



Arizona State Board of Dental Examiners

Substantive Policy Statements

October 2009



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Agency Substantive Policy Statement #1

Infection Disease Control In The Dental Office

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

The Arizona State Board of Dental Examiners has adopted the most current State OSHA required procedures for worker protection and the most current CDC recommended Infection Control Practices for Dentistry as the guidelines for infection control. Complaints will be evaluated on the criteria of the named documents listed below.

The purpose of this screening evaluation is to determine whether practices are in place which conform to standards set by State OSHA and recommended by the Centers for Disease Control.

This screening does not include a detailed and comprehensive assessment of whether all work practices are in full compliance.

INFORMATION SOURCES COST – FREE

“GUIDELINES FOR INFECTION CONTROL IN DENTAL HEALTH-CARE SETTINGS – 2003”

DEVELOPED BY:

The U.S. Department of Health and Human Services
Centers for Disease Control and Prevention (CDC)

TO OBTAIN:

Telephone (404) 332-4552
<http://www.cdc.gov/oralhealth/infectioncontrol/guidelines>

“OCCUPATIONAL EXPOSURE TO BLOODBORNE PATHOGENS” (29CFR 1910.1030)

Published in the Federal Register on December 6, 1991 (4)

DEVELOPED BY:

Department of Labor – Occupational Safety and Health Administration
(OSHA)

TO OBTAIN:

Occupational Safety and Health Administration (OSHA)
Telephone: (212) 466-2481 or in Arizona (602) 640-2007

**Adopted by the Board April 8 & 9, 1994
Revised by the Board February 6, 2004**

ARIZONA STATE BOARD OF DENTAL EXAMINERS

PROCEDURES FOR ANESTHESIA ON-SITE EVALUATIONS AND INFECTIOUS DISEASE CONTROL INSPECTIONS

1. Present photo identification and Dental Board business card upon entry of the premises. (*NOTE: Your driver's license will be sufficient for photo I.D.*)
2. Take a copy of the *current Statutes and Rules* in case the licensee has any questions. **DO NOT** leave your copy with the licensee, he/she may contact the Board to obtain their own copy.
3. Present the Notice of Inspection Rights Disclosure Verification Form to the licensee or their designated representative for the premise.
4. Ask the **licensee** if they would like an authorized representative to accompany the inspector/evaluator. Do not delay the inspection if this person is not available unless it is a reasonable request to wait a short time and there is no potential for altering the premise or removing evidence. No advance notice is required.
5. Have the **licensee** or their on-site representative sign and date the Notice of Inspection Rights - Disclosure Verification form. If they refuse to sign it, check the appropriate box. If neither is present, check the appropriate box.
6. **Agency Inspector/Evaluator** - sign and date the Notice of Inspection Rights - Disclosure Verification Form.
7. Complete the Inspection/Evaluation.
8. Prepare an Inspection/Evaluation Report and note all deficiencies identified during the inspection/evaluation.
9. Give a copy of the Inspection/Evaluation Report **and** the Disclosure Form to the licensee or their on-site representative *preferably* at the time of the inspection, **OR** the Board staff will provide a copy within 30 working days after the inspection.

6. Each person interviewed during this inspection will be informed that statements made by the person may be included in the inspection report.
7. Each person whose conversation is tape recorded during the inspection will be informed that the conversation is being tape recorded.
8. If you have questions regarding this inspection, you may contact Nancy Chambers, Deputy Director at (602) 242-1492 ext.2006.
9. You have the right to appeal a final decision of the [agency] if any administrative order is issued or other enforcement action is taken based on the results of this inspection. Administrative hearing rights are found in A.R.S. §41-1092 *et seq.*, and rights relating to appeal of a final agency decision are found in A.R.S. §12-901 *et seq.*
10. If you have questions regarding your right to appeal an enforcement action taken by the agency based on the results of this inspection, you may contact:

AZ State Board of Dental Examiners representative: Elaine Hugunin 602.242.1492 x2001.

Office of Ombudsman-Citizens Aide, 1101 West Washington Street, Phoenix, AZ 85007; (602) 255-1932.

VERIFICATION

Upon entry onto the premises for this inspection, the agency inspector/investigator identified above presented documentation that they are agency employees or authorized agents and photo identification and reviewed with me the above Notice of Inspection Rights. I have read the disclosures above and am notified of my inspection and due process rights as listed above. I understand that while I have the right to decline to sign this form, the agency representatives may nevertheless proceed with the inspection/examination.

Date _____

Signature and Title of Licensee or Authorized On-Site Representative _____

Name of Licensee or Authorized on-site representative refused to sign this form.

Name of Licensee or Authorized on-site representative is not present.

Signature of Inspector/Investigator

Date

	<u>YES</u>	<u>NO</u>	<u>N/A OR UNKNOWN</u>	<u>SEE COMMENTS</u>
9. Is aseptic technique performed adequately (avoidance of cross contamination during all procedures)?				
a. By Dentist	[]	[]	[]	[]
b. By Dental Hygienist	[]	[]	[]	[]
c. By Dental Assistant	[]	[]	[]	[]
10. Is there a puncture resistant Sharp's container (red and labeled) located as close to treatment area as possible?	[]	[]	[]	[]
11. Are all items that enter the mouth either disposed of or autoclaved?	[]	[]	[]	[]

B. X-RAY ROOM

1. Is the x-ray unit disinfected after each patient encounter or protected with disposable coverings?	[]	[]	[]	[]
2. Is a method used to prevent cross contamination of x-ray films (contaminated packet envelop vs. clean film) during processing of films?	[]	[]	[]	[]

C. CENTRAL STERILIZATION

1. Is there a clean area and dirty area?	[]	[]	[]	[]
2. Is the autoclave/chemiclave monitored on a <u>weekly</u> basis for effectiveness by using a biological monitor?	[]	[]	[]	[]

D. DISPLAY OF LICENSE(S)

1. Is the current Triennial Certificate for each licensed Dentist prominently displayed?	[]	[]	[]	[]
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Agency Substantive Policy Statement #2

Community Service Guidelines

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

1. TYPES OF CASES APPROPRIATE FOR COMMUNITY SERVICE:

- false statements
- billing issues
- advertising issues
- non-compliance with Board Orders
- inadequate history, x-rays, or treatment plan
- fraudulent billing
- communication problems
- conviction of crime

The Board would follow the classification and ranking of complaints as outlined in the Board's *Guidelines for Imposing Sanctions on Licensees and Certificate Holders*. Class 1's and the violation of A.R.S. § 32-1201(21)(n) (this is a Class 2) directly related to egregious quality of care would be carefully scrutinized and may not be considered for Community Service.

