



MISSOURI DENTAL BOARD NEWSLETTER

Vol. 3 No. 1
August 2001

MISSION OF THE BOARD

The Missouri Dental Board exists to protect and serve the public's interests in dentistry and to preserve the integrity of the dental profession.

LETTER FROM THE PRESIDENT



Oswald Thomas DDS



As I end my term as President of the Missouri Dental Board, I would like to take this opportunity to share some information on the activities of the Dental Board since the publication of our last newsletter.

In March, the Board began work on its strategic plan for fiscal year 2002. Although the strategic plan is not yet complete, the Board has developed a list of strategies and identified step-by-step tasks and completion measures necessary to implement our plan of action. Some of the strategies the Board has identified in its strategic plan include access to care, the safe administration of sedation to dental patients, uniform standards for the expanded functions dental assistants, improving Board awareness, continuing education course work, random audits of continuing education requirements, Board member transitioning, biennial renewal, the Dental Well-Being Committee, customer service, defining public health institutions, the Dental Hygienists' Advisory Commission and Internet renewal and complaints. The Board intends to complete its strategic plan very soon and copies will be available upon request by contacting the Central Office. A big thanks goes out to Kristi Wilson from the Division of Professional Registration who facilitated our strategic planning sessions. Our new mission statement is shown under the heading of this newsletter.

Dr. Guy Deyton, who chairs the Board's Policy Review Committee, is working on the Board's strategy on improving access to care. Those of us who follow the legislative process closely know that access to care for Medicaid and low-income citizens was a very high priority this past legislative session. There were several measures passed by the legislature that are intended to improve access to dental care. These measures are highlighted later in this newsletter. One measure that did not pass this year was an amendment introduced by Representative Charles W. Shields. This measure would have changed the Dental Practice Act to allow non-profit organizations to own dental practices and employ dentists and dental hygienists to provide dental services for Medicaid recipients and low-income individuals. Although the amendment was well intended, it would have created a sector of dental care that is outside of the Missouri Dental Board's statutory authority to regulate. The effect would leave citizens that seek treatment in corporate-owned dental facilities without the protection mandated by the existing statutes and rules and without effective recourse should

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care be below the acceptable standards of care. Dr. Deyton and the Policy Review Committee are working with interested parties to develop a plan to address the concerns of Representative Shields and other legislators but preserve the same safety and protection standards required of dentist-owned dental practices. Please read the Board's position statement on Access to Care later in this newsletter.

Everyone recognizes that part of the solution to the access to care problem is to increase the number of dentists who serve Medicaid patients across the state. Unfortunately, until the Medicaid reimbursement rate is increased, many dentists cannot afford to treat Medicaid patients. With talk of budget cuts, it is unlikely that the reimbursement rate will increase to the level desired any time in the near future. However, we urge you as dental professionals to do what you can to serve the Medicaid and low-income citizens of this state.

The Board wishes to recognize the work of Dr. Michael Reed, Dean of the UMKC School of Dentistry, and his faculty for all the work they have done in addressing long term issues with respect to access to care and the supply of dental health care professionals. Class size will increase to 100 in the 2004-2005 academic year. This means 72 new dentists for Missouri in the year 2009 and thereafter. This is an increase of about 15 to 20 new students each year. The school will also be eliminating its six-year program to free up more space in the classroom for the additional students as the majority of these students were not from Missouri. The school will need additional faculty and staff. This will be a major challenge for the school because there are already 400 vacant positions nation-wide in dental schools.

I have enjoyed my year as President of the Board and look forward to continuing to serve in the important work that the Board does for the protection of the public and in furthering excellence in oral health care for Missouri citizens.

Sincerely,



Oswald L. Thomas, D.D.S.
Board President

Governor
The Honorable Bob Holden

Department of Economic Development
Joseph L. Driskill, Director

Division of Professional Registration
Marilyn Taylor Williams, Director

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This is an official publication of the Division of Professional Registration. Submit articles to: Missouri Dental Board, P.O. Box 1367, Jefferson City, MO 65102.

