PUBLIC NOTICE:

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

Members of the public may submit public comment in written form to: **Nevada State Board of Dental Examiners, 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014; FAX number (702) 486-7046; e-mail address nsbde@dental.nv.gov.** Written submissions received by the Board on or before **Monday, March 9, 2026, 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.

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

Persons/facilities who want to be on the mailing list must submit a written request every six (6) months to the Nevada State

Board of Dental Examiners at the address listed in the previous paragraph. With regard to any board meeting or telephone conference, it is possible that an amended agenda will be published adding new items to the original agenda. Amended Nevada notices will be posted in compliance with the Open Meeting Law.

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

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

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

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

1. Call to Order

a. Roll Call/Quorum

Board Members Present: President Dr. Ronald West, Dr. Joshua Branco, and Dr. Christopher Hock

Non-participant Board Staff Present: Director A.L. Higginbotham, Rebekah Vanleer, Marissa Kelley, and Arielle Cymerman

Hearing Participant/Attendees: General Counsel Andrea Barraclough, Senior Deputy Attorney General Todd Weiss, Dr. Wyatt Dannels (Respondent), Lisa Zastrow, Esq. (counsel for Respondent), Dr. Karen Kucharski (board expert witness), Dr. Daniel Orr (Respondent expert witness), Antonia Maya Uribe (Complainant), unidentified daughter of Complainant, and Richard Evans, certified court interpreter for Complainant

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

No public comments made.

3. New Business: (For Possible Action)

- a.** Administrative Hearing – Dr. Wyatt Dannels Case # 6743-2230 (License # 6743)– NRS 631.190; NRS 631.355; NRS 631.360 (For Possible Action)
 - i.** Opening Argument (Open Session)
 - ii.** Board Case in Chief (Open Session)
 - iii.** Respondent Case in Chief (Open Session)
 - iv.** Closing Arguments (Open Session)
 - v.** Panel Deliberations (Possible Closed Session)
 - vi.** Findings of Fact and Penalties [if applicable] (Open Session)

Before commencing the hearing's opening arguments, Board GC Ms. Barraclough notified the Hearing Panel of a joint settlement proposal. Hearing Panel Chairperson Dr. West allowed the settlement proposal to be presented. Ms. Barraclough stated the proposed settlement terms as: a finding that Dr. Dannels' note keeping was deficient; a finding that Dr. Dannel's work on the complainant's crowns and bridges was deficient and constituted performance outside the standard of care; that Dr. Dannels had to take a MOD mini-residency course in full tooth restorations 40 hours in length; that Dr. Dannels had to take 8 hours of note taking CE; that Dr. Dannels had to continue to use the MyTooth notes system, which he just bought, to help him better keep patient notes and records; that Dr. Dannels had to fully reimburse the complainant; and that Dr. Dannels would be supervised for 1 year in that he would present to the board 20 patient cases per quarter for review. After presenting the initial proposal, Ms. Barraclough turned the floor over to Ms. Zastrow (Respondent's counsel) for comment.

Ms. Zastrow acknowledged that the proposal contained agreed upon findings of fact for purposes of settlement, however, she reserved the right to dispute all facts if the settlement was not accepted and the matter proceeded to hearing. Ms. Zastrow also noted that the Board's continual treatment of this matter as an "implant case" was factually inaccurate, because it was a bridge and crown cases, and because implants were Dr. Dannels primary focus and he did not have any implant-specific complaints. Ms. Zastrow also made a preliminary motion to recuse this Hearing Panel who would decide whether to make a counteroffer and replace it with another Hearing Panel in the event the matter did not settle. This motion was tabled until the end of the settlement discussion to see if it remained germane.

Dr. West initially noted basic agreement with most terms but thought added terms were appropriate. Dr. Branco noted a disagreement with the characterization that implants were not involved in this case, and to that end, he wanted some continuing education regarding implants to be added. Dr. West agreed with that sentiment. Dr. Hock agreed that a surgical implant component was needed for the CE as well. In addition to the MOD course, the Hearing Panel proposed 24 hours of implant CEs, and Dr. West felt CE on guided surgery would help Respondent.

They agreed to the 8 hours of note taking CE and the full patient reimbursement.

Regarding the supervision component, Dr. West wanted conditions on the 20 cases presented to the Board quarterly for review; namely Dr. West also suggested that the supervision period not commence until after the MOD course was completed. Dr. West further suggested that Dr. Dannels not perform crowns and bridges until after the 24-hour implant CE is complete. Dr. Hock added that he wanted a timeline for when these CE courses needed to be complete. He suggested single unit planned crowns are fine so long as they do not change the BDO or occlusion can still be performed by Dr. Dannels before completion of the CE, but that Respondent should not even do single unit implants until after the implant CE is complete. Dr. Branco also said he would be fine with a comparable 40-hour restorations course in lieu of the MOD course specifically, which Dr. West and Dr. Hock agreed with.

Dr. Hock revisited the supervision component, and Dr. West clarified he wanted the 20 cases per quarter to contain 15 crown and bridge cases and at least 5 implant cases, with 5 being single unit crown and bridge cases with 10 bring multi-unit crown and bridge cases. Dr. Hock and Dr. Branco agreed this was reasonable. Dr. West recapped the current status of their counteroffer, as noted above.