Violations regarding the remainder of Class 2's and 3's may be considered for Community Service.

2. COMMUNITY SERVICE REQUIREMENT DONE IN HOURS

Community Service requirements shall be tracked in **hours**.

SCALE OF HOURS REQUIRED WITH TIME FRAME TO COMPLETE:

4 HOURS PER MONTH

MINIMUM HOURS REQUIRED: 16 HOURS DONE IN 4 MONTHS
MAXIMUM HOURS REQUIRED: 48 HOURS DONE IN 12 MONTHS

3. COMMUNITY SERVICE PERFORMED IN LICENSEE'S/CERTIFICATE HOLDER'S OFFICE:

The Board recognizes that some clinics may request the licensee/certificate holder to perform the community service in the licensee's/certificate holder's office in lieu of a facility operated by the clinic. Such community service is acceptable provided it is done in affiliation with an approved community service clinic and the licensee/certificate holder complies with all of the community service requirements and responsibilities.

4. PROCEDURES FOR COMPLYING WITH COMMUNITY SERVICE ORDERS:

➤ Licensee/Certificate holder will receive with their Board Order/Consent Agreement (BO/CA):

- (1) A list of approved clinics with contact/telephone number; and
- (2) Verification form (see attached sample).

➤ Licensee/Certificate Holder will be responsible for:

- (1) Contacting their clinic of choice,

- (2) Providing clinic with a copy of their BO/CA,
- (3) Scheduling their required hours through the clinic representative, and
- (4) Submitting the verification form to the Board upon completion of hours.
- (5) Any other documentation the clinic may require.

➤ The Clinic:

- (1) Administrator has the right to refuse the request, and
- (2) Representative will sign the verification form (provided by the licensee/certificate holder).

➤ The Board Staff:

- (1) Monitor and enforce the time allowed for completing the Community Service.

5. **VERIFICATION OF COMPLETION OF ASSIGNMENT:**

Pre-printed form on Board letterhead with "fill-in" blanks and a place for signatures.



ARIZONA STATE BOARD OF DENTAL EXAMINERS
4205 North 7th Avenue, Suite 300 • Phoenix, Arizona 85013
Telephone (602) 242-1492 • Fax (602) 242-1445

COMMUNITY SERVICE TIMESHEET

LICENSEE/CERTIFICATE HOLDER: _____
(fill in name)

CASE NUMBER: _____

I CERTIFY THE ABOVE HOURS WERE COMPLETED AS DOCUMENTED:

RECORD OF COMMUNITY SERVICE			
CLINIC NAME	DATE OF SVC	HRS COMPLETED	CLINIC INITIALS

Licensee/Certificate Holder

Representative of Clinic

ARIZONA STATE BOARD OF DENTAL EXAMINERS

***APPROVED CLINICS
FOR COMMUNITY SERVICE***

CALVARY REHABILITATION CENTER

Substance Abuse Treatment Services

720 East Montebello

Phoenix, AZ 85014

CONTACT: *Chris Diamond, Executive Director - 602.279.1468*

CENTRAL ARIZONA SHELTER SERVICES

1209 West Madison

Phoenix, AZ 85007

CONTACT: *Kris Volcheck, DDS, MBA – 602.256.6945 Ext. 3019*

DAVE PRATT CLINIC

1601 w. Sherman Street

Phoenix, AZ 85007

CONTACT: *Donna Martin – 602.954.8182*

JOHN C. LINCOLN HOSPITAL DENTAL CLINIC

9229 N. 4th Street

Phoenix, AZ 85020

CONTACT: *Kathy Fitzgerald - 602.870.6060 Ext. 1895*

NORTH COUNTRY COMMUNITY HEALTH CENTER

2304 N. Rose

Flagstaff, AZ 86001

CONTACT: *Dr. Kim Barnes – 928.213.6100*

ST. ELIZABETH OF HUNGARY DENTAL CLINIC

140 W. Speedway

Tucson, AZ 85705

CONTACT: *Maria Acuna - 520.628.7871*

ST. VINCENT DE PAUL FREE MEDICAL/DENTAL CLINIC

420 W. Watkins

Phoenix, AZ 85002

CONTACT: *Ken Snyder, DDS - 602.261.6872*

SALVATION ARMY ADULT REHABILITATION SERVICES

15 E. Pima

Phoenix, AZ 85004

CONTACT: *Rosemary Aberenthy, RN, LISAC – 602.256.4512*

THE NEIGHBORHOOD CHRISTIAN CLINIC

1929 W. Fillmore St., Building C

Phoenix, AZ 85009

CONTACT: *Joseph P. Lindner, DDS – 602.258.6008*

Revised by Statute change September 21, 2006

Revised by the Board August 3, 2007

Revised by Statute change September 26, 2008

Revised by the Board October 9, 2009

Agency Substantive Policy Statement #3

Continuing Education Extensions

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

- ❖ An extension will be granted for extraordinary circumstances as outlined in AAC R4-11-1202(D).
- ❖ Written request for an extension must be received *prior to the June 30 renewal deadline*.
- ❖ Upon receipt of written request, the licensee may be asked to complete the attached CE Extension Request form.
- ❖ Length of extension to be considered case-by-case. An extension of one year is excessive. A reasonable extension length is three to six months.
- ❖ The Continuing Education Audit for Dentists or the Dental Hygiene Committee will meet in mid-July each year to consider the extension requests. The Committee will make a recommendation to the Board at the August Board Meeting. The committee chair may direct staff to forward extension requests directly to the Board for consideration.
- ❖ Prior to the July meeting, the licensee requesting the extension will be sent a letter, which explains the procedure and that if their extension is granted, it will probably be for three months.
- ❖ Upon completion of all CE requirements, the licensee will be required to submit a renewal application, completed Continuing Education Affidavit , and triennial with late fees.
- ❖ If the licensee is currently practicing in Arizona, failure to fulfill all CE requirements within the extension period will result in a committee recommendation that an investigation be opened by the Board for failure to comply with CE requirements.