NEW DIVISION DIRECTOR APPOINTED



Marilyn Taylor Williams

We would like to welcome Marilyn Taylor Williams to the Division of Professional Registration. On January 25, 2001, she was confirmed as the new Director of the Missouri Division of Professional Registration. She replaces Randall Singer, who served as the Division Director since 1993.

Prior to her confirmation, Ms. Williams of Dudley, served in the House of Representatives from 1991 to 2001. She represented District 156, comprised of parts of Stoddard, Wayne and Bollinger counties, from 1991 to 1993 and represented District 159, comprised of parts of Stoddard and Scott counties from 1993 to 2001.

In the General Assembly, Ms. Williams' key committee assignments included chair of the House Agribusiness Committee, vice-chair of Appropriations, Agriculture and Economic Resources, and the House Budget Committee. She was also a member of the Missouri Tourism Commission.

We would like to thank Randall Singer for his dedication and service to the Division.

We wish them both the best.

BOARD SECRETARY RUNS BOSTON MARATHON



Dr. Rolfe C. McCoy

Board secretary Dr. Rolfe C. McCoy participated this past April 16th in the 105th running of the Boston Marathon. It was his third Boston Marathon including the 100th in 1996, which was the largest marathon in history with over 42,000 runners. This year his seed position was 6,876 out of 15,000 participants. He finished 4,978 out of 13,397 finishers.

The Boston Marathon is traditionally run on Patriot's Day which is the New England Holiday falling on the third Monday of April. This year it fell the day after Easter. The weather was a sultry 65 to 70 degrees. The gun sounded at approximately 12 noon, in Hopkinton, MA., a community about 26 miles southwest of Boston. The population is about 5,000 people and plays host to three to four times its size every year for this great event.

The course takes the runners through Ashland, Framingham, Natick, Wellesley (and the Famous Wellesley College for Girls), Newton (home of the famous Heart Break Hill mile 22), Brookline (Boston College), and finally Boston ending at the Boston Public library at mile 26.2.

This year South Korean Lee Bong-ju broke the Kenyans streak with a time of 2:09:43. Dr. McCoy was just passing the 28k at that time. Dr. McCoy had a finishing time of 3:32:00. It was not his best time but was not his worst either. This marathon was his 11th marathon in the past 7 years. His best performance came in 1999 at the Big Surf Marathon in Carmel, California where he ran a 3:14:37. Other marathons include New York, Marine Corp in D. C., and Disney this past January. He plans to run in Europe in his next outing.

FDA ALERT: LEAD CONTAMINATION*

This is to notify you of the potential for harmful lead exposure from dental films stored in containers lined with unpainted lead. We believe that there may be hundreds of these lead-lined boxes currently being used to store dental films. Some of them may have been in use for decades. Most of these boxes are the size and shape of shoe-boxes, made of wood, and lined with lead that has apparently not been painted or coated.

Dental films stored in these boxes have been found to be coated with a whitish film that is about 80% lead. In many cases there are highly dangerous levels of lead on the films, enough to potentially cause serious adverse health effects in patients and health care professionals. These adverse health effects include anemia and serious neurological damage.

You may obtain more information about public health concerns related to lead from the OSHA Website: <http://www.osha-slc.gov/SLTC/lead/index.html>

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FDA ALERT: LEAD CONTAMINATION* Continued

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What you should do:

- **Discard any dental films that have been put in these boxes. None of that film should be used. Wiping the film does not significantly reduce the lead levels.**
- **Remove these boxes and dispose of them properly. THE OLD BOXES CANNOT BE MADE SAFE by painting, coating or lining them.** Scrap lead should be discarded according to EPA regulations. You may call the EPA's RCRA hotline at 1 (800) 424-9346 and speak to a representative to find your State's lead disposal requirements.
- **Make it a practice to store your dental film according to the manufacturer's instructions.**

Reporting adverse events to FDA: If you have experienced problems with dental devices or dental device malfunctions, you can report this directly to the manufacturer. Alternatively, you can report directly to MedWatch, the FDA's voluntary reporting program. You may submit reports to MedWatch four ways: online to <http://www.accessdata.fda.gov/scripts/medwatch/>; by telephone at 1-800-FDA-1088; by FAX at 1-800-FDA-0178; or by mail to MedWatch, Food and Drug Administration, HF-2, 5600 Fishers Lane, Rockville, MD 20857.

