

Board of Dentistry - Updates

April 2016

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President's Message



In his book "Change Agents" author Brian Tracy states "most people who are unhappy in life have no goals". Therefore we can infer from this statement that most people who are happy have goals. I have had the good fortune to work with Brian and many other good people whom I have been able to call role models and mentors. In my role as Board President this year, I have been able to call upon leaders in all areas of dentistry such as Education, Clinical Practice, Allied Staff, and Organized Dentistry. I have noticed a common theme in all of these interactions is that all these people have goals. It is in the striving to achieve these goals that they (We) all find happiness.

We have goals at the Board of dentistry too. One of these goals is to fulfill the Mission of the Board: "To ensure that Minnesota citizens receive quality dental healthcare from

competent dental healthcare professionals." It is the Board's responsibility to determine what constitutes "quality care" and to define what it means to be a "competent healthcare professional." Invariably, conflict will occur and complaints will surface. A majority of these boil down to communication. It is how we communicate with each other that many times determines whether a complaint gets filed or merely information is exchanged. I hope to be able to continue to develop a culture of mutual respect amongst our board, our staff, and our licensees.

Many of you know that we have recently hired several new staff members including our new Executive Director Bridgett Anderson. A personal goal that I have is to work closely with our Executive Director to continue to promote this culture. It is truly a balancing act to be able to evaluate the goals and agendas that come before us and partner with these organizations to realize the mission of the board. In this we learn and grow each day.

I would like to close with a quote from Earl Nightingale who defined success as "the progressive realization of a worthy ideal." We continue to chart our course for the future. The mission of the board truly is a worthy ideal.

Steven Sperling, DDS

A Message from the Executive Director



My first day in the new office.

Thank you for taking the time to read our Board newsletter. I am excited to have started on my journey a few months ago as the new Executive Director for the Board of Dentistry. For those of you that know me, it is evident that I am very passionate about dentistry.

Some say it is in my blood, as

I come from a dental family and had great mentors that led to my career in dentistry; my grandfather, father, and several other family members all chose dentistry as a career.

I certainly understand why.

My specific interests include education, policy, public health and safety in dentistry. I have worked extensively with various aspects of dental regulation, dental practice management, compliance, and education. I enjoy research and evidence based dentistry and have made a firm commitment to never stop learning. I hope to bring a unique perspective to the Board and staff in all that we do. We are constantly looking at ways that we can improve our processes and interaction with licensees. This position provides me the privilege of working with my great staff and Board members to further our mission and plan for the future. One of my goals is to promote positive engagement with the Board.

Be sure to look for more communications from us in the coming months, along with a social media presence!

Each month we have several open committee meetings and I encourage licensees that have interest to attend via phone or in person. We discuss important issues regarding dental

regulation including; the Dental Practice Act, Board of Dentistry Rules, licensing, policy, and professional development. We like to see and hear from you!

Please understand that if a complaint is filed against you, we can assure that all licensees will be treated fairly, with respect and dignity, throughout the complaint process. Many times, the process provides the opportunity to educate licensees and help them achieve compliance. We also work closely with the Health Professional Services Program, which provides licensees with impairment or chemical dependency concerns the ability to gain support in their recovery and promote ongoing accountability. All of these considerations can help licensees safely stay in practice and continue to provide quality dental services.

As Dr. Sperling shared, the Board's mission is to *"Ensure that Minnesota citizens receive quality dental health care from competent dental health care professionals"*. We want to make sure that we are providing services through licensing and compliance that lead to positive outcomes, which allows us to ensure that we are fulfilling this mission.

I appreciate the confidence that has been given to me to serve in this position and the citizens of the State of Minnesota. I am also inspired to be able to continue to work with all of the skilled and knowledgeable dental professionals that are providing care in Minnesota.

I find that every message ends with a great quote. *"The secret of change is to focus all of your energy, not on fighting the old, but on building the new"*- Socrates

In Your Service,

Bridgett Anderson LDA, MBA - Executive Director

Update on Minnesota Prescription Monitoring Program

There is proposed legislation [SF1440](#)/ [HF1652](#) that would mandate all prescribers with a DEA number and the ability to prescribe controlled substances register for a PMP account. Of important distinction, the proposed mandated registration does not mandate the **use** of the PMP prior to any controlled substance being prescribed.



The current proposed legislation would also allow the PMP to retain information in the system longer than 24 months, which

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can help with data collection and trend analysis. The drug gabapentin would also be added to the list of substances tracked by the system. Although it is not a controlled substance, it is a common drug used for seizures and pain management and has potential for abuse. The bill also would allow the continuance of the PMP task force and the ability for the program to continue sending prescriber alerts to help identify and communicate doctor shopping behaviors.

Prescribers can register for a PMP account [here](#).

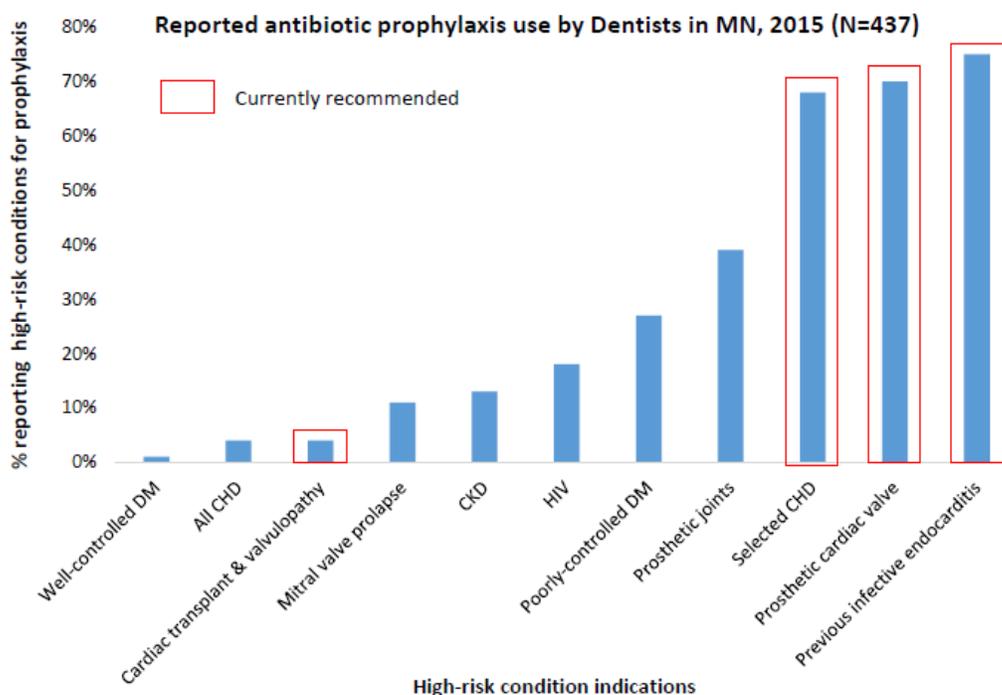
Highlighting Appropriate Antibiotic Prophylaxis Use

Antibiotic resistance is a critical public health issue. Because antibiotic use drives resistance, it is important that antibiotics be used only when indicated. In recent years, the guidelines for antibiotic prophylaxis prior to dental procedures issued by the American Dental Association (ADA), American Academy of Orthopaedic Surgeons (AAOS), and American Heart Association (AHA) have been updated based on the scientific evidence as follows:

1. Prophylactic antibiotics are generally not recommended prior to dental procedures to prevent prosthetic joint infection. For patients with a history of complications with joint replacement surgery, the orthopedic surgeon should be consulted to deem if prophylactic antibiotics are necessary.
2. Antibiotic prophylaxis should be considered for patients with select cardiac conditions (fewer conditions than previously recommended) to prevent infective endocarditis: (1) prosthetic cardiac valve or prosthetic material used for cardiac valve repair, (2) history of infective

endocarditis, (3) cardiac transplant that develops cardiac valvulopathy, (4) unrepaired cyanotic congenital heart disease, including palliative shunts and conduits, (5) completely repaired congenital heart defect with prosthetic material or device, whether placed by surgery or by catheter intervention, during the first six months after the procedure or (6) repaired congenital heart defect with residual defect at the site or adjacent to the site of a prosthetic patch or a prosthetic device (that inhibit endothelialization) For patients with these conditions, prophylaxis is recommended for all dental procedures that involve manipulation of gingival tissue or the periapical region of teeth or perforation of the oral mucosa.

In the fall of 2015, the Minnesota Department of Health partnered with the Minnesota Dental Association to survey membership on practices regarding antibiotic prophylaxis. The survey found varying approaches toward antibiotic prophylaxis (See Figure). Dentists perceived that [guidelines](#) were conflicting/confusing and were interested in additional resources on [antibiotic selection and risks](#).



* DM: Diabetes Mellitus Type 2; CHD: Congenital Heart Disease; CKD: Chronic Kidney Disease; HIV: Human Immunodeficiency Virus

Important News from the CDC

Last week, the Centers for Disease Control and Prevention released additional resources for dental professionals on best practices that address the prevention of infectious disease transmission in dental settings. The comprehensive guide “Summary of Infection Prevention in Dental Settings: Basic Expectations for Safe Care” includes practical infection control guidance that can be used in dental practices. The new resource also includes an **Infection Prevention Checklist**. The MN Board of Dentistry requires compliance with the most current CDC Guidelines for Infection Control in Dental Health-Care Settings (2003). The Board of Dentistry will be utilizing this tool and other educational tools to communicate with licensees on requirements and to promote compliance. For more information and to access the new materials please visit the [CDC Division of Oral Health](http://www.cdc.gov/oralhealth/).



Corrective Actions

Complaint matters are reviewed on a case-by-case basis. The Board is not always able to prove each allegation from complaints received. Agreements for Corrective Action (ACAs) are sometimes used to resolve complaints which allege violation(s) of the Dental Practice Act when the specific, individual circumstances of the case are determined not to warrant disciplinary action.

Profession	Violation(s)	Remedies
Dentist 11/23/15	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> Licensee allowed a dental assistant employed in office perform expanded duties beyond those allowed by an unlicensed individual Dental assistant became unlicensed due to failure to renew license by expiration date 	<u>Jurisprudence Examination</u> <u>Written Report</u> <ul style="list-style-type: none"> Specific information addressing office protocols for posting credentials and renewal certificates Protocol for tracking license expiration and renewals <u>Community Service Hours</u> <ul style="list-style-type: none"> 25 hours of unpaid community service in dental or non-dental related volunteer organization
Dentist 12/14/15	<u>Substandard Periodontal Care</u> <ul style="list-style-type: none"> Failed to thoroughly assess all periodontal conditions and provide a periodontal diagnosis and treatment plan <u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Periodontics training Treatment Planning/Recordkeeping Professional Boundaries <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice
Dental Assistant 12/23/15	<u>Failure to Maintain Active Licensure</u> <ul style="list-style-type: none"> Licensee failed to renew dental assisting license in a timely manner, resulting in a lapse in licensure 	<u>Written Report</u> <ul style="list-style-type: none"> Specific information addressing protocol for maintaining posting credentials tracking license expiration and renewals Importance of maintaining licensure requirements <u>Community Service Hours</u> <ul style="list-style-type: none"> 8 hours of unpaid community service for a voluntary dental access clinic
Dentist 12/30/15	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records Failure to maintain consistent entries regarding treatment planning Failure to document appropriate informed consent 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping course <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Other Written Reports</u> <ul style="list-style-type: none"> Specific information addressing protocol for informed consent and most current guidelines for prophylactic antibiotics <u>Office Inspection</u> <ul style="list-style-type: none"> Recordkeeping Inspection - Unannounced office visit and review of recordkeeping

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Corrective Actions

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Dentist 1/14/16	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records Failure to maintain consistent entries regarding treatment planning and informed consent 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping course <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice
Dentist 1/15/16	<u>Substandard Infection Control/Sanitary Conditions</u> <ul style="list-style-type: none"> Failure to use appropriate PPE for tasks being performed Failure to perform weekly spore testing and maintain reports. Retained expired medication(s) Failure to maintain inventory of dental products/chemicals <u>Substandard Prosthodontic/Diagnostic Care</u> <ul style="list-style-type: none"> Failure to recognize and communicate to patient regarding defective restoration placed by licensee <u>Unprofessional Conduct</u> <ul style="list-style-type: none"> Failure to maintain continuous CPR Certification as required for licensure Misleading website/advertising regarding sedation dentistry services	<u>Coursework</u> <ul style="list-style-type: none"> Fixed Prosthodontic Course <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Additional Written Reports to the Board</u> <ul style="list-style-type: none"> Protocols for Diagnostic/Prosthodontics/Restorative Care Sedation: comparison of minimal and moderate sedation <u>Retain Infection Control Consultant</u> <u>Office Inspection</u> <ul style="list-style-type: none"> Infection Control Inspection - Unannounced office visit and review of safety and sanitary conditions Make necessary changes to website/advertising regarding sedation services provided and report to Board on changes.
Dentist 1/25/16	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records Failure to maintain consistent entries regarding recordkeeping for endodontic treatment 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice Specific details on the importance of recordkeeping throughout endodontic care <u>Office Inspection</u> <ul style="list-style-type: none"> Recordkeeping Inspection - Unannounced office visit and review of recordkeeping
Dentist 2/22/16	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records <u>Substandard Endodontic Care/ Treatment Planning</u>	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice
Dentist 2/25/16	<u>Offense Unrelated to the Practice of Dentistry; involving an act of moral turpitude</u> <ul style="list-style-type: none"> Licensee pled guilty to a charge of a misdemeanor assault offense 	<u>Coursework</u> <ul style="list-style-type: none"> Anger Management <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Community Service Hours</u> <ul style="list-style-type: none"> 80 hours of unpaid community service for a voluntary dental access clinic
Dentist 3/08/16	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> Licensee allowed a dental assistant employed in office perform expanded duties beyond those allowed by an unlicensed individual Dental assistant became unlicensed due to failure to renew license by expiration date 	<u>Written Report</u> <ul style="list-style-type: none"> Specific information addressing office protocols for posting credentials and renewal certificates Protocol for tracking license expiration and renewals <u>Community Service Hours</u> <ul style="list-style-type: none"> 20 hours of unpaid community service

Important Review [Minnesota Board of Dentistry Recordkeeping Rules 3100.9600.](http://www.mn.gov/boards/dentistry)

DISCIPLINARY ACTIONS:

November 1, 2015 – April 15, 2016

Click on licensee name to see the full text of the disciplinary action

<i>Licensee</i>	<i>License #</i>	<i>City</i>	<i>Date of Action</i>	<i>Type of Order</i>
Brettin, Bryan T.	D11644	Hudson, WI	1/15/2016	Conditional
Farmer, Katlin C.	A14775	Wayzata	1/15/2016	Unconditional
Johnson, Linda Marie	A1998	Plymouth	1/15/2016	Conditional
Murphy, Kimberlee M.	D10230	Crystal	1/15/2016	Unconditional
Starcznski, Kenneth	D9703	Minnetonka	1/15/2016	Unconditional
Wagner, Meaghan E.	A13085	Hibbing	1/15/2016	Unconditional
Weissend, Ariana	R604	Minneapolis	1/15/2016	Conditional
Tompach, Paul C	D11128	Edina	1/29/2016	Order Temporary Suspension & NOH
Odgers, Jane E.	D9999	Princeton	2/10/2016	Revocation
Bussa, Michael J.	D9268	Duluth	2/10/2016	Revocation
Sutton, Connie	A6962	Minneapolis	2/23/2016	Order Temporary Suspension & NOH
Tompach, Paul C.	D11128	Edina	3/11/2016	Stayed Suspension, Limited & Conditional
Barbier, Julie	A8177	Bloomington	3/21/2016	Suspension
Sutton, Connie	A6962	Minneapolis	3/28/2016	Stayed Suspension & Conditional
Sutton, Connie	A6962	Minneapolis	3/29/2016	Order to Rescind Order for Temporary Suspension
Bodin, Robert	D7172	Edina	04/15/2016	Conditional
Martin, Molly A.	A11190	St. Paul	04/15/2016	Stayed Suspension & Conditional
Sawyer, Michael	D10303	Rochester	04/15/2016	Stayed Suspension & Conditional
Swirtz, Stephanie	A12206	Brooklyn Center	04/15/2016	Unconditional

Upcoming Board Meetings



July 15, 2016
October 14, 2016
January 13, 2017
April 21, 2017

For a listing of all other meetings,
please visit: <http://www.mn.gov/boards/dentistry/board/meetings.jsp>

Board Members

Steven Sperling, DDS, President (2018) Rochester
John "Jake" Manahan, Public Member, Vice President (2019) ..Bloomington
Teri Youngdahl, LDA, Secretary (2018) Elk River
Neal Benjamin, DDS (2017).....Lino Lakes
Nancy Kearn, DH (2017) Wyoming
Paul Walker, DDS (2019)..... Shoreview
Douglas Wolff, DDS (2019) St. Paul
David Gesko, DDS.....Shorewood
Allen Rasmussen, MA, BS, Public Member.....International Falls

Board Staff

Bridgett Anderson.....Executive Director
Deborah Endly.....Compliance Officer
Sheryl Herrick.....Office Manager
Amy Johnson.....Licensing & Professional Dvlpmnt Analyst
Kathy Johnson.....Legal Analyst
Mary LieschSenior Discipline & Complaints Investigator
Diane Anderson.....Complaint Analyst
Joyce Nelson.....Licensing Director
Carolyn Tanner.....Administrative Assistant
Vicki Vang.....Administrative Assistant