Revised by the Board June 7, 2002



ARIZONA STATE BOARD OF DENTAL EXAMINERS

4205 North 7th Avenue, Suite 300 • Phoenix, Arizona 85013

Telephone (602) 242-1492 • Fax (602) 242-1445

Dear Licensee:

We are writing in regard to your request for an extension on Continuing Education (CE) requirements. Please take a moment to review the enclosed Substantive Policy to ensure that you understand the entire CE extension process.

In an effort to assist the Board in determining your eligibility for an extension you are required to complete the enclosed form and return it *within 15 days of receipt of this letter*.

If you have any further questions regarding this matter, please call Nancy Chambers, Deputy Director at 602/242-1492.

Sincerely,

Elaine Hugunin
Executive Director

Enc: Substantive Policy #3
CE Extension Request Form

CONTINUING EDUCATION EXTENSION REQUEST

LICENSEE NAME: _____

REASON FOR REQUEST (please check one):

Medical (attach physician verification)

Military Service (provide details including length of service)

Dental/Religious Missionary Activity (provide details including length of stay)

Residence in a foreign country (provide details including length of service)

Other (please specify) _____

NUMBER OF CE HOURS ALREADY COMPLETED TOWARD THIS RENEWAL:

Signature

Date

Agency Substantive Policy Statement #4

Continuing Education Random Audit

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- ❖ Each year 2% of renewing licensees will be audited. Using this percentage approximately 25 dentists and 15 dental hygienists will be audited. If randomly selected, new licensees are removed from the audit list. Additional licensees may be removed on a case-by-case basis; i.e. those going into retiree status, those notifying the Board that they do not intend to renew.
- ❖ Starting in 1998, a letter will be mailed to all licensees being audited by August 15. The letter will state that documentation of attendance must be submitted to the Board within 60 days of receipt as outlined in R4-11-1202(H).
- ❖ The audit responses will be reviewed by either the Continuing Education Audit for Dentists or the Dental Hygiene Committee. Each Committee will complete an Audit Compliance Report (attached) for each audit and submit it to the Board with recommendations for approval or further investigation.
- ❖ Submission of the renewal packet requires the licensee to certify that Continuing Education requirements have been met *prior* to license renewal. Therefore, failure to provide adequate documentation of attendance in a timely manner in response to an audit will result in the Committee's recommendation that an investigation be opened by the Board for failure to comply with CE requirements.
- ❖ The following sanctions may be considered in any case of failure to comply with Continuing Education requirements:

Letter of Concern
\$150 Administrative Penalty
Completion of all CE requirements IN ADDITION to those required for the current triennial.

Revised by the Board May 4, 2001

Continuing Education Audit Compliance Report

LICENSEE: Sample DDS DMD RDH

STAFF REVIEW:

60 Hours verified 12 Hours deficient

DEFICIENCY CODE:

	A	B	C	D	E	F
response due 10/15, received 11/12	X					
2/22 Perio Concerns		X				
7/21 Street Drugs.....			X			
Infectious Disease				X		
Practice Management - 21 hours					X	
Dental Risk Mgmt - 2 hours*				X		X

inappropriate category

Comments: * Causes shortage in Dental Health category

- A – No response to audit
- B – Documentation missing/inadequate
- C – Courses taken outside triennial period
- D – Insufficient number of hours for category
- E – Excessive number of hours for category
- F – Other

COMMITTEE RECOMMENDATION:

 APPROVE as submitted

 X FORWARD for investigation based on identified deficiencies.

Committee Member Signature

Date

Agency Substantive Policy Statement #5

Guidelines for Imposing Sanctions of Licensees and Certificate Holders

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Pursuant to A.R.S. § 32-1263.01, the Board may take the following disciplinary action, alone or in combination, if it finds the licensee or certificate holder has violated the Dental Practice Act. The discipline the Board imposes should reflect the 1.) Egregiousness of the act, and 2.) Prior acts, directly or indirectly, relating to the quality of care, and other violations of the Dental Practice Act. Factors the Board may consider when determining the “egregiousness” of the violation and the type(s) of discipline to impose include:

1. The severity of the offense.
2. The danger to the public.
3. The number of repetitions of offenses or number of patients involved.
4. The length of time since the violation.
5. The number of times the licensee or certificate holder has been previously disciplined.
6. The actual damage, physical or otherwise, caused by the violation and the reversibility of the damage.
7. The deterrent effect of the penalty imposed.
8. Any efforts of rehabilitation by the licensee or certificate holder.
9. The actual knowledge of the licensee or certificate holder pertaining to the violation.
10. Attempts by the licensee or certificate holder to correct or stop the violation or refusal by the licensee or certificate holder to correct or stop the violation.
11. Related violations against the licensee or certificate holder in another state including findings of guilt or innocence, penalties imposed, and penalties served.
12. Sanctions imposed for related offenses.

13. Any other relevant mitigating or aggravating factor under the circumstances.

CLASSIFICATION AND RANKING OF COMPLAINTS

A violation of the Dental Practice Act, notwithstanding any classification, varies in severity depending upon the evidence. The following classifications are merely tools for processing complaints the Board receives to protect the dental health, safety and welfare of the public. The President of the Board or his/her designee will assign complaints priorities according to the following three classifications.

CLASSIFICATION NUMBER ONE :

Complaints assigned to Classification Number One pose an immediate danger to the patient and the dental health, safety and welfare of the public and receive the highest classification. The Licensee or certificate holder who is being investigated under this category is currently practicing in Arizona. The investigation is conducted in an expeditious and thorough manner. Depending upon the potential continuing harm to the public and after immediate investigation, an emergency Board meeting is scheduled at which the Board determines the disposition of the complaint. If the harm is not immediate to the public, the complaint proceeds through the informal interview process.

CLASSIFICATION NUMBER TWO:

Classification Number Two complaints are determined not to have an immediate affect on the patient or the dental health, safety and welfare of the public. The licensee or certificate holder is investigated or participates in mediation and the complaint is presented to the Board in approximately three months provided no unusual circumstances arise, such as postponements, winter visitors unavailability, etc. The bulk of the complaints that the agency receives fall into this category.

CLASSIFICATION NUMBER THREE:

Complaints the Board receives over which it has no jurisdiction fall into Classification Number Three. These complaints may be terminated for lack of jurisdiction.

The following chart exhibits classifications of unprofessional conduct including various characteristics of violations. These characteristics are not exhaustive but merely illustrations. The Board adjudicates each case on its own merits.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(b)	Illegal use of controlled substances, overdose. Practicing dentistry while impaired.	Use of controlled substances that may be used for producing hypnotic effects or alcohol to the extent that it affects the ability of the licensee or certificate holder to practice the profession.	1	Revocation, suspension, censure, stipulation agreement with probation and monitoring.
A.R.S. § 32-1201(21)(c)	Diversion of Controlled substances, prescribing for family and friends for other than dental therapeutic purposes, self-use of controlled substances.	Prescribing, dispensing or using drugs for other than accepted dental therapeutic purposes or for other than medically indicated supported therapy in conjunction with managing a patient's dental needs.	1	Revocation, suspension, censure, stipulation agreement with probation and monitoring.
A.R.S. § 32-1201(21)(d)	Treatment resulting in permanent or irreversible injury or damage to the patient; endangering the patient's health, life and well being.	Gross malpractice or repeated acts constituting malpractice.	1	Revocation, suspension with additional terms such as probation, censure, administrative penalty, restitution.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(f)	Misrepresentation on a license, permit, or certificate application or renewal application. Falsification on an application or failure to submit or provide all documentation or information required.	Procuring or attempting to procure a certificate of the National Board of Dental Examiners or a license to practice dentistry or dental hygiene by fraud or misrepresentation or by knowingly taking advantage of the mistake of another.	2	License denial, revocation, suspension, censure, practice restriction, probation.
A.R.S. § 32-1201(21)(m)	Refusal, denial, revocation or suspension of license or certificate	Refusal, revocation, or suspension of a license by any other state, territory, district or country unless the Board finds that such was not occasioned by reasons which relate to the ability to safely and skillfully practice dentistry or to any act of unprofessional conduct.	2	License denial, revocation, suspension, censure, practice restriction, probation.
A.R.S. § 32-1201(21)(u)	Any violation of statutes and rules regarding dispensing of drugs and devices.	Failure to dispense drugs and devices in compliance with Article 6 of this Chapter.	2	Revocation, suspension, censure, practice restrictions, probation, administrative penalty.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(s)	A licensee or certificate holder supervising an individual to perform acts or procedures that is not permitted to perform those acts or procedures.	Willfully or intentionally causing or permitting supervised personnel or auxiliary personnel operating under supervision to commit illegal acts or perform an act or operation other than that permitted under this Act and rules adopted by the Board , pursuant to A.R.S. § 32-1282.	2	Revocation, suspension, censure, probation, practice restriction, administrative penalty.
A.R.S. § 32-1201(21)(x)	Licensee or certificate holder maintains inadequate records on a patient, such as not keeping any records or incomplete records	Failing or refusing to maintain adequate patient records.	2	Revocation, suspension, censure, probation, practice restriction, administrative penalties.
A.R.S. § 32-1201(21)(v)	Unregulatable licensee or certificate holder	Failure to comply with a final Board order	2	Revocation, suspension, censure, Probation, Practice restrictions, administrative penalties.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(y)	Licensee prohibits investigation of complaint.	Failure to allow authorized Board personnel, on demand, to examine and have access to documents maintained by the licensee or certificate holder that relate to the dental practice or dentally. related activity.	2	Revocation, Suspension, Censure, Probation, Practice restrictions, Administrative penalties.
A.R.S. § 32-1201(21)(e)	Fraudulently holding oneself out as a Board member	Acting or assuming to act as a Board member when this is not the fact.	2	Revocation, Suspension, Censure, Probation, Practice restrictions, Administrative penalties.
A.R.S. § 32-1201(21)(g)	Allowing an unlicensed individual to utilize the licensee's or certificate holder's name to continue the illegal practice of dentistry.	Lending one's name or having a professional connection to an illegal practitioner of dentistry or any other healing arts.	2	Revocation, Suspension, Censure, Probation, Practice restriction, administrative penalty.
A.R.S. § 32-1201(21)(h)	Falsely stating an incurable disease or condition may be cured.	Representing that a manifestly incorrectable condition, disease, injury, ailment or infirmity can be permanently corrected, when this is untrue.	2	Revocation, Suspension, Censure, Probation, Practice restrictions, Administrative penalty.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(i)	Providing dental treatment without clinical evidence that it will be successful	Offering, undertaking, or agreeing to correct, cure or treat a condition, disease, injury, ailment or infirmity by a secret means, method, device or instrumentality.	2	Revocation, Suspension, Censure, Probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(k)	Offering Rebates.	Giving or receiving or aiding or abetting the giving or receiving of rebates, either directly or indirectly.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(l)	Promising success of treatment.	Knowingly making any false or fraudulent statement, written or oral, in connection with the practice of dentistry.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(o)	Fraudulent billing to third parties; billing for services not rendered.	Obtaining a fee by fraud or fraudulent statement, written or oral, in connection with the practice of dentistry.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(p)	Continued billing irregularities.	Repeated irregularities in billing.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.

Statutory Citation	Examples of Unprofessional Conduct	Description	Classification	Possible Discipline or Disposition
A.R.S. § 32-1201(21)(r)	Practice of dentistry, dental hygiene, or denture technology under a fictitious name not approved by the Board, or under a false name.	Practicing dentistry under a false or assumed name in this state, other than as allowed by A.R.S. § 32-1262.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(t)(i),(ii)	False or misleading advertising; fraudulent or misleading information disseminated in any manner.	The publication or circulation, directly or indirectly, or any false, fraudulent or misleading statements concerning the skill, methods or practices of himself or of any other person. Advertising in any manner which tends to deceive or defraud the public.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(w)	Refusing to provide the Board with records subpoenaed which hinders Board investigation.	Failing to comply with a Board subpoena in a timely manner.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.
A.R.S. § 32-1201(21)(aa)	Failing to inform a patient of the dental material being used.	Failing to inform a patient of the type of material the dentist will use in the patient's dental filling and the reason why the dentist is using that filling.	2	Revocation, suspension, censure, probation, practice restrictions, administrative penalty.

The Board may issue the following types of sanctions based upon the criteria previously listed and the classification of a complaint. The chart below describes the type of sanction and when the Board may impose it.