Getting more information: If you have questions regarding this letter, please contact, Marian Kroen, Office of Surveillance and Biometrics (HFZ-510), 1350 Piccard Drive, Rockville, Maryland, 20850, by fax at 301-594-2968, or by e-mail at phann@cdrh.fda.gov. Additionally, a voice mail message may be left at 301-594-0650 and your call will be returned as soon as possible.

All of the FDA medical device postmarket safety notifications can be found on the World Wide Web at <http://www.fda.gov/cdrh/safety.html>. Postmarket safety notifications can also be obtained through e-mail on the day they are released by subscribing to our list server. You may subscribe at <http://list.nih.gov/archives/dev-alert.html>. You may also subscribe by sending an e-mail to listserv@list.nih.gov. In the body of the text, type "SUBSCRIBE DEV-ALERT firstname lastname".

Sincerely yours,

/s/

David W. Feigal, Jr., MD, MPH

Director

Center for Devices and Radiological Health

Food and Drug Administration

**Reprinted by permission from a letter received from the Food and Drug Administration dated March 13, 2001.*

NEW CONTROLLED SUBSTANCE REGULATIONS & INFORMATION*

New regulations addressing controlled substance issues became effective on November 30, 2000. A copy of these new regulations may be obtained from the Missouri Secretary of State's Office, or viewed online by viewing the Missouri Register. The section to look for is Code of State Regulations, Department 19, Section 30, Chapter 1. It is abbreviated as 19 CSR 30-1.002 through 19 CSR 30-1.078.

New regulations and amendments were promulgated for several reasons. Regulations addressing controlled substance issues needed to be amended due to changes in state and federal statutes and changes in health policies and technology. Many of the rules were rewritten for clarification of issues and requirements on the part of controlled substance registrants.

MAJOR CHANGES INCLUDE:

- | | |
|------------------------|--|
| <u>19 CSR 30-1.011</u> | Records must be maintained so as to be readily retrievable. "Readily retrievable" is defined as capable of being produced in three working days. |
| <u>19 CSR 30-1.015</u> | If a registration is postmarked 15 days after a previous registration expires, the applicant must pay a \$10 late fee in addition to the regular registration fee. |
| <u>19 CSR 30-1.017</u> | Starting on 1/1/2001, the BNDD will begin implementation to convert registrations to a three-year registration cycle, instead of requiring registrants to apply annually. This will be done in stages. |

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NEW CONTROLLED SUBSTANCE REGULATIONS & INFORMATION*

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Applicants will be required to submit accurate and complete applications. If an application is received incomplete, the applicant will be notified of the missing information. They will then have 60 days to provide the BNDD with the missing information. If the information is not received within 60 days of the notification, the application becomes void.

19 CSR 30-1.023 A registrant must notify the BNDD of a change of address or name prior to such a change. This information may then be processed and updated without a fee. If notification is not received by the BNDD prior to such a change, the registrant must submit a new application and registration fee.

19 CSR 30-1.026 Separate registrations are not required if an emergency medical service's ambulances rotate between separate locations at least every 30 days.

19 CSR 30-1.034 Registrants must notify the BNDD of any loss, theft or diversion of a controlled substance within 7 days of the discovery of the loss or theft. A new state form has been developed. Federal DEA forms may still be copied to the BNDD (to minimize duplication of effort), but the new state form must be completed and submitted with a copy of the federal form attached. Any reports of investigations completed by the registrant or local law enforcement should also be enclosed.

A provision has been implemented so that insignificant losses may be documented and filed with the registrant's

annual inventory. Insignificant losses are specifically defined in the rule.

19 CSR 30-1.044 All controlled substance records must be readily retrievable and capable of being produced within 3 working days.

19 CSR 30-1.048 Practitioners must document all controlled substances prescribed or administered.

Practitioners must ensure that required records are available for inspection by the Department of Health even if they are not the custodian of the records.

19 CSR 30-1.062 Hospice prescriptions may be transmitted by fax.

19 CSR 30-1.064 Prescriptions for Schedule II medications may be partially filled for patients of long term care facilities or hospices.

19 CSR 30-1.066 Individuals who administer or dispense a controlled substance medication per an order from a collaborating practitioner when the practitioner is not present to directly supervise such a function must:

- A. Have a collaborative practice agreement with an authorized practitioner;
- B. Be authorized by statute to do so; and
- C. Have a current Missouri Controlled Substance Registration.

19 CSR 30-1.070 Practitioners must mail a hard copy to the dispensing pharmacy within 7 days for an emergency prescription of a Schedule II medication. The hard copy must be post-marked within 7 days of calling in the emergency prescription.

19 CSR 30-1.078 Options for disposing of unwanted or outdated controlled substances are listed in this rule.

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NEW CONTROLLED SUBSTANCE REGULATIONS & INFORMATION*

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The BNDD strongly urges registrants to obtain a copy of the new regulations to use as a personal reference and ensure that they are in compliance with the new regulations.

ONGOING CHANGES AND IMPROVEMENTS

- You may now obtain a Missouri Controlled Substances Application by contacting the BNDD and requesting that our agency mail or fax an application form to you or you may download your own copy at www.health.state.mo.us/graphics/580-2322.pdf
- You may verify if a person has a current Missouri Controlled Substances Registration by reviewing our registry database online at www.health.state.mo.us/ResourceMaterial/BNDDLlist.htm
- You may now specify that all forms and certificates be mailed to an address separate from the registered address (primary practice location) if you choose. If you would like to receive your mail at a separate location, please attach or enclose a note with the optional mailing address.
- The appearance of our Controlled Substance Registration Certificates has changed.
 - The type of border has changed,
 - The font and printing style have changed,
 - Drug schedules are now listed as 2,3,4, and 5. Our bureau has stopped using the designations 2N and 3N, and
 - New registration numbers are being issued.

WAIVERS REQUIRED TO EMPLOY CERTAIN INDIVIDUALS

If you employ or wish to employ a person who has entered a plea of guilty, no contest, nolo contendere or otherwise been convicted of a criminal controlled substance violation, you must obtain a waiver before granting them access to your controlled substances. If the violation was a misde-

meanor, you must obtain a waiver only from the Missouri Bureau of Narcotics and Dangerous Drugs. If their violation was a felony, you must obtain a waiver from both the Missouri BNDD and the Drug Enforcement Administration (DEA).

HOW TO CONTACT OUR BUREAU

Our bureau has ongoing plans to improve the application and registration process. We have implemented a plan of quality assurance and we invite your comments, thoughts and opinions on improving our customer service. You may contact our bureau at:

Bureau of Narcotics and Dangerous Drugs
P.O. Box 570
912 Wildwood Drive
Jefferson City, Missouri 65102-0570
(573) 751-6321 fax (573) 526-2569

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LICENSEES RECOGNIZED FOR 50 YEARS OF LICENSURE

The Missouri Dental Board will recognize dentists and dental specialists who have been licensed for fifty years or longer during the public meeting scheduled in Jefferson City in January of 2002. Dr. Rodney Beard of Liberty suggested the recognition and the Board unanimously agreed. Dr. Beard said that this is something the Board can do to honor those dentists who have devoted their lives to the profession. A special recognition certificate will be awarded to approximately thirty dentists and three specialists. The practice act for dental hygienists was not created until 1969 and therefore, at this time, dental hygienists do not qualify for this recognition. Licensees who will be receiving this award from the Board are encouraged to attend the January meeting in Jefferson City and bring along any guests that may wish to witness this special Board presentation. Recipients may also bring a camera if they wish to participate in a photo opportunity with the entire Board. Certificates will be mailed from the Board to those licensees who are unable to attend the January meeting. Congratulations to those dentists and dental specialists that will qualify for this award. A complete listing of these individuals will be published in a future newsletter article.

