

**BEFORE THE MINNESOTA
BOARD OF DENTISTRY**

In the Matter of
Edward C. Linden, D.D.S.
License No. D4782

**STIPULATION AND ORDER FOR
LIMITED AND CONDITIONAL LICENSE**

The Minnesota Board of Dentistry ("Board") is authorized pursuant to Minn. Stat. ch. 150A, § 214.10, and § 214.103 to license and regulate dentists, to refer complaints against dentists to the Attorney General for investigation, and to take disciplinary action when appropriate.

The Board received a complaint(s) against Edward C. Linden, D.D.S. ("Licensee"). The Board's Complaint Committee ("Committee") reviewed the complaint(s) and referred the matter to the Minnesota Attorney General's Office ("AGO") for investigation. Following the investigation, the Committee held a conference with Licensee and his attorney, John M. Degnan, on December 16, 2005. The Committee and Licensee have agreed that the matter may now be resolved by this stipulation and order.

STIPULATION

IT IS HEREBY STIPULATED AND AGREED by and between Licensee and the Committee as follows:

A. Jurisdiction. Licensee holds a license to practice dentistry in the State of Minnesota from the Board and is subject to the jurisdiction of the Board with respect to the matters referred to in this stipulation. Licensee states that Licensee does not hold a license to practice dentistry in any other jurisdiction and does not hold any other professional or occupational licenses.

B. Facts. This Stipulation is based on the following Committee findings:

Substandard Periodontal / Prosthodontic Care / Recordkeeping

1. Licensee failed to adequately document pertinent information and/or provide appropriate periodontal treatment prior to providing prosthodontic treatment to one or more of his patients. Examples include the following:

a. For patient 2, Licensee failed to provide appropriate periodontal treatment before proceeding with prosthodontic treatment. For example, Licensee failed to document and/or provide adequate periodontal care for patient 2 including: a full mouth chart of periodontal probing; further assessment of the status of the patient's periodontal health; and a periodontal diagnosis. Despite his lack of periodontal information, Licensee proceeded with cementing a porcelain crown on tooth #28 and indicated a crown for tooth #30 for patient 2 on January 7, 2005. In addition, Licensee failed to document a treatment plan and obtain patient 2's informed consent prior to providing prosthodontic treatment on tooth #28.

b. For patient 3, Licensee failed to provide appropriate periodontal treatment and prosthodontic treatment. For example, Licensee failed to document and/or provide adequate periodontal care for patient 3 including: a full mouth chart of periodontal probing; further assessment of the status of the patient's periodontal health; and a complete series of full mouth radiographs for periodontal diagnosis. The November 17, 2004 series of radiographs taken by Licensee lacks bitewing and edentulous area radiographs. Despite his lack of periodontal information, Licensee proceeded with cementing a porcelain crown on tooth #5 for patient 3 on December 3, 2004. Moreover, Licensee failed to recognize that tooth #5 for patient 3 may be a non-restorable tooth due to extensive dental caries, as seen on a November 17, 2004

periapical radiograph. Licensee also failed to document a treatment plan and obtain patient 3's informed consent prior to providing prosthodontic treatment on tooth #5.

c. For patient 4, Licensee failed to provide appropriate periodontal treatment before proceeding with prosthodontic treatment. For example, Licensee failed to document and/or provide adequate periodontal care for patient 4 including: a full mouth chart of periodontal probing; further assessment of the status of the patient's periodontal health; and a complete series of full mouth radiographs for periodontal diagnosis. The November 11, 2004 series of radiographs taken by Licensee lacks bitewing radiographs. Despite his lack of periodontal information, Licensee proceeded with cementing a stainless steel crown on tooth #19 for patient 4 on December 6, 2004. Moreover, Licensee failed to document in patient 4's progress notes that he excavated the dental caries before placing the stainless steel crown on tooth #19. Furthermore, Licensee failed to document a treatment plan and obtain patient 4's informed consent prior to providing prosthodontic treatment on tooth #19.

d. For patient 5, Licensee failed to provide appropriate periodontal treatment before proceeding with prosthodontic treatment. For example, Licensee failed to document and/or provide adequate periodontal care for patient 5 including: a full mouth chart of periodontal probing; further assessment of the status of the patient's periodontal health; and a complete series of full mouth radiographs for periodontal diagnosis. The March 20, 2004 series of radiographs indicated in patient 5's progress notes were missing from the patient's record as provided by Licensee. Despite his lack of periodontal information, Licensee proceeded with cementing a porcelain crown on tooth #29 for patient 5 on January 7, 2005. In addition, Licensee failed to document a treatment plan and obtain patient 5's informed consent prior to providing prosthodontic treatment on tooth #29.

e. For patient 6, Licensee failed to provide appropriate periodontal treatment before proceeding with prosthodontic treatment. For example, Licensee failed to document and/or provide adequate periodontal care for patient 6 including: a full mouth chart of periodontal probing; further assessment of the status of the patient's periodontal health; and a complete series of full mouth radiographs for periodontal diagnosis. Despite his lack of periodontal information, Licensee proceeded with the following prosthodontic treatment for patient 6: cemented a Maryland bridge replacing tooth #24 on May 8, 1998; and cemented stainless steel crowns on teeth #12 and #19 on October 15 and November 9, 2004, respectively. In addition, Licensee failed to document a treatment plan and obtain patient 6's informed consent prior to providing prosthodontic treatment for teeth #12, #19, and #24.

Substandard Endodontic Care / Recordkeeping

2. Licensee failed to adequately document pertinent information and/or provide appropriate endodontic treatment when providing endodontic care to patient 1. Examples include the following:

a. Licensee failed to provide endodontic treatment on tooth #31 for patient 1 in a timely manner. On March 2, 2004, Licensee took a periapical radiograph of tooth #31 which revealed an apical abscess. However, Licensee did not provide endodontic treatment on tooth #31 for patient 1 until December 7, 2004.

b. Licensee failed to document his subjective findings for patient 1, specifically the patient's chief complaint at the endodontic appointment on December 7, 2004.

c. On December 7, 2004, Licensee failed to perform appropriate diagnostic evaluations of the pulpal and periradicular status of tooth #31 and/or document the

pulpal and periradicular diagnosis before providing endodontic treatment on tooth #31 for patient 1.

d. For patient 1, Licensee failed to document a treatment plan and obtain the patient's informed consent prior to providing endodontic treatment on tooth #31.

e. Licensee failed to document pertinent endodontic treatment information such as the working length measurements of the canals and medications used to disinfect the canals during instrumentation when providing endodontic treatment on tooth #31 for patient 1 on December 7, 2004.

f. Licensee failed to utilize rubber dam isolation when providing endodontic treatment on tooth #31 for patient 1, as evidenced by Licensee's failure to document rubber dam use in the patient's progress notes on December 7, 2004.

g. On December 7 and 17, 2004, Licensee failed to refer patient 1 to an endodontic specialist and/or inform the patient about seeing a specialist when he experienced difficulty during the instrumentation of the canals of tooth #31. Patient 1's progress notes indicate that Licensee "decided to wait."

Substandard Infection Control

3. Licensee failed to maintain adequate safety and sanitary conditions for a dental office. Licensee also failed to comply with the most current infection control recommendations and guidelines of the Centers for Disease Control (CDC), as described below:

a. Licensee failed to wear appropriate personal protection equipment such as a mask and a laboratory coat or gown when providing treatment to patients. Licensee wears a mask when he has "a cold or is cleaning something" and routinely wears a short-sleeved jacket.

b. Licensee failed to properly disinfect his eyewear that he wears while treating patients. Licensee cleans his eyewear with “water and gauze.”

c. Licensee failed to follow proper injury and infection control procedures when he cut his arm with a bur causing it to bleed. During the conference, the Committee found that Licensee failed to have a written protocol for injuries as part of his Exposure Control Manual when this incident occurred in Licensee’s dental office.

d. Licensee failed to properly maintain his autoclave equipment at each of his two offices.

e. Licensee failed to properly place protective barriers on his overhead light handles, radiographic equipment controls, curing lights, handpieces, or evacuator bases.

f. Licensee failed to properly clean, bag, and sterilize all instruments and other dental items such as handpieces, dental burs, impression trays, matrix bands, and cotton roll holders. Licensee had a rusty pliers in an autoclave bag.

g. Licensee failed to provide a sharps container in each operatory room at each office.

h. Licensee failed to consistently perform weekly spore (biological) testing of his autoclave at each office.

i. Licensee failed to properly maintain his inventory of local anesthesia for patients. Licensee has expired carpules of local anesthetic in his operatory rooms.

j. Licensee failed to properly label with a biohazard label his laundry bag used to transport soiled garments from one office to another office for laundry purposes.

k. Licensee failed to have adequate emergency equipment in each office. Licensee's emergency equipment is limited to "oxygen and 911." During the conference, Licensee failed to adequately articulate to the Committee the proper administration of medications contained within an emergency treatment kit during a dental emergency, what an emergency kit should contain, and the proper procedures for handling a medical emergency in his dental office.

l. Licensee failed to create, specifically for his office, written protocols for instrument processing, operatory clean-up, management of injuries or exposure incidents, dental healthcare provider orientation, or blood spill procedures. During the conference, Licensee presented his recently developed infection control manuals to the Committee; however, Licensee failed to properly articulate to the Committee an adequate understanding of the written protocols contained within these manuals.

Improper Use of Auxiliary Personnel

4. On one or more occasions, Licensee has employed, assisted, or enabled auxiliary staff to practice dentistry in that Licensee has inappropriately authorized and permitted registered dental assistants or unregistered dental assistants to perform tasks which exceeded their legal scope of practice. Examples include the following:

a. On one or more occasions, Licensee has authorized and permitted registered dental assistants employed in his office to perform scaling on patients.

b. On one or more occasions, Licensee has authorized and permitted unregistered dental assistants employed in his office to: 1) take radiographs on patients; 2) administer and/or monitor nitrous oxide inhalation analgesia to patients; and 3) remove cement from a patient's mouth.

Additional Substandard Recordkeeping

5. Licensee failed to make or maintain adequate patient records. Examples include the following:

a. Licensee failed to routinely document updated medical histories on patients 1, 2, 4, 5, and 6.

b. When patients 1, 2, 3, and 6 indicated a positive response to questions on their medical history forms, Licensee failed to adequately document whether he contacted the patient's physician regarding their health or asked the patient for additional information regarding their health. During the conference, Licensee failed to adequately articulate to the Committee the latest guidelines of the American Heart Association on pre-medications using prophylactic antibiotics relative to patients 3 and 5 and their current medical conditions including artificial joints and heart valve involvement, respectively.

c. Licensee failed to document a complete record of the patient's existing oral health status including but not limited to dental caries, missing or unerupted teeth, restorations, oral cancer examination, and periodontal conditions for patients 1 through 6.

d. Licensee failed to adequately document his diagnosis, treatment plan, and the patient's informed consent prior to performing dental services for patients 1 through 6.

e. Licensee failed to consistently document all medications used and all materials placed during treatment procedures for patients 1 through 6 including, but not limited to, the type and amount of local anesthetic administered and all dental materials used in dental procedures.

f. When documenting the treatment provided to patients 1 through 6, Licensee failed to consistently indicate he was the dental provider by noting his name or initials in the patient's treatment record.

g. During the conference, Licensee presented to the Committee certain recordkeeping forms that he was going to be using in his dental office; however, the Committee found the forms to be incomplete and Licensee was unable to properly utilize the forms.

C. Violations. The Committee concludes that the practices described above constitute violations of Minn. Stat. § 150A.08, subd. 1(6) and Minn. R. 3100.6200 B (repeated performance of dental treatment which falls below accepted standards); Minn. Stat. § 150A.08, subd. 1(10) and Minn. R. 3100.6200 K and 3100.6300 (failure to maintain adequate safety and sanitary conditions for a dental office); Minn. Stat. §§ 150A.08, subd. 1(11) and 150A.11, subd. 1 and Minn. R. 3100.8100, 3100.8400, and 3100.8500 (employed, assisted, or enabled an unlicensed person to practice dentistry); Minn. R. 3100.9600 (failure to make or maintain adequate dental records on each patient) for purposes of this Stipulation and Order only and are sufficient grounds for the disciplinary action specified below. Licensee agrees to enter into this Stipulation and Order for purposes of settlement.

D. Disciplinary Action. Licensee and the Committee recommend that the Board issue an order which places LIMITATIONS and CONDITIONS on Licensee's license to practice dentistry in the State of Minnesota as follows:

LIMITATIONS

Licensee's license shall be subject to the following limitations:

1. Endodontic Treatment Prohibition. Licensee is prohibited from providing endodontic treatment to any patient, except in emergency situations as described within this paragraph. Licensee must provide the patient requiring endodontic treatment with a referral to either another dental provider or an endodontist before Licensee provides the patient with any emergency endodontic treatment limited to: (a) opening the patient's tooth to gain access to the pulp; (b) removing inflamed or necrotic pulp tissue; and (c) closing the access opening to the tooth for the sole purpose of relieving the patient's pain at a single visit. Licensee is specifically prohibited from obturating the canals of the tooth and from repeating any emergency endodontic treatment on a patient's tooth at a subsequent visit.

2. Periodontal Treatment Prohibition. Licensee is prohibited from providing periodontal treatment to any patient who has periodontal conditions involving gingival pocket measurements of 4mm or greater. Licensee must provide to the patient a referral to either another dental provider or a periodontist for evaluation and/or treatment of periodontal conditions.

CONDITIONS

Licensee's license shall be subject to the following conditions:

3. Coursework. Licensee shall successfully complete the coursework described below. All coursework must be approved in advance by the Committee. Licensee is responsible for locating, registering for, and paying for all coursework taken pursuant to this stipulation and order. When Licensee attends an undergraduate or graduate dental school course, Licensee must provide each instructor with a copy of this stipulation and order prior to commencing a course. Licensee shall pass all courses with a grade of 70 percent or a letter grade "C" or better. Licensee's signature on this stipulation and order constitutes authorization for the

course instructor(s) to provide the Committee with a copy of the final examination and answers for any course Licensee takes. Licensee's signature also authorizes the Committee to communicate with the instructor(s) before, during, and after Licensee takes the course about Licensee's needs, performance and progress. None of the coursework taken pursuant to this stipulation and order may be used by Licensee to satisfy any of the continuing dental education/professional development requirements of Minn. R. 3100.5100, subpart 2. The coursework is as follows:

a. Medical Emergencies. Within three months of the effective date of this order, Licensee shall successfully complete a 12-hour independent study course on the management of medical emergencies offered through the University of Minnesota School of Dentistry Continuing Dental Education Department or an equivalent course. In addition, Licensee shall submit documentation to the Committee that he and his licensed or registered staff members are currently certified in CPR for Healthcare Providers.

b. Periodontics. Within 18 months of the effective date of this order, Licensee shall successfully complete a minimum of six hours of instruction in periodontics that includes periodontal diagnosis offered through the University Of Minnesota School Of Dentistry Continuing Dental Education Department or an equivalent course.

4. Written Reports and Information. Licensee shall submit or cause to be submitted to the Board the reports and/or information described below. All reports and information are subject to approval by the Committee:

a. Reports on All Coursework. Within 30 days of completing any coursework, Licensee shall submit to the Board (a) a transcript or other documentation verifying that Licensee has successfully completed the course, if the course is a graduate or undergraduate

dental school course, (b) a copy of all materials used and/or distributed in the course, and (c) a written report summarizing how Licensee has implemented this knowledge into Licensee's practice. Licensee's reports shall be typewritten in Licensee's own words, double-spaced, at least two pages and no more than three pages in length, and shall list references used to prepare the report. Moreover, Licensee's report on medical emergencies shall include his protocol for responding to various types of medical emergencies that may arise in a dental office and listing the equipment or medication Licensee has obtained to facilitate his response to those types of emergencies.