Type of Sanction	Preceding Procedural Steps and Evidentiary Requirements	Purpose of Sanction
Revocation	Formal hearing; with findings of fact; conclusions of law (practice act violation)	The Board should revoke licenses or certificates held by those who have demonstrated that they are a threat to the health, safety or welfare of the public (violating the practice act) or show that they are unregulatable.
Censure	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	The Board can censure a license or certificate if it determines that the licensee or certificate holder has harmed a patient by violating the practice act. The Board may impose censure by itself for violations or repeated violations of the practice act or it may be combined with other disciplinary actions, i.e.: suspension for one year and censure, depending upon aggravating or mitigating factors.
Probation	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	The Board places a license or certificate on probation for a period of time and imposes specific terms on it after it finds that the licensee has violated the practice act. Probation can be imposed for all violations and can be imposed in conjunction with other discipline. Probation lasts for a period of time with terms to best protect the public and rehabilitate the licensee or certificate holder.
Administrative Penalty	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	This sanction may initially be imposed for \$500 in any case where the Board upholds a violation of the practice act. For a second violation, the Board may impose a penalty of up to \$2,000 per violation as provided in A.R.S. § 32-1263.01(A)(5) and 32-1268(B).

Type of Sanction	Preceding Procedural Steps and Evidentiary Requirements	Purpose of Sanction
Restitution of Fees to the Aggrieved Party	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	Restitution may be ordered only for established inadequate treatment. Aggrieved parties include the individual patient, insurance carrier, or whoever paid for the treatment.
Imposition of Peer Review and Professional Education Requirements/Community Service	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	The Board imposes this sanction to monitor and rehabilitate a licensee or certificate holder after it has determined that violations of the practice act have occurred. Peer review may include case presentations, on site monitoring of practice or related activities.
Letter of Concern	Informal or investigative interview or formal hearing; with findings of fact and conclusions of law.	The Board may issue a letter of concern to a licensee or certificate holder in cases where it is established that there is no patient harm. This is not a sanction but a warning indicating to the licensee or certificate holder that repeated acts of this nature may be grounds for disciplinary sanctions and aggravated penalties.

Revised by the Board August 3, 2001
Revised by Statute change September 21, 2006
Revised by Statute change September 26, 2008

Agency Substantive Policy Statement #6

Warning Letters for Noncompliance

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Historically, as part of the enforcement process, a “letter of enforcement” is sent to the noncompliant licensee demanding compliance within an additional time frame. The Assistant Attorney General has advised the Board that sending a “letter of enforcement” is not a legal requirement.

Now the expectation of sending a “letter of enforcement” reminding the licensee of noncompliance has been eliminated. The complaint will be sent directly to the Board for noncompliance.

Adopted by the Board June 4, 1999

Agency Substantive Policy Statement #7

Continuing Education Ordered by the Board

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

- ❖ Home study or internet courses are not acceptable for Board ordered continuing education
- ❖ Prior approval of continuing education courses is a delegated staff function.
- ❖ Requests for acceptance of continuing education courses taken prior to approval by staff WILL NOT be considered and courses will have to be repeated for credit following the required pre-approval.
- ❖ Board ordered continuing education is **in addition** to licensee's renewal requirements
- ❖ It is the sole responsibility of the licensee to locate appropriate courses that satisfy the Board Order.

Adopted by the Board June 4, 1999
Revised by the Board September 30, 2005
Revised by the Board April

Agency Substantive Policy Statement #8

Board Orders

Providing Clear, Concise & Understandable Terms

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

The language in Board Orders will continue to be reviewed for clarity and changes will be made as necessary using clear, concise and understandable terms.

Adopted by the Board June 4, 1999

Agency Substantive Policy Statement #9

Fee for Retaking the Jurisprudence Examination

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

When the Board orders a licensee to retake the Jurisprudence Examination the licensee will pay the statutory fee to retake the examination.

Dentists	\$300.00
Dental Hygienists	\$100.00
Denturists	\$150.00

Adopted by the Board June 4, 1999
Amended Legislation Effective May 21, 2002

Agency Substantive Policy Statement #10

Mercury-Free Dentistry

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

The Arizona State Board of Dental Examiners has reviewed the issue of mercury-free dentistry. There are no rules or regulations in place that would prohibit a licensee from discussing the pros and cons of specific filling materials with a patient. The Board does not regulate the filling materials used as long as the treatment rendered conforms to the standard of care and is the appropriate treatment for the diagnosis.

As is the approach of this Board regarding mercury-free dentistry and other professional practice related areas, the Board makes determinations within its disciplinary jurisdiction on a case-by-case basis. This is consistent with the mandated mission of the Board, which is to assure that licensees practice in a minimally competent manner that is appropriate to preserve the health, safety, and welfare of the public.

Adopted by the Board August 6, 1999

Agency Substantive Policy Statement #11

Failure to Comply

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

ADMINISTRATIVE AND CIVIL PENALTY

- ❖ The first offense penalty will be \$500.
- ❖ The second offense will be the maximum penalty of \$2,000.

FAILURE TO COMPLY WITH A *SUBPOENA*

- ❖ The Board no longer will issue a \$50 Cite & Fine for failure to respond to a subpoena.
- ❖ The subpoena will contain the bolded wording, “To avoid a \$500 administrative or civil penalty, you must comply with the following subpoena.”
- ❖ The first offense of failure to comply with a subpoena will result in a \$500 administrative or civil penalty.

FAILURE TO COMPLY WITH A *BOARD ORDER*

- ❖ The first offense of failure to comply with a Board Order will result in a \$500 administrative or civil fine.
- ❖ The second offense will result in an Informal Hearing.

**Adopted by the Board October 29, 1999
Revised by the Board April 7, 2006**

Agency Substantive Policy Statement #12

Ethical Considerations Of Removing Serviceable Amalgams

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

What should a dentist do if a patient asks him or her to remove their serviceable amalgams?

- ❖ A dentist is not ethically obligated to remove serviceable dental amalgams from the non-allergic patient at the patient's request or even the recommendation of the patient's physician.
- ❖ The dentist has the professional obligation to use his or her independent judgment about the dental treatment that is best for the patient.
- ❖ The dentist is free to suggest that the patient seek dental care elsewhere.

If a dentist agrees to remove serviceable amalgam restorations from the non-allergic patient at the patient's request:

- ❖ The dentist should take special care to obtain the patient's informed consent to the procedure and thoroughly document that consent in the patient's records.
- ❖ The dentist should review with the patient the current scientific thinking on the safety of dental amalgams – that there is no evidence that amalgams pose a significant health risk to non-allergic patients and that no known health benefits result from the removal of dental amalgams.
- ❖ The patient should be informed of the risks involved in replacing amalgam restorations, including potential damage to healthy tooth structure and the loss of sound tissue in the process.
- ❖ The patient should also be informed of the risks and benefits of the replacement materials and the cost.
- ❖ Finally, the dentist should clearly state that he or she promises no health benefits to the patient by removing serviceable amalgam restorations.

Adopted by the Board February 4, 2000

Agency Substantive Policy Statement #13

Advanced Courses for Suture Placement

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Based on the intent of the original rule R4-11-601(E), courses for Periodontal Therapy Suture Placement are approved only if they are offered in an “advanced” setting. The definition of “advanced” is a course that is completed beyond the undergraduate Dental Hygiene program whether that is a 2 or 4 year degree.

Adopted by the Board February 4, 2000

Agency Substantive Policy Statement #14

Patient Abandonment

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

What constitutes "patient abandonment" in a dental setting?

A dentist or physician who discontinues his services to a patient before the need for those services has ended and without giving that patient notice and an opportunity to procure the services of another physician.

The Courts have determined that the relationship between a physician and a patient continues until it is ended by the consent of the parties, revoked by the dismissal of the physician, or until his services are no longer needed. A physician can withdraw from a case but to do so "he is bound first to give due notice to the patient and afford the latter ample opportunity to secure other medical attendance of his own choice." If the physician abandons a case without giving such notice and opportunity to his patient, he may be subject to the consequences and liability resulting from his action.

Steps to properly adjudicate abandonment cases:

1. Determine if the relationship was terminated.
2. Determine if the patient or the dentist terminated the relationship.
3. Consider if the dentist terminated the relationship, did the dentist provide notice to the patient with enough time for that patient to secure other medical attention.
4. Consider whether the arrangements or notice provided to the patient was suitable. Did it provide the patient with enough information to determine that the professional physician-patient relationship was at an end? Did it allow the patient enough of an opportunity to secure alternative treatment from a different dentist?

A dentist may have committed abandonment if he sold his practice to another dentist and did not inform his patients of the sale or provide them with the name and credentials of the dentist assuming the practice.

Adopted by the Board March 31, 2000

Agency Substantive Policy Statement #15

Injecting Anesthesia, Injecting Other Substances or Prescribing for Non-Dental Treatment

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Arizona Revised Statute (A.R.S.) § 32-1201(21)(c) states:

- 21 “Unprofessional conduct” means the following acts, whether occurring in this state or elsewhere:
 - c. Prescribing, dispensing or using drugs for other than accepted dental therapeutic purposes or for other than medically indicated supportive therapy in conjunction with managing a patient’s dental needs.

It is not lawful for a dentist to inject a patient with anesthesia or other substances for a medical procedure or prescribe drugs not related to the practice of dentistry. For example, a dentist may not inject anesthesia or inject other substances for a medical procedure or prescribe drugs outside the scope of dentistry, specifically, but not limited to: tattoos, body piercing, hair transplants, improvement of facial esthetics or “Latisse.”

Licensees will be disciplined pursuant to enforcement guideline, statutes and rules adopted and held by the Agency.

Adopted by the Board June 2, 2000
Revised by Statute change September 21, 2006
Revised by the Board February 2, 2007
Revised by Statute change September 26, 2008

Agency Substantive Policy Statement #16

Components of A Standard MATP Agreement What Constitutes “Non-Compliance”

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

	STANDARD AGREEMENT	NON-COMPLIANCE
1	License on Probation for 5 years	NON-COMPLIANCE – failure to meet all the requirements listed in the Agreement
2	Enroll & successfully participate in the Program 12-step program with sponsor 90 meetings in 90 days (<i>may be waived</i>) Minimum of 3 meetings per week – 1 Caduceus Submit log of attendance 5 th of each month Work hours 20 v 40 weekly (<i>may be waived</i>)	MUST COMPLY FULLY MUST COMPLY FULLY MUST COMPLY FULLY NON-COMPLIANCE if received after 5 p.m. on the 5 th MUST COMPLY FULLY
3	Typewritten self-reports 5 th of each month	NON-COMPLIANCE if received after 5 p.m. on the 5 th
4	Bi-weekly group therapy	NON-COMPLIANCE IS: Any UNEXCUSED absence; in excess of 5 EXCUSED absences per year (i.e. sickness, vacation, CE) unless approved by Medical Director
5	Meeting with Medical Director monthly for 1 st six months, then as necessary	NON-COMPLIANCE – failure to complete timely unless pre-approved by Medical Director
6	Appear before MATP Committee quarterly	MUST COMPLY unless excused. If excused, absences shall be made up by appearing at the next full Board Meeting

	STANDARD AGREEMENT	NON-COMPLIANCE
7	<p>Random BFTs within 3 hours of contact</p> <p>Diluted urine's</p> <p>Positive results [Urine Drug Screen (UDS)]</p>	<p>NON-COMPLIANCE IS: (A) Missing any non-excused drug screen per year and (B) failure to comply within 3 hours. If unable to meet 3 hour deadline, MUST contact Board Office with explanation immediately</p> <p>NON-COMPLIANCE IS: More than 2 dilutes. <i>1st dilute</i> – immediately repeat urine <i>2nd dilute</i> – meeting with Medical Director to determine appropriate course of action.</p> <p>Positive results of UDS after Medical Review Officer (MRO) represents definitive evidence of relapse. Immediate suspension (voluntary or not) Evaluation by Medical Director regarding necessary treatment</p>
8	Participant shall authorize release of records/info to Bd	MUST COMPLY FULLY
9	Participant shall abstain from alcohol/poopy seeds	MUST COMPLY FULLY
10	Abstain from controlled substances, RX drugs, over-the-counter drugs UNLESS under direction of physician with written notice to Bd	<p>MUST COMPLY FULLY</p> <p>If under care of physician and on prescription drugs, must provide letter from physician verifying type and quantity. Failure to do so is NON-COMPLIANCE</p>
11	Surrender of DEA license; petition to reinstate in 2 years	Reinstatement must be supported by Medical Director. Prior to Board consideration/approval, staff contacts DEA to confirm there is no pending action(s).
12	<p>Within 10 days of agreement, numbered triplicate RXs</p> <p>Submit copy of each RX to Bd monthly by the 5th</p> <p>May petition Board to modify this after two years</p>	<p>MUST COMPLY FULLY</p> <p>NON-COMPLIANCE if received after 5 p.m. on the 5th</p> <p>Modification must have support of Medical Director</p>
13	Participant may not keep, store, dispense, or possess controlled substances in office or home unless in compliance with No. 10 above	MUST COMPLY FULLY

	STANDARD AGREEMENT	NON-COMPLIANCE
14	Participant shall bear all costs associated with compliance that include but are not limited to: Monitored aftercare treatment Professional fees of addictionologist Professional fees of psychologist/group therapy Professional fees of drug treatment counseling Biological fluid testing	MUST COMPLY FULLY NON-COMPLIANCE IS: (A) Failure to make payment within 30 days of invoice; and (B) Non-sufficient funds in payment of anything connected to this agreement.
15	Participant shall comply with all statutes, rules & Orders	MUST COMPLY FULLY (See No. 19 below)
16	Order may be used in subsequent violations if they occur	MUST COMPLY FULLY
17	Obtain a primary care physician for all non-emergency treatment unless referral is documented	Failure to submit physician name in writing to Medical Director, or Obtaining non-emergency treatment without a written referral from primary care physician
18	Refuse dental treatment or consultation from a dentist who is a current MATP participant	Failure to submit treating dentist name to the Medical Director. Obtaining treatment from a MATP participant
19	Probation will not run if Participant discontinues practice in AZ Must notify Board if moving out of state	MUST COMPLY FULLY
20	Failure to comply with Agreement will be deemed a threat to the public's health, safety & welfare	NON-COMPLIANCE could lead to a summary suspension, suspension, or revocation.
21	Any violation of this Agreement or other orders, or of the Dental Practice Act shall be grounds for extension of the period of probation	NON-COMPLIANCE – failure to comply with requirements of this agreement as well as any other disciplinary action taken as a result of other Board actions.
22	License will be fully restored upon successful completion	

Adopted by the Board October 6, 2000
Revised by the Board April 1, 2005
Revised by the Board April 7, 2006

Agency Substantive Policy Statement #17

Anesthesia On-Site Evaluation

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Under Arizona Administrative Code R4-11-1301(C)(1)(a) through (e), R4-11-1302(C)(1)(a) through (e), R4-11-1303(C)(1)(a) through (c) the on-site evaluation team will be reviewing the following items:

- ◇ The proper administration of anesthesia should include a procedure related to dentistry. (For 1301 and 1302 permits)
- ◇ The auxiliary manual suction device is medically designed.
- ◇ Supplemental oxygen should be considered based upon medical needs of the patient and anesthetic technique.
- ◇ All IV sedation through an IV route must be done so there is a continuous flow. (For 1301 and 1302 permits)
- ◇ All dental personnel present during a procedure should be identified on the medical patient record.
- ◇ Controlled substances inventory log.
- ◇ Records of evaluated sedation for 1301 and 1302 permits; Record Forms for 1303 permits.
- ◇ The Oral Examination should include the following types of questions:
 1. Be able to identify and discuss the crisis.
 2. Understand and discuss the etiology of the crisis.
 3. Explain the sequence of managing the crisis and care for the patient.
 4. Express enough knowledge of the medical condition to address appropriate dosages and interactions.

Consistent with the need for patient safety, the Board supports the American Association of Oral and Maxillofacial Surgeons' recommendation that in a professional dental office, everyone in the office should at a minimum be BCLS certified.

Revised by the Board August 1, 2003

Agency Substantive Policy Statement #18

Educational Requirements for Internationally Trained Dentists

REPEALED – December 1, 2006

Agency Substantive Policy Statement #19

Recognition of Participation in a Substance Abuse Recovery Program Not Ordered by the Board

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

The Board interprets A.R.S. § 32-1299 to be applicable to a licensee who is impaired, based on an evaluation by a Board-approved addictionologist, at the time the Board receives the information regarding the licensee's past and/or current substance abuse. In such a case, the Board is mandated to open an investigation and the licensee shall either agree to enter into the Board's monitored after-care treatment program or the Board shall take other statutorily authorized action against the licensee.

If a licensee is not impaired, based on an evaluation by a Board-approved addictionologist, at the time the Board receives information regarding a licensee's substance abuse and the licensee is participating in a substance abuse recovery program, the Board is not mandated to open an investigation against a licensee if both of the following conditions apply:

1. The substance abuse recovery program is determined to be substantially equivalent to the Board's monitored after-care treatment program and,
2. The Board finds that the public's health, safety and welfare is adequately protected by the licensee's participation in the substance abuse recovery program.

This substantive policy statement has no effect on a licensee's duty to report charges, arrests, or convictions under A.R.S. § 32-3208 and the Board will exercise its authority under that statute on a case by case basis.

Adopted by the Board June 4, 2004

Agency Substantive Policy Statement #20

Recognition of Accreditation Entities

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

A.R.S. § 32-1201(18) requires that a recognized denturist school be “accredited by the United States Department of Education or the Council on Higher Education Accreditation”. The Board has determined that denturist schools qualify under this definition if they have been accredited by entities that are recognized by either of these agencies.

Adopted by the Board April 13, 2007

Agency Substantive Policy Statement #21

Non-Disciplinary Continuing Education

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Effective September 19, 2007, the Legislature amended the provisions of A.R.S. 32-1263.01 as follows:

The Board may issue a nondisciplinary order requiring the licensee to complete a prescribed number of hours of continuing education in an area or areas prescribed by the Board to provide the licensee with the necessary understanding of current developments, skills, procedures or treatment.

The following guidelines shall be utilized by the Board when considering such an order:

- The identified practice deficiency does not rise to the level that requires the payment of restitution; imposes a restriction on the scope of practice; requires peer review or community service.
- The Board determines that the licensee has not previously been the subject of formal disciplinary action by any regulatory board or entity in the State of Arizona or any other state or jurisdiction.
- The licensee is not concurrently under investigation by the Board for any violation of A.R.S. §32-1201(21) or any regulation promulgated by the Board.
- The Board determines that the nature of the licensee's practice deficiency may be corrected through education and/or remediation.
- The licensee does not have an identified impairment that would significantly affect learning abilities or the ability of the licensee to incorporate learned knowledge and skills in the licensee's practice.
- The Board shall designate a time to complete.
- All continuing education imposed by Board order shall be subject to prior approval.
- The failure to complete the prescribed continuing education within the required time frames shall subject the licensee to sanction pursuant to A.R.S. §32-1201(21)v
- Upon completion of the required continuing education, the licensee shall submit proof of attendance.

Adopted by the Board December 7, 2007
Revised by Statute change September 26, 2008

Agency Substantive Policy Statement #22

Unprofessional Conduct Involving Sexual Boundary Violations

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

Arizona Revised Statutes § 32-1201(21) (n) defines unprofessional conduct as:

Any conduct or practice that constitutes a danger to the health, welfare or safety of the patient or the public.

The Arizona State Board of Dental Examiners interprets A.R.S. § 32-1201 (21) (n) to encompass sexual boundary violations committed by a dentist, dental hygienist, or denturist involving a patient. Sexual boundary violations may be physical or verbal and include, but are not limited to the following:

- Engaging in sexual behavior or contact with patient or sexual touching of a patient, including doing so under the pretext of dental therapeutic purposes;
- Requesting or soliciting sexual favors from a patient;
- Discussing matters of a sexual nature with a patient without any therapeutic reason for such discussion;
- Recording, videotaping, or photographing a patient for sexual purposes;
- Putting a patient under the influence of drugs for the purpose of engaging in sexual behavior.

Adopted by the Board April 10, 2008
Revised by Statute change September 26, 2008

Agency Substantive Policy Statement #23

Components of a Two (2) Year Abuse Monitoring Agreement

This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedure Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

The Arizona Board of Dental Examiners, under its authority at A.R.S. §32-1299, may establish a program for the treatment and rehabilitation of licensees who have been found to be impaired by drugs or alcohol. Upon receipt of a report suggesting possible impairment or dependence, an evaluation by the Medical Director of the Monitored Aftercare Treatment Program is required. Entry into the Substance Abuse Monitoring (“SAM”) program may be considered by the Board as an alternative to the Monitored Aftercare Treatment Program (MATP) for an individual who meets the diagnostic criteria for substance abuse, but not dependence. The individual must agree to enter into a stipulation agreement which places the license on probation for a period of two years. In the event that the licensee refuses, the Board may order that the licensee participate in the program. The conditions of the stipulation agreement or order are tailored to the specific needs of the individual, after considering the recommendations of the MATP Medical Director, and may incorporate all or some of the following elements and compliance criteria:

	STANDARD AGREEMENT	NON-COMPLIANCE
1	License on Probation for 2 years	NON-COMPLIANCE – failure to meet all the requirements listed in the Agreement
2	Continuing Education	NON-COMPLIANCE – failure to obtain pre-approval, complete course(s) and provide verification of completion as stated in the Agreement
3	Meeting with Medical Director monthly for 1 st six months, then as necessary	NON-COMPLIANCE – failure to schedule and attend meetings unless excused by the Medical Director

	STANDARD AGREEMENT	NON-COMPLIANCE
4	<p>Random BFTs within 3 hours of contact</p> <p>Diluted urines</p> <p>Positive results [Urine Drug Screen (UDS)]</p>	<p>NON-COMPLIANCE IS: (A) Missing any one non-excused drug screen per year and (B) failure to comply within 3 hours. If unable to meet 3 hour deadline, MUST contact Board Office with explanation immediately</p> <p>NON-COMPLIANCE IS: More than 2 dilutes. <i>1st dilute</i> – immediately repeat urine <i>2nd dilute</i> – meeting with Medical Director to determine appropriate course of action.</p> <p>Positive results of UDS after Medical Review Officer (MRO) represents definitive evidence of abuse. Evaluation by Medical Director regarding necessary treatment</p>
5	<p>Participant shall provide a contact telephone number where he/she can be reached 24/7. Any change in number shall be reported within three days</p>	MUST COMPLY FULLY
6	<p>Participant shall authorize release of treatment records/information to Board</p>	MUST COMPLY FULLY
7	<p>Participant shall abstain from foodstuffs or other consumable items containing alcohol or poppy seeds</p>	MUST COMPLY FULLY
8	<p>Abstain from use of controlled substances, RX drugs, over-the-counter drugs UNLESS under direction of physician with written notice to Board</p>	<p>MUST COMPLY FULLY If under care of physician and on prescription drugs, must provide letter from physician verifying type and quantity. Failure to do so is NON-COMPLIANCE</p>
9	<p>Surrender of DEA license (if applicable)</p>	<p>Reinstatement must be supported by Medical Director. Prior to Board consideration/approval, staff contacts DEA to confirm there is no pending action(s).</p>
10	<p>If applicable, within 10 days of agreement, numbered triplicate RXs</p> <p>Submit copy of each RX to Board by the 5th of each month</p>	<p>MUST COMPLY FULLY</p> <p>NON-COMPLIANCE if received after 5 p.m. on the 5th</p> <p>Modification must have support of Medical Director</p>
11	<p>Participant may not keep, store, dispense, prescribe or possess controlled substances (if applicable) in office or home unless in compliance with No. 8 above</p>	MUST COMPLY FULLY

	STANDARD AGREEMENT	NON-COMPLIANCE
12	<p>Participant shall bear all costs associated with compliance that include but are not limited to:</p> <p>Monitored aftercare treatment Professional fees of MATP Medical Director Professional fees of psychologist/drug treatment counseling Biological fluid testing</p>	<p>MUST COMPLY FULLY</p> <p>NON-COMPLIANCE: (A) Failure to make payment within 30 days of invoice; and (B) Non-sufficient funds in payment of anything connected to this agreement.</p>
13	Participant shall comply with all statutes, rules & Board Orders	MUST COMPLY FULLY (See No. 14 below)
14	Order may be used in subsequent violations if they occur	MUST COMPLY FULLY
15	<p>Probation will not run if Participant discontinues residence in AZ. Remainder of probation will re-commence upon return to AZ.</p> <p>Must notify Board if moving out of or returning to state</p>	MUST COMPLY FULLY
16	Failure to comply with Agreement may be deemed a danger to the health, safety & welfare of the public and may constitute a violation of ARS §32-1201-21(n)	May lead to entry into MATP, summary suspension, suspension, or revocation.
17	Any violation of this Agreement, may be grounds for a violation of ARS §32-1201-21(v) – Failure to comply with Board Order.	May result in further disciplinary action, penalties, or practice restrictions. Also may be grounds for extension of the period of probation; or requirement to enter MATP.
18	License will be fully restored upon successful completion	

**Adopted by the Board June 6, 2008
Revised by Statute change September 26, 2008**