President’s Message

As of July 2017, the Board of Dentistry has a new look. Governor Dayton appointed three new members to the board: Dr. Matt Anzelc, a retired dentist from Hibbing Minnesota, now residing in Lake Elmo, Ms. Ruth Dahl, a public member from Northfield, Minnesota, and Ms. Christy Jo Fogarty, a dental hygienist and advanced dental therapist, from Farmington, Minnesota. The Board, along with the oral health community, would like to extend our congratulations and welcome! I would urge you to learn more about each of them on the Board’s website.

This is an engaging year for the Board. There are many important policy matters that are requiring our attention. The dental profession and public are aware of the opioid crisis and the necessity for health professionals to modify their prescribing practices. Please refer to the board’s website for the latest information on opioids and the Board’s statement on the use of opioids in dentistry.

Recent court decisions throughout the United States have challenged the authority of all boards to justify regulations by showing that they are necessary to protect public health and safety. In addition, emerging dental practice models that include the use of dental service organizations (DSOs) to provide business support for the health professional and the subsequent impact to the dentist-patient relationship, have continued to be important areas of discussion. It is imperative
the business demands of the DSO do not unduly interfere with what the dentist determines to be in the best interest of the patient. The Board Policy Committee is currently reviewing Board advertising rules to evaluate consistency with a court ruling last month. The U. S. Court of Appeals for the 5th Circuit found that the Texas Board of Dentistry did not sustain the burden of showing that the Board’s refusal to allow certain dentists to advertise as specialists, each of whom was certified as a “diplomat” by a certifying board in a specialty not recognized by the American Dental Association, was for the protection of public health and safety. Hence, the Board’s action was found to be unconstitutional. Although Minnesota’s rules and policies are somewhat different from those in Texas, the board feels it is good policy to make sure statutes and rules all pass constitutional application. The committee and full Board expect to complete the review by mid-October.

The Board is also drafting a proposal for legislation that would allow us to review and clarify the agreement between a dentist and a dental service organization. This is an effort to assure that the dentist/patient relationship is not compromised by any business arrangement. It would also allow the Board to keep a record of all dental service organizations, which currently are not licensed by the Board of Dentistry. In addition, we are considering drafting best practice guidelines that would be available to dental professionals to offer suggestions on the importance of patients receiving care based upon best practices in oral health care, not necessarily on best business practices. When considering any change to policy, the Board makes recommendations for changes only after engaging stakeholders and receiving input from as many interested parties as reasonably practical.

John “Jake” Manahan, JD, Board President

A Message from the Executive Director

Summer is my favorite time of the year. Enjoying the beautiful Minnesota outdoors, fishing, swimming, being anywhere near one of our thousands of lakes. We are certainly starting out the season fresh here at the Board, with the addition of three new Board members! We look forward to working with each of them over the next four years.

This time of year is also a good time for the Board to work on preparation for rulemaking and the next Legislative session, although it feels as though the last one just ended. We will have several committee meetings in the next few months to prepare policy and rule changes for the coming year. Please get on our meeting listserv so you can stay in the know and provide comments on any proposed changes, as they are both welcomed and appreciated. Email Carolyn.Tanner@state.mn.us to get your email registered to receive Board meeting notifications.

Legislation for Collaborative Dental Hygiene passed and has been signed into law, effective August 1st. Please view the changes below:

- 150A.10 subd. 1a has been amended by Chapter 30, Section 1;
- 150A.10 subd. 2a has been added by Chapter 30, Section 2;
- 150A.10 subd. 4 has been amended by Chapter 6, Article 11, Section 51

Please see the Legislative Section of the Newsletter for more session highlights.

As a follow up from our July Board meeting, the Board will not be pursuing the elimination of the OSCE examination as a pathway for licensure at this time.

I wanted to take the time to call attention to the UMN School of Dentistry, in efforts led by Dr. Harold Tu and colleagues, regarding responsible prescribing. A recent news article in the New York Times highlighted the efforts of the school to reduce opioid prescribing and educate students on alternatives. There was also a follow up news story on Kare 11. Their efforts have garnered national attention and that is certainly a commendable effort. The Board is continuously seeking ways to inform and educate prescribers on professional responsibility and the changing standard of care in prescribing for acute pain. Dr. Harold Tu, Dr. Angela Rake, Dr. Rich Nadeau, Dr. Sheila Riggs and colleagues have all provided helpful resources to the Board in this arena. Thank you!

