

# FALL 2022

## Newsletter

### PRESIDENT'S MESSAGE

I want to start by thanking all my colleagues on the Minnesota Board of Dentistry for their service to the dental community. It has been an honor serving with the Board. While serving as Board President, I have been focusing a lot of my attention on addressing the shortage of allied dental professionals in Minnesota, primarily dental assistants and dental hygienists. The Board continues to identify barriers to licensure and processes that could be streamlined and simplified. We also are in the process of a deeper look into the Dental Assisting State Licensure Examination. The pass rate for the DASLE examination has increased compared to last year. We are nearing the end of the full review of the examination. Questions have been removed or modified based on clinical relevance. We are hoping that the resulted examination will be more relevant to the profession.

We are now at the end of our typical annual peak licensing time. Since January, we have issued 548 new licenses, including 161 dental assistants and 147 dental hygienists. The number of applications for the limited radiology registration is also projected to increase soon, as the first cohort of UMN Radiology certification students have completed the course last month and they are now taking their DANB Radiation Health and Safety examinations. Speaking of examinations, We are now official state members of ADEX, which is the most widely accepted dental examination in the country. (See update further in this newsletter).

The Board has approved allowing digital impressions, intra and extraoral photos for UNLICENSED dental assistants. However, in order for this to be changed in Board rule and go into effect, we need to proceed through the administrative rulemaking process in MN. Changes anticipated early 2024.

We continue working with Minnesota IT and their Salesforce team on developing a more user-friendly database to provide a smoother experience for applicants and dental professionals in Minnesota. It's been a productive year at the Board of Dentistry.

I would like to end by acknowledging Mary Liesch, one of our senior investigators, for 30 years with the Board! On behalf of the Board, I want to thank you for your dedicated service to the agency!

Thank you all for your support,



**Hassan Ismail, D.D.S.**  
**Board President**

# HEALTH OBSERVANCES

## September is National Recovery Month

Recovery Month celebrates the gains made by those in recovery from substance use and mental health, just as we celebrate improvements made by those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease. The Board of Dentistry would like to recognize and celebrate licensed dental professionals in MN that are in recovery. For more information visit

<https://rm.facesandvoicesofrecovery.org/>



## October is National Dental Hygiene Month

This is the time of the year where we celebrate the work dental hygienists do, and we help raise awareness on the importance of good oral health. We would like to thank the 5,749 licensed dental hygienists in Minnesota for their commitment to the profession and providing care for patients. For more information, visit <https://www.adha.org/>.

## November is American Diabetes Month

Did you know that over 9% of Minnesotans have been diagnosed with diabetes? That is around 24,000 new cases a year! We know that there has been a bidirectional relationship established between periodontal disease and diabetes. This would be a great time to educate patients and do an in office campaign to raise awareness, such as a directed message for patients that have diabetes in their medical history. Need some educational resources? Visit [AAP](#) for info on gum diseases and systemic disease. Fact sheet [Oral Health and Diabetes](#).



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## License Display

The Board of Dentistry will no longer issue large wall licenses for new licensees as of October 2020. We also no longer require the display of original wall licenses in primary practices. If a licensee would like to request the initial wall license, they may complete the duplicate request form found on our website and send it to our office with a check. Please note, the current wall license we offer will look different than the previous version.

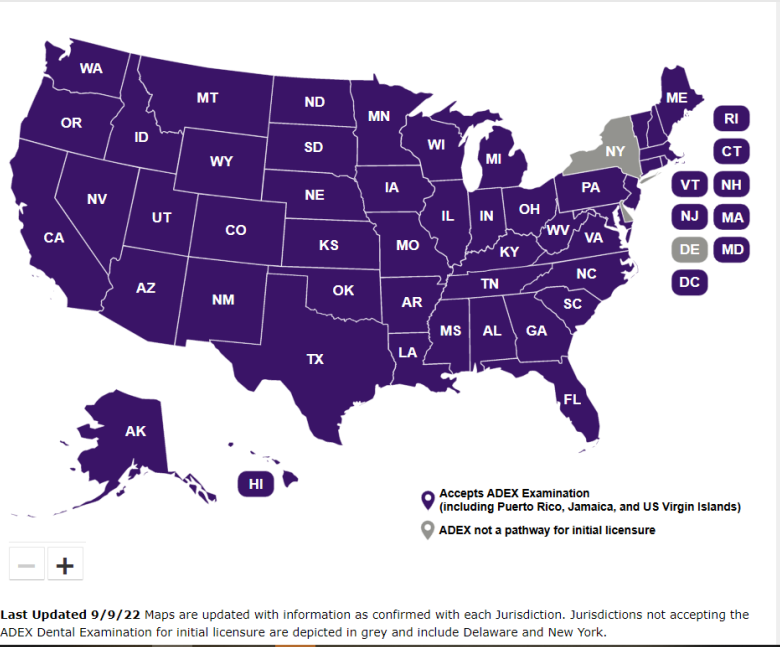
Licensees are only required to display renewal certificates and we will continue to issue the renewal certificate upon biennial renewals. The Board's long-term goal is to issue electronic licenses. With these, licensees can access them at any time, print, and display them at no additional cost.



# Dental Examination Update

## American Board of Dental Examiners

ADEX dental examination is accepted in every jurisdiction that permits licensure by independent 3rd party examination. Currently, Delaware has their own exam and NY has PG-1. All states that accept ADEX allow the Simulated patient exam, with the exception of Wyoming. There are several jurisdictions that ADEX is the only examination accepted. These include, Louisiana, Florida, North Carolina, Virginia, D.C, Maryland, New Jersey, Hawaii and Puerto Rico.



Other states like Michigan, Mississippi, Connecticut, Rhode Island and Massachusetts require the ADEX OSCE to be added onto other exams to meet examination criteria for their jurisdiction. With recent mergers, CDCA-WREB-CITA is scheduled to administer the ADEX exam at every dental school in the US and Puerto Rico for the class of 2023.

## Unlicensed Assistants

### A MESSAGE FROM THE EXECUTIVE DIRECTOR, BRIDGETT ANDERSON



My goal is and has been since I became Executive Director of the Board, to promote an environment of health and safety in the practice of dentistry in MN. I believe by sharing knowledge, we can achieve a state of compliance with laws and rules that have the public interest in mind. I wanted to share a message on a relevant and important topic in order to provide guidance for dental professionals on delegated procedures and utilization of allied dental professionals. I have found in my many years of working in dentistry that a large reason for non- compliance is confusion or miscommunication.

MN is a considered a “permissible” state for duties performed by allied dental professionals. This means that all the delegated duties are outlined in the rule, or they would not be allowed to be delegated by a dentist or dental therapist. We are increasingly getting calls from licensed dental assistants and office managers that report unlicensed dental assistants performing duties outside of the scope of practice. We are also hearing about dental assistants coming to MN from out of state and practicing expanded functions duties without a license at all. We understand that there is a great demand for dental assistants at this time and we encourage out of state dental assistants to inquire with the board about being licensed in MN. However, without a license, their duties are not the same as an expanded functions licensed dental assistant in Minnesota.

Years ago, we issued a guidance statement on the issue so dentists and dental therapists would be able to understand delegating duties to allied dental professionals that are unlicensed and working in clinical settings. We also have a concise delegation chart for dental assistants, dental hygienists, dental therapists and advanced dental therapists. Please see the resource links at the end of this article.

### Unlicensed Dental Assistants

They cannot perform duties outside of what is in the rule. They may do delegated tasks for patients when the dentist is supervising under personal supervision. This means that the dentist is chairside. We would commonly refer to this as four- handed dentistry.

Continued on next page...

# Unlicensed Assistants continued

## Assistants without a license may:

- A. retract a patient's cheek, tongue, or other parts of tissue during a dental operation;
- B. assist with the placement or removal of devices or materials for isolation purposes as directed by the dentist or dental therapist during dental treatment;
- C. remove debris or water that is created during treatment rendered by a dentist or dental therapist using suction devices;
- D. provide any assistance, including the placement of articles and topical medication in a patient's oral cavity during dental treatment under the **personal supervision** of a dentist or dental therapist;
- E. aid dental hygienists and licensed dental assistants in the performance of their delegated procedures defined in parts [3100.8500](#) and [3100.8700](#); and
- F. apply fluoride varnish in a community setting under the authorization and direction of a licensed practitioner with prescribing authority such as a dentist or physician, as long as the licensed practitioner authorizing the service or the facility at which the fluoride varnish is administered maintains appropriate patient records of the treatment.

## What are the minimal requirements for an unlicensed dental assistant?

- A. Continuous CPR certification
- B. Compliance with the most current dental infection control practices

**Important:** Other procedures prohibited. An assistant must not perform any dental treatment or procedure on patients not otherwise authorized by this chapter.

## Limited Radiology Registration

We recently changed Board Administrative Rule regarding limited radiology registrations. We expanded the rule to allow an opportunity for more unlicensed dental assistants that may want to pursue this pathway. The goal is to promote dental careers, allow individuals to gain clinical experience, and to encourage these individuals to pursue further dental assisting education and licensure. The table below outlines the requirements for this limited registration.

**Requirements:** Board Approved Course in Dental Radiology, Minnesota Jurisprudence Examination and the [Dental Assisting National Board \(DANB\) Radiation Health and Safety \(RHS\) Exam](#)

**Current Board Approved Courses:** [Radiology Certificate for Unlicensed Dental Assistants - University of Minnesota Continuing Dental Education](#) and [Dental Radiology - Herzing Certificate Course for Dental Assistants](#)

License application and contact information available on our website: <https://mn.gov/boards/dentistry/new-applicant/>

## Under Ltd. Radiology

Questions on delegated duties? Please contact

[bridgett.anderson@state.mn.us](mailto:bridgett.anderson@state.mn.us) or [kathy.johnson@state.mn.us](mailto:kathy.johnson@state.mn.us)

## Further Resources on Delegated Duties

- [Dental hygienists and licensed dental assistants](#)
- [Dental therapists and advanced dental therapists](#)
- [Limited Authorization for Dental Hygienists and Dental Assistants \(Commonly referred to as Collaborative Practice\)](#)
- [MN Rules on delegation to an unlicensed assistant](#)
- [Guidance on the Use of Unlicensed Dental Assistants](#)



In the Service of Health,  
Bridgett Anderson LDA, MBA  
Executive Director



# Ensuring Safety by Supporting One Another

## IN THE DENTAL CLINIC

The dental clinic environment is inherently arduous, as members and licensed staff of the Minnesota Board of Dentistry know well. A majority of the current Board members continue to practice clinical dentistry and experience the same challenges that dental healthcare personnel face while practicing. The Board considers many things during the licensing, rulemaking, and practitioner review processes. Highest among those considerations are understanding the burdens for personnel and having an awareness of concerns from the public.

The Practitioner Review Committee evaluates and investigates complaints against dental professionals. The Committee must identify whether or not potentially unsafe conditions exist, and if so, determine potential resolutions. The Committee looks to the “grounds for discipline” [statute](#) and [rules](#), which includes the crucial [Minnesota Rule 3100.6300](#), Subpart 11. Infection Control. This rule requires dental healthcare personnel to comply with the most current infection control guidelines according to the [Centers for Disease Control and Prevention \(CDC\)](#).

The language of Board laws and the CDC requirements, which evolved throughout the [COVID-19 pandemic](#), can be daunting. Regulatory language tends to intimidate the reader. But this newsletter article serves to remind you: ***There is no need to despair because you have people and organizations eager to help you!*** There is an amazing network of supportive entities available to help personnel meet safety requirements. All the information you would ever need can be found on various websites including the professional associations, dental product vendors, the CDC, and of course, the Minnesota Board of Dentistry. The CDC has facilitated infection control compliance for dentistry with its CDC [Dental Check Mobile App](#).

One of the bright spots that emerged from the pandemic is the need for each of us to reach out to and be present for the people in our lives. Cooperative teamwork with colleagues aimed toward keeping personal and public health and well-being at the forefront of dental practice boosts safety.

Fun engaging activities in the dental clinic can enhance teamwork. Allowing team members to learn more about themselves and how their strengths can best contribute to the practice benefits all staff members. Encouraging team members to work on creative solutions for challenges in the clinic also supports commitment to safety and other process improvements. If interpersonal conflicts persist, conflict resolution training may enhance group cohesion.

Dental healthcare personnel characteristically have the fortitude to meet the demands of clinical dentistry. Sharing goals while encouraging an ethos of cooperation and kindness allows team members, and ultimately your patients, to experience joyfulness and safety while receiving care.



## 2021 Dental Legislative package

Governor Walz and the Minnesota Legislature put teeth into the state’s ability to create dental health equity with an historic 2021 dental package.

Dentists who serve Minnesotans on Medical Assistance and MinnesotaCare can now expect

- Fairer reimbursement rates
- Simpler payment structures
- Fewer administrative burdens.

One in four Minnesotans get their health care coverage through Medical Assistance and MinnesotaCare, known as Minnesota Health Care Programs. This health care coverage includes dental benefits, yet low-income Minnesotans served by these public programs have had difficulty accessing dental services as a result of outdated rates and administrative challenges.

With the new legislative changes in place, it’s a great time to reconsider serving Medical Assistance and MinnesotaCare patients or seeing more of them in your practice.

The Minnesota Department of Human Services has made it easier for dental practices to sign up to serve public health care program enrollees through its [Minnesota Provider Screening and Enrollment Portal](#) and [portal training videos](#). You can find the contact information for the health plans Minnesota Health Care Programs contracts with [here](#).

Learn more at the Department of Human Services [new oral health dashboard](#) on its [Medicaid Matters](#) website. Or connect with the [Provider Resource Center](#) with questions.

### Disciplinary Actions

[Click here](#) to view

LEARN MORE

### Notice - ACLS/PALS

The Board will allow Fundamental continuing education credit (in the area of Medical Emergencies) for licensees that take ACLS or PALS courses.

### Reminders

The deadline for dentists to complete the Opioid Course, a continuing education requirement, is January 1, 2023. [Click here](#) for more information.

Dentists who contract with sedation providers must maintain the sedation records with their dental patient charts.

### Contact



[www.mn.gov/boards/dentistry](http://www.mn.gov/boards/dentistry)



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