Ms. Zastrow argued prior to speaking with her client off the record that preventing Dr. Daniels from performing his usual implant and complex restorative work until completing CE would effectively amount to a suspension and represent a significant, unanticipated change to the agreement. She argued Dr. Dannels was an asset to the community and assisted the Hispanic community, and these communities would suffer if he cannot do what he does.

Dr. West stated the credentials of the Hearing Panel, noting that the three of them have specific implant experience and so can be fair and knowledgeable in judging the case.

After a break to discuss the offer with Dr. Dannels, Ms. Zastrow reiterated her concerns regarding de facto suspension, though she stated otherwise they would be in agreement with the additional terms.

As an alternative to not performing implants pending CE completion, Ms. Barraclough suggested the Board consider some sort of probation in lieu. Dr. West addressed Ms. Zastrow's arguments, noting that the imaging does show implant issues, so there is a reason they are adding that no performance requirement. They can speed up the timeline to get him practicing sooner, but he needs to not perform implants until the implant CE is completed. Dr. West did mention probation as a possible term but would want it to be in addition to no performance requirement. Dr. Branco agreed that he wanted no performance until the CE is completed, but he could keep doing single units and bread-and-butter dentistry. Dr. Hock also noted this is not a suspension; Dr. Dannels can start again on implants as soon as he takes the CE.

Ms. Zastrow noted that if they were going to go with the original offer, they would want no formal probation. Dr. West noted that probation was just stated as an alternative, and Dr. Dannels would not be on probation if he accepted the practice limitation.

Dr. West further clarified Dr. Dannels could do quadrant dentistry (where BDO and occlusion are not changed) so for instance a 3-unit bridge would be okay. Dr. West then solidified the time frames for the CE, stating the implant CE needed to be done in 4 months; Dr. Hock and Dr. Branco agreed. Dr. West stated the notetaking CE should also be done in 4 months. As to the longer MOD course, Ms. Barraclough noted that standard stipulation language it to complete CE within 1 year. They could just use the standard language since Dr. Dannels was likely to get these CE done way before that so he could get back to crown and bridge work.

Dr. West summarized the Board's counteroffer, stating:

- 1) that Dr. Dannels had to take a MOD mini-residency course in full tooth restorations 40 hours in length or an equivalent 40-hour course with a 1-year time limit for completion;
- 2) that Dr. Dannels had to take 8 hours of notetaking CE with a 4-month time limit;
- 3) that Dr. Dannels had to continue to use the MyTooth notes system;
- 4) that Dr. Dannels had to fully reimburse the patient within 6 months;
- 5) 24 hours of implant CE with treatment planning and guided surgery topics included with a 4-month time limit; and
- 6) supervision for 1 year wherein Dannels provides the Board 20 patient cases per quarter for review of the types they already talked about. The supervision can start immediately, however, at least three of the total mouth implant cases need to be submitted for review after the completion of all CEs, even if that exceeds the 1-year supervision.

Dr. Hock and Dr. Branco agreed these were the terms.

Ms. Barraclough asked for an order of administrative costs which will be tallied by the Board's airtable software; the Hearing Panel agreed and ordered administrative costs.

Ms. Zastrow asked what happens if Dr. Dannels does not have patient examples in any given quarter for the type of cases needed; Dr. West noted that she can let us know that but ultimately he is responsible to present the type of cases required, otherwise there will be no supervision deadline or it will be after all types of cases are ultimately presented. After this explanation, Dr. Dannels as respondent indicated he was accepting the Hearing Panel's counteroffer.

Dr. West noted that the Board's goal is to help dentists and not judge dentists, so the Board is open to taking questions before a dentist wanders off into potentially grey area.

Ms. Barraclough noted that the complaining patient is present and wants to make public comment at the end.

A motion was made to accept the settlement proposal by Dr. West and seconded by Dr. Branco.

All Hearing Panel Members voted 'AYE'.

Motion passed.

- 4. 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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Public Comment made by the patient (via certified court interpreter):

I understand that this dentist has said he supports the Hispanic community. I am part of that community, but my experience with him has been very different. Instead of receiving proper care, I believe his treatment caused serious harm to my health. He placed dental implants that became infected and caused damage to my muscles. He did not take responsibility for what happened and did not follow up with me to check the implants. Eventually, the implants fell out. I had to seek treatment at the College of Southern Nevada dental clinic, where they tightened them. The surgeon who evaluated me told me the crown work was not of acceptable quality and that there had been infection. Because of this treatment, I suffered severe muscle pain and nerve damage for about two years. The pain was so severe that I had to go to the emergency rooms. I lived with constant pain until I was finally able to see a specialist last year. This situation also caused serious financial hardship. I spent money I did not have to try to treat the pain, and I even had to make and sell tamales to afford care. I am sharing my experience because I believe patients deserve safe and careful treatment and do not want others to have to suffer the same harm.

- 5. 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.

A motion to adjourn was made by Dr. Branco and seconded by Dr. Hock.

No discussion.

All members voted 'AYE.'