ACCESS TO CARE POSITION STATEMENT

On May 18, 2001, the Missouri Dental Board adopted the following position statement on access to care:

The Missouri Dental Board believes that every citizen in our state deserves access to a safety net of dental care regardless of where they live or how much they earn. That safety net should include diagnostic and preventative care for children and emergency care for all ages. The Missouri Dental Board is concerned that a significant portion of Missouri citizens do not have adequate access to dental care due to economic and geographical barriers.

Provided that statutes and rules can be changed to provide adequate consumer protection, the Missouri Dental Board supports the concept of Nonprofit Dental Safety Net Providers (NDSP's) joining with private dentists to provide necessary dental care to Medicaid and low-income patients in Missouri. NDSP's include Federally Qualified Health Centers, Rural Health Centers, and other non-profit entities that by charter and by record serve Medicaid, low-income and under-served patients. The Dental Board recognizes that statutes and rules must be changed to insure that patients treated in clinics owned by non-licensees are afforded the same consumer protection that the Dental Board currently provides for Missouri citizens.

The Missouri Dental Board pledges to work with the Missouri Dental Association, Missouri Dental Hygiene Association, Missouri Dental Assistants Association, the Missouri Primary Care Association, the Department of Social Services, the Department of Health, State Legislators, and communities across Missouri to develop a comprehensive plan to address access to dental care.

CONTINUING EDUCATION REPORTING FORMS

With next year's renewal application, all currently licensed dentists and dental hygienists will be required to report the number of continuing education hours earned during the time block of December 1, 1999 through November 30, 2002. To assist licensees in reporting accurate information

to the Missouri Dental Board, a continuing education reporting form will be developed and sent out with next year's renewal application. The name of the continuing education sponsor, the name of the continuing education program, the date(s) of the program, and the number of continuing education hours earned is the information that is required to be documented on the reporting form for each continuing education program in which the licensee expects to use to satisfy his/her continuing education credits. The form will be designed in order for the licensee to easily add the total number of continuing education hours earned for the entire three-year time block on each documented program and enter that number on the renewal application itself. The continuing education reporting form must be completed and returned with next year's completed renewal application. To avoid delays during next year's renewal cycle, it is suggested that all licensees maintain this information in a log and transfer it to the appropriate form after it is sent out with next year's renewal application.

NEW LAWS

There were two major bills that passed the legislature this year changing the dental practice act. They are Senate Bill No. 393 and House Bill No. 567. The Governor signed both on July 10, 2001. Since both bills contain an emergency clause, some of the changes went into effect on the date the bills were signed by the Governor. Both bills contain similar provisions. A summary of the changes is outlined below:

Section 332.072 Removes limitation of permitted gratuitous services by out-of-state dentists and dental hygienists. The summer camp language was deleted to allow licensed dentists and dental hygienists in other states to provide gratuitous dental services in Missouri without a Missouri license for a period of not more than 14 days in any one calendar year if the dentist and/or dental hygienist is a graduate of an accredited program. Some restrictions apply. This was also in House Bill 607 that was signed and enacted on June 13, 2001.

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NEW LAWS Continued

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Section 332.086 Advisory Commission established for Dental Hygienists.

A five-member "Advisory Commission for Dental Hygienists" has been established, which shall guide, advise and make recommendations to the Missouri Dental Board. The Commission shall recommend the educational requirements to be registered as a dental hygienist; annually review the practice act of dental hygiene; make recommendations to the Board regarding the practice, licensure, examination and discipline of dental hygienists; and assist the Board in any other way necessary to carry out the provisions of Chapter 332 as it relates to dental hygienists.

Section 332.181 Biennial Renewal for Dentists.

Effective with the licensing period beginning on December 1, 2002, a dental license shall be renewed every two years. Continuing education requirements change from 75 hours every three years to 50 hours every two years. The Board has the authority to extend the time requirements for completion of the continuing education requirements up to six months for reasons related to health, military service, foreign residency or for other good cause. Requests for extensions of time shall be made in writing and submitted to the Board before the renewal date. The time to renew a lapsed and/or inactive license is now four years from the date of expiration.

Section 332.261 Biennial Renewal for Dental Hygienists.

Effective with the licensing period beginning on December 1, 2002, a dental hygiene license shall be renewed every two years. Continuing education requirements change from 45 hours every three years to 30 hours every two years. The Board has the authority to extend the time requirements for completion of the continuing education requirements up to six months for reasons related to health, military service, foreign residency or for other good cause. Requests for extensions of time shall be made in writing and submitted to the Board before the renewal date. Dental hygienists will have the same inactive licensure status as that of dentists. The time to renew a lapsed and/or inactive license is now four years from the date of expiration.

Section 332.311 Dental Hygienists allowed to practice without supervision in Public Health settings - conditions apply.

A currently licensed dental hygienist who has been in practice at least three years and who is practicing in a public health setting may provide fluoride treatments, teeth cleaning and sealants, if appropriate, to children who are eligible for medical assistance, pursuant to chapter 208, RSMo, without the supervision of a dentist. Public health settings will be defined jointly by the Department of Health and the Missouri Dental Board by rule. This provision expires on August 28, 2006.

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NEW LAWS Continued

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Section 332.321 Revoked licensees cannot apply for a new license for one year. In any order of revocation, the Board may provide that the person shall not apply for a new license for a period of not less than one year following the date of the order of revocation.

Section 332.324 Donated Dental Services Program created. The Department of Health may contract to establish a donated dental services program, in conjunction with the provisions of Section 332.323, through which licensed dentists may volunteer to provide comprehensive dental care for needy, disabled, elderly and medically-compromised individuals. Eligible individuals may be treated by the volunteer dentists in their private offices. Eligible individuals may not be required to pay any fees or costs, except for dental laboratory costs.

Sections 332.072, 332.311, 332.321 and 332.324 have the emergency clause and became effective on the date the Governor signed these bills into law, July 10, 2001. Rules must be promulgated before the statutes can be implemented. The effective date of the remaining sections is August 28, 2001.

Other statute changes include:

Physicians are allowed to administer the appropriate fluoride treatment to children when they receive their immunizations.

The Director of the Department of Health is required to include dentists in the development and implementation of a plan to provide a system of coordinated health care

services accessible to all persons in rural and urban areas of Missouri, particularly areas designated as health resource shortage areas. The Medical School Loan Repayment Program is renamed as the Health Professional Student Loan Repayment Program and is expanded to include dentists. The criteria for areas of defined need are revised. Patient ratios, poverty and age percentages, and distance requirements to hospitals are removed and replaced with designation as a shortage area by the U.S. Department of Health and Human Services or a determination of extraordinary need by the Director of the Department of Health. The maximum amount of repayment assistance is revised from its current level of \$20,000 per year of obligated service to an amount not exceeding the maximum allowed under the National Health Service Corps Repayment Program. For students who breach their service obligation contracts, the penalty of \$500 per month of service not completed is deleted. Students will be responsible for damages incurred by the Department of Health resulting from the breach and legal fees and costs incurred in the collection of damages.

The Bureau of Child Hygiene is required to provide literature on the importance of routine dental care for children.

When an applicant or licensee tests positive for a controlled substance, the burden of proof is on the applicant or licensee that the controlled substance was not unlawfully possessed.

Deliberations regarding discipline procedures for the boards and commissions within the division must be conducted in closed session.

The Board will be updating the Statutes and Regulations book when all the new laws are implemented after August 28, 2001. The statutes and regulations will be updated on the Board's Internet site as a downloadable document. Our web address is located on the inside cover of this newsletter. Due to the cost involved in printing and mailing new law books, the Board asks that you download the statutes and regulations on your computer and print it off, if you so desire, so it is easily accessible to you for reference purposes. If you are unable to download the statutes and regulations, please feel free to contact the Board office after August 28th to request a copy.

DISCIPLINARY ACTIONS

The following report on disciplinary actions covers the period October 1, 2000 through June 30, 2001. The report typically includes several provisions in its orders which may not be summarized here. Although great care has been taken to ensure accuracy of the information provided hereafter, inadvertent errors may appear, and no entity should initiate any adverse action against a dentist, dental specialist, or dental hygienist based solely on the following information. Rather, the reader should request a copy of the Board's Order prior to making any decisions affecting licensees. This listing may not reflect appeals filed after the publication of this newsletter.

James A. Steen, D.M.D., license number 011772, of Maryland Heights was placed on suspension for thirty days effective August 2, 2000 - August 17, 2000 and February 1, 2001 - February 15, 2001, followed by a probation period until November 20, 2002, for violation of his previous disciplinary order.

Douglas O. Beischel, D.D.S., license number 015684, of Scottsdale, AZ, was placed on probation for twelve months effective November 1, 2000, for violation of Section 332.321.2, RSMo 1994.

Kevin R. Ham, D.D.S., license number 013109, of Farmington was revoked effective November 13, 2000, for violation of Section 332.321.2 (2), RSMo 1994.

Ted C. Lewis, D.M.D., license number 015041, of Sikeston was placed on probation for five years effective November 29, 2000, for violations of Section 332.321.2 (13) and (15), RSMo 1994.

Paul A. Bonstead, D.D.S., license number 011066, of St. Peters was placed on thirty days suspension effective December 2, 2000 - December 19, 2000 and December 21, 2000 - January 1, 2001, followed by a five year probation beginning January 2, 2001, for violation of Section 332.321.2 (2), RSMo 1994.

John D. Gardner, D.D.S., license number 013104, of Caruthersville was censured effective January 31, 2001, for violation of Section 332.321.2 (2).

Stacy A. Battle, D.D.S., license number 013175, of Kansas City was placed on probation for three years effective February 1, 2001, for violation of Section 332.321.2 (2).

Edward F. Tate, D.D.S., license number 011124, of Florissant was placed on suspension for fourteen days effective February 12, 2001, followed by five years probation beginning February 26, 2001, for violations of Section 332.321.2 (4), (5), and (13), RSMo 2000.

Robert E. Hawkins, D.D.S., license number 013201, of St. Peters was placed on probation for three years effective March 1, 2001, for violation of Section 332.321.2, RSMo 2000.

John H. Joseph, D.D.S., license number 015719, of Joplin was placed on probation for five years effective March 29, 2001, for violations of Section 332.321.2 (1), (5), and (15), RSMo 1994.

D. M. Monheiser, D.D.S., license number 013892, of Blue Springs was placed on probation for two years effective April 25, 2001, for violations of Section 332.321.2 (5), (6), (10), and (13),

Richard D. Snitzer, D.D.S., license number 014727, of Kirkwood was placed on probation for five years effective May 17, 2001, for violations of Section 332.321.2 (5), (6), (13), and (15).

RENEWALS

Renewals were mailed early this year because of delays in renewal processing in the last two years. Even though your current license does not expire until November 30th, when you receive your renewal application, please complete and return it with the appropriate renewal fee to avoid similar delays this year. If you renew when you receive your renewal application, there is no reason why you will not receive your renewed license long before the expiration date of your current license. Do not wait until right before the expiration date of your current license to renew. Often the Board is asked to waive the \$100 penalty fee for late renewal because the renewal was only a day or two late. The Board does not waive fees and to avoid the penalty fee, make sure the post office has a post-mark on your renewal envelope by no later than November 30th. Remember to answer all the questions on your renewal application, sign

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RENEWALS Continued

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and date it, and return it in the return envelope provided with the appropriate renewal fee. This will help to ensure that renewal applications won't be rejected to you because of a missing item. Rejected renewals cause lengthy delays in the processing of your renewal application because all accepted renewal applications are processed first by date received.

LABORATORY WORK ORDERS

Under the Board's current rule, 4 CSR 110-2.190, the Missouri Dental Board shall prescribe or approve of the laboratory work order form. If you are not using the Board's standard form, or if the Board has not approved your form, you are not in compliance with the Board's rule. Even if you are using your laboratory's form, make sure it has been approved. The Board has recently developed guidelines for approval of the laboratory work order form. If you need to get your form approved, and/or if you have questions regarding the approval process, please contact the Board office for further information.

DENTAL JEWELRY

The Missouri Dental Board recently adopted the following position on dental jewelry:

"BE IT RESOLVED that it is the position of the Missouri Dental Board that the placement of and removal of appliances or other structures on teeth for cosmetic purposes is within the scope of the practice of dentistry in the State of Missouri."

ADVERTISING

The Board would like to take this opportunity to remind licensees of the statutes and regulations regarding advertising. Recently, there is one issue in particular that seems

to be generating more than the usual number of questions received by the Central office staff. This article will attempt to address these questions; however, the Board cannot be responsible for approval of a licensee's advertising copy. If you have questions regarding compliance issues, please consult your statutes and regulations book and/or your private attorney. Keep in mind that a violation of the Board's advertising statutes and/or regulations is cause for the Board to seek disciplinary action against your license.

A dentist may not advertise as a specialist or use any of the terms denoting the recognized specialties unless such person holds a valid license as a specialist. The recognized specialties are endodontics, oral pathology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, prosthodontics, public health and oral and maxillofacial radiology. If the dentist is not licensed in any of the recognized specialties but still wishes to advertise that they provide these services to the public, it is not prohibitive as long as the advertisement contains the following statement, "Notice, the following dentist(s) in this practice is (are) not licensed in Missouri as specialists in the advertised dental specialty(s) of" A dentist is prohibited from advertising any terms denoting or implying specialty areas which are not recognized by the American Dental Association unless the advertisement contains the following disclaimer, ". . . is a non-specialty interest area which is not recognized by the American Dental Association or the state of Missouri." Non-specialty interest areas include, but are not limited to, cosmetic dentistry, implantology, implant dentistry and temporomandibular joint (TMJ) therapy.

CHAIN LETTERS

The Board was recently made aware of a chain letter circulating among dental professionals. It's about Craig Sheriold, a 7-year old boy suffering from cancer. Craig made a wish through the Make-A-Wish Foundation to be in the Guinness Book of Records for having the largest collection of business cards from physicians, dentists and chiropractors. The letter asks that you send Craig your business card. Based on information received by the Board, Craig Sheriold is now a healthy college student. Sending Craig your business card at this point would be a waste of both your time and postage.

Division of Professional Registration
Missouri Dental Board
3605 Missouri Boulevard
PO Box 1367
Jefferson City MO 65102

PRSTD STD
U.S. POSTAGE
PAID
PERMIT NO. 225
Jefferson City MO

MEETING DATES

The next meeting of the Missouri Dental Board is scheduled on October 26-27, 2001. The meeting will be held in St. Louis.

The meeting schedule for 2002 is as follows:

January 25-26, 2002
April 26-27, 2002
July 26-27, 2002
October 25-26, 2002

For information regarding meeting locations, please feel free to contact the Board's Central Office as it gets closer to the meeting date, or visit our web site. The address is on the inside cover of this newsletter.