b. Recordkeeping Evaluation and Report. Within six months of the effective date of this order, Licensee shall hire Dr. Ron Geistfeld or another recordkeeping consultant pre-approved by the Committee for a follow-up recordkeeping evaluation at Licensee's dental office. Licensee must provide to the consultant a copy of this stipulation and order prior to receiving an evaluation. Within 14 days of the completion of the evaluation, Licensee shall cause the consultant to provide to the Committee an extensive written report of the evaluation and compliance recommendations. Licensee shall bear the costs of this evaluation, the preparation of the report, and compliance with any recordkeeping recommendations. Along with the consultant's report, Licensee shall include sample recordkeeping forms that Licensee has begun to use in his practice.

c. Prophylactic Antibiotics Report. Within nine months of the effective date of this order, Licensee shall submit a two-page written report regarding the latest guidelines by the American Heart Association on pre-medications using prophylactic antibiotics relative to patients and their medical history. In addition, Licensee shall describe his office

protocol for reviewing and authorizing pre-mediations to patients from the initial contact with patient to the date the patient takes the pre-mediations.

d. Infection Control Report. Within 12 months of the effective date of this order, Licensee shall submit to the Committee a written report that includes his protocol establishing infection control procedures and how Licensee has implemented these procedures and any recommendations made by his infection control consultant for use in his office. Licensee's protocol must be current and in compliance with the Centers for Disease Control and Prevention (CDC) Guidelines for Infection Control in Dental Health-Care Settings-2003. In addition, Licensee and each staff member shall sign the protocol to verify that everyone has read it and to confirm that the protocol reflects procedures currently in place and adhered to by Licensee and his staff members. Licensee's report shall be typewritten in his own words and double—spaced with no limit as to the number of pages in length.

e. Auxiliary Duties/Supervision Report. Within 12 months of the effective date of this order, Licensee shall submit to the Committee a written report signed and dated by Licensee and each staff member regarding the levels of supervision and delegation of duties which unregistered and registered dental assistants are authorized to perform in accordance with Minnesota Rules 3100.8400 and 3100.8500. Licensee's report shall be typewritten in his own words, double—spaced, and at least two pages in length.

5. Jurisprudence Examination. Within 90 days of the effective date of this order, Licensee shall take and pass the Minnesota jurisprudence examination with a score of at least 75 percent. Licensee may take the jurisprudence examination within the 90-day period as many times as necessary to attain a score of 75 percent, however, Licensee may take the

examination only once each day. Within 10 days of each date Licensee takes the jurisprudence examination, Board staff will notify Licensee in writing of the score attained.

6. Office Inspections.

a. Infection Control Inspection. Licensee shall fully cooperate with an unannounced office visit by a representative of the Board conducted for the purpose of inspecting the safety and sanitary conditions present in Licensee's office. The Board's representative shall conduct the inspection during normal business hours. The Board's representative shall complete at least one unannounced office visit pursuant to this paragraph, additional visits shall be at the discretion of the Committee.

b. Recordkeeping Inspection. Licensee shall cooperate with at least one unannounced office visit during normal business hours by a representative of the Board, additional visits shall be at the discretion of the Committee. The representative shall randomly select, remove, and make copies of original patient records, including radiographs, to provide to the Committee for its review of Licensee's recordkeeping practices.

7. Reimbursement of Costs. Licensee shall pay the Board the sum of \$2,000 as partial reimbursement for the Board's costs in this matter. Payments shall be made by certified check, cashier's check, or money order made payable to the Minnesota Board of Dentistry in two installments as follows: \$1,000 within six months of the effective date of this order, and the balance of \$1,000 within one year, or by the time Licensee petitions to have the conditions removed from Licensee's license, whichever occurs first.

8. Other Conditions.

a. Licensee shall comply with the laws or rules of the Board of Dentistry. Licensee agrees that failure to comply with the Board's laws or rules shall be a violation of this stipulation and order.

b. Licensee shall fully and promptly cooperate with the Board's reasonable requests concerning compliance with this stipulation and order, including requests for explanations, documents, office inspections, and/or appearances at conferences. Minn. R. 3100.6350 shall be applicable to such requests.

c. In Licensee's practice of dentistry, Licensee shall comply with the most current infection control requirements of Minn. R. 3100.6300 and 6950.1000 through 6950.1080, and with Centers for Disease Control and Prevention, Public Health Service, United States Department of Health and Human Services, *Guidelines for Infection Control in Dental Health-Care Settings - 2003*, Morbidity and Mortality Weekly Report, December 19, 2003 at 1.

d. If the Board receives a complaint alleging additional misconduct or deems it necessary to evaluate Licensee's compliance with this stipulation and order, the Board's authorized representatives shall have the right to inspect Licensee's dental office(s) during normal office hours without prior notification and to select and temporarily remove original patient records for duplication. Licensee shall fully and timely cooperate with such inspections of Licensee's office and patient records.

e. In the event Licensee should leave Minnesota to reside or practice outside the state, Licensee shall notify the Board in writing of the new location within five days. Periods of residency or practice outside of Minnesota will not apply to the reduction of any period of Licensee's discipline in Minnesota unless Licensee demonstrates that practice in another state conforms completely to this stipulation and order.

E. Removal of Conditions. Licensee may petition to have the conditions removed from Licensee's license at any regularly scheduled Board meeting provided that Licensee's petition is received by the Board at least 30 days prior to the Board meeting. Licensee shall have the burden of proving that Licensee has complied with the conditions and that Licensee is qualified to practice dentistry without conditions. Licensee's compliance with the foregoing requirements shall not create a presumption that the conditions should be removed. Upon consideration of the evidence submitted by Licensee or obtained through Board investigation, the Board may remove, amend, or continue the conditions imposed by this order.

F. Fine for Violation of Order. If information or a report required by this stipulation and order is not submitted to the Board by the due date, or if Licensee otherwise violates this stipulation and order, the Committee may fine Licensee \$100 per late report or other violation. Licensee shall pay the fine and correct the violation within five days after service on Licensee of a demand for payment and correction. If Licensee fails to do so, the Committee may impose additional fines not to exceed \$500 per violation. The total of all fines may not exceed \$5,000. Licensee waives the right to seek review of the imposition of these fines under the Administrative Procedure Act, by writ of certiorari under Minn. Stat. § 480A.06, by application to the Board, or otherwise. Neither the imposition of fines nor correction of the violation will deprive the Board of the right to impose additional discipline based on the violation.

G. Additional Discipline for Violation of Order. If Licensee violates this stipulation and order, Minn. Stat. ch. 150A, or Minn. R. ch. 3100, the Board may impose additional discipline pursuant to the following procedure:

1. The Committee shall schedule a hearing before the Board. At least ten days prior to the hearing, the Committee shall mail Licensee a notice of the violation alleged

by the Committee and of the time and place of the hearing. Within seven days after the notice is mailed, Licensee shall submit a response to the allegations. If Licensee does not submit a timely response to the Board, the allegations may be deemed admitted.

2. At the hearing before the Board, the Committee and Licensee may submit affidavits made on personal knowledge and argument based on the record in support of their positions. The evidentiary record before the Board shall be limited to such affidavits and this stipulation and order. Licensee waives a hearing before an administrative law judge and waives discovery, cross-examination of adverse witnesses, and other procedures governing administrative hearings or civil trials.

3. At the hearing, the Board will determine whether to impose additional disciplinary action, including additional conditions or a limitation on Licensee's practice, or suspension or revocation of Licensee's license.

H. Other Procedures for Resolution of Alleged Violations. Violation of this stipulation and order shall be considered a violation of Minn. Stat. § 150A.08, subd. 1(13). The Committee shall have the right to attempt to resolve an alleged violation of the stipulation and order through the procedures of Minn. Stat. § 214.103, subd. 6. Nothing herein shall limit (1) the Committee's right to initiate a proceeding against Licensee pursuant to Minn. Stat. ch. 14, or (2) the Committee's and the Board's right to temporarily suspend Licensee pursuant to Minn. Stat. § 150A.08, subd. 8, based on a violation of this stipulation and order or based on conduct of Licensee before or after the date of this stipulation which is not specifically referred to in paragraph B. above.

I. Attendance at Conference. Licensee attended a conference with the Committee on December 16, 2005. The following Committee members attended the conference: Freeman

Rosenblum, D.D.S.; Ron King, D.D.S.; and Nadene Bunge, D.H. Assistant Attorney General Tamar N. Gronvall represented the Committee at the conference. Licensee was represented by John M. Degnan in this matter, who has advised Licensee regarding this stipulation and order.

J. Waiver of Licensee's Rights. For the purpose of this stipulation, Licensee waives all procedures and proceedings before the Board to which Licensee may be entitled under the Minnesota and United States constitutions, statutes, or the rules of the Board, including the right to dispute the facts contained in this stipulation and order and to dispute the adequateness of discipline in a contested proceeding pursuant to Minn. Stat. ch. 14. Licensee agrees that upon the application of the Committee without notice to or an appearance by Licensee, the Board may issue an order imposing the discipline specified herein. The Committee may participate in Board deliberations and voting concerning the stipulation. Licensee waives the right to any judicial review of the order by appeal, writ of certiorari, or otherwise.

K. Board Rejection of Stipulation and Order. In the event the Board in its discretion does not approve this stipulation or a lesser remedy than specified herein, this stipulation and order shall be null and void and shall not be used for any purpose by either party hereto. If this stipulation is not approved and a contested case proceeding is initiated pursuant to Minn. Stat. ch. 14 and section 150A.08, Licensee agrees not to object to the Board's initiation of the proceeding and hearing the case on the basis that the Board has become disqualified due to its review and consideration of this stipulation and the record.

L. Record. This stipulation, related investigative reports and other documents shall constitute the entire record of the proceedings herein upon which the order is based. The investigative reports, other documents, or summaries thereof may be filed with the Board with this stipulation. Any reports or other material related to this matter which are received after the

date the Board approves the stipulation and order shall become a part of the record and may be considered by the Board in future aspects of this proceeding.

M. Data Classification. Under the Minnesota Data Practices Act, this stipulation and order is classified as public data. Minn. Stat. § 13.41, subd. 4. All documents in the record shall maintain the data classification to which they are entitled under the Minnesota Government Data Practices Act, Minn. Stat. ch. 13. They shall not, to the extent they are not already public documents, become public merely because they are referenced herein. Pursuant to federal rule (45 C.F.R. parts 60 and 61), the Board must report the disciplinary action contained in this stipulation and order to the National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank.

N. Entire Agreement. Licensee has read, understood, and agreed to this stipulation and is freely and voluntarily signing it. This stipulation contains the entire agreement between the parties hereto. Licensee is not relying on any other agreement or representations of any kind, verbal or otherwise.

O. Service and Effective Date. If approved by the Board, a copy of this stipulation and order shall be served personally or by first class mail on Licensee. The order shall be effective and deemed issued when it is signed by the President or Vice-President of the Board.

LICENSEE


EDWARD C. LINDEN, D.D.S.

Dated: 8/28/06, 2006

COMPLAINT COMMITTEE

By: 
MARSHALL SHRAGG
Executive Director

Dated: September 5th, 2006

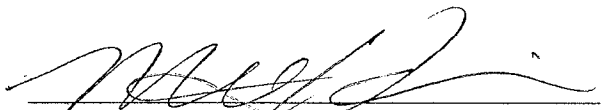
ORDER

Upon consideration of the foregoing stipulation and based upon all the files, records, and proceedings herein,

The terms of the stipulation are approved and adopted, the recommended disciplinary action set forth in the stipulation is hereby issued as an order of this Board placing LIMITATIONS and CONDITIONS on Licensee's license effective this 15th day of September, 2006.

MINNESOTA BOARD
OF DENTISTRY

By: _____



MARK W. HARRIS, D.D.S.

President