Board staff have been very busy with licensing new candidates and working on updating our process and procedure manual for complaints and compliance issues. I am very excited about the continued work in simplifying process by increasing IT and database infrastructure to support a “paperless” Board. Thank you to the staff for contributing their years of collective experience and ideas in efforts to continuously improve our operations. They are amazing people and I am truly blessed to work with this team!

Bridgett Anderson, LDA, MBA, Executive Director
Welcome New Board Members

Christy Jo Fogarty, DH, ADT

Ms. Fogarty was appointed by Governor Dayton to the Board on July 1, 2017. Ms. Fogarty has been a licensed dental hygienist for 18 years and was the first certified advanced dental therapist in Minnesota, and the country. She works for Children’s Dental Services in Minneapolis. She is very active in her community, having served three terms as a member of the Farmington City Council from 2002-2014, chair of the Economic Development Authority, and chair of the Farmington Royalty Committee. In 2009, Ms. Fogarty was appointed by Governor Pawlenty to serve on the Board of Water and Soil Resources. In 2012, the Minnesota Supreme Court appointed Ms. Fogarty to the Commission on Judicial Review for District 1. Ms. Fogarty replaces Ms. Nancy Kearn on the Board.

Matt Anzelc, DDS

Dr. Anzelc was appointed by Governor Dayton to the Board on July 1, 2017. He is a graduate of both St. Thomas College and the University of Minnesota Dental School. Dr. Anzelc retired in 2015 after 41 years of dentistry in Hibbing, Minnesota. He chaired the District and State Peer Review and Legislative Affairs Committees. He was also Past President and Guest of Honor of the Northeastern District Central Society and Past Guest of Honor of the Minnesota Dental Association. He has memberships in the American Dental Association, the Minnesota Dental Association and the American College of Dentists. Dr. Anzelc replaced Dr. Neal Benjamin on the Board.

Ruth Dahl

Ruth Dahl was appointed by Governor Dayton to the Board as a public member on July 1, 2017. Ms. Dahl, of Northfield, is the Director of Development at Three Links Foundation. She has worked in senior services and housing for 20 years and has been involved with funding work with two other organizations that service seniors. She was on the Board of Stablish Foundation and the Board of Leading Aging Minnesota. Ms. Dahl replaces Mr. Allan Rasmussen on the Board.
Jenn’s Vision:
The Importance of Patient Safety

Jenn Morrone is a patient safety advocate from New Jersey who lost her vision due to a bacterial infection that was caused when a dental syringe was accidentally dropped in her eye when she was having an anesthetic injection during a dental procedure.

Did you ever think that a trip to the dentist would change your life in this way?

JM: No, of course not! I trusted my Dentist 100% and never in any way thought that he was not following suggested guidelines.

You lost an eye due to this incident, tell me about how this changed your daily life.

JM: Well, for starters... I am blind in one eye now. I have to put my eye in and take it out everyday. I fall all the time, no balance. I must wear sunglasses in the sun because my eye waters constantly. I get daily migraines and I have been diagnosed with PTSD.

What is the most important thing dental professionals can do to help prevent this?

JM: Offer Eye Protection for EVERY procedure for EVERY patient.

What do you want to tell providers about your incident?

JM: That it is 100% preventable!! 1 simple step (providing eye protection) can save someone from ever having to go through this again!

Do you think that the laws should be changed to require patient eye protection as well as dental provider eye protection?

JM: YES! It needs to be.... Why are the dentists and hygienists protected but not the patient? (Referring to CDC and OSHA requirements for PPE for healthcare workers)
The HHS Omnibus Bill passed in special session and included the Board of Dentistry appropriations and policy items. There was a bill relating to collaborative dental hygiene practice that also passed this session. Here are the sections of the Dental Practice Act that were impacted this session. Of note, there was also legislation that passed regarding limiting opioid prescribing for acute dental pain. Here is the language:

Limit on quantity of opiates prescribed for acute dental and ophthalmic pain. a) When used for the treatment of acute dental pain or acute pain associated with refractive surgery, prescriptions for opiate or narcotic pain relievers listed in Schedules II through IV of section shall not exceed a four-day supply. The quantity prescribed shall be consistent with the dosage listed in the professional labeling for the drug that has been approved by the United States Food and Drug Administration. (b) For the purposes of this subdivision, "acute pain" means pain resulting from disease, accidental or intentional trauma, surgery, or another cause, that the practitioner reasonably expects to last only a short period of time. Acute pain does not include chronic pain or pain being treated as part of cancer care, palliative care, or hospice or other end-of-life care. (c) Notwithstanding paragraph (a), if in the professional clinical judgment of a practitioner more than a four-day supply of a prescription listed in Schedules II through IV is required to treat a patient’s acute pain, the practitioner may issue a prescription for the quantity needed to treat such acute pain.

LEGISLATIVE UPDATES

MDH Rulemaking Involving Dental X-Ray Systems

X-Ray Rules Revision website updated with the following information:

Under “Rule Documents”
- Hand-held Dental X-ray Systems, 07/17, v1
- Intraoral Dental X-ray Systems, 07/17, v1
On May 12th, Jake Manahan, Board President and Bridgett Anderson, Executive Director, participated in commencement at the University of Minnesota School of Dentistry. There were 107 DDS candidates, 22 Bachelor’s in Dental Hygiene candidates, 8 Master’s in Dental Therapy, 31 candidates in the various dental specialties, 7 General Practice Residency, and 5 Master’s in Dental Hygiene candidates. Dr. Gary Anderson continues to serve as Interim Dean for the School of Dentistry. We appreciate the opportunity to participate in the commencement and look forward the licensing of the candidates and their future dental careers in Minnesota and beyond. Congratulations graduates!

The Minnesota Board of Dentistry has gone paperless in many processes. Almost all correspondence is currently sent via email. Per Minn. Stat. 150A.09, the Board requires that all licensees maintain a current email address on file. Newsletters, rule-making alerts, audit requests, professional corporation renewals and other very important information is communicated via email. Pass this along to other colleagues that may not be getting correspondence from the Board due to inactive email addresses. Increasing the use of electronic communication is part of the Board’s strategic plan and helps lower operational cost and adds convenience for licensees.
Who needs to report?
Dentist, dental therapist, dental hygienist, or licensed dental assistant

What is to be reported under this requirement?
Any incident that arises from the administration of nitrous oxide inhalation analgesia, general anesthesia, deep sedation, moderate sedation, local anesthesia, analgesia, or minimal sedation that results in; a serious or unusual outcome that produces a temporary or permanent physiological injury, harm, or other detrimental effect to one or more of a patient's body systems; or minimal sedation unintentionally becoming moderate sedation, deep sedation, or general anesthesia when the licensee does not have a certificate for administering general anesthesia or moderate sedation.

When does it need to be submitted?
The report must be submitted to the board on forms provided by the board within ten business days of the incident by the dentist, dental therapist, dental hygienist, or licensed dental assistant, even when another licensed health care professional who, under contract or employment with the dentist (Such as with CSS contracted providers), was the actual person administering.

What form should be used to submit the report?
Minnesota Board of Dentistry Adverse Reaction Report

OSHA Updates

NIOSH and OSAP Survey on OSHA Bloodborne Pathogens Exposure Control Plans
OSHA requires dental offices to have Bloodborne Pathogen Exposure Control Plans and annual training. In a recent survey of over 1300 respondents across the U.S, 71% of dental practices reported having an ECP. Over 10% did not have one or did not know if they had one. Read the full article in the June issue of Compendium [here](#). Does your clinic have a plan in place? The Minnesota Department of Labor MNOSHA division has resources, training materials, and consultation services available to dental clinics. Check out the [Occupational exposure to bloodborne pathogens in dentistry, 29 CFR 1910.1030](#) presentation and [Bloodborne Pathogens OSHA training workbook](#).

Online Reporting Tool- Available Aug 1st
The [web-based form](#) will allow employers to electronically submit required injury and illness data from their completed 2016 OSHA Form 300A. The webpage will offer three options for submitting data, and includes information on reporting requirements, a list of frequently asked questions, and a link to request assistance with completing the form.
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 against a licensee.

### Corrective Actions

<table>
<thead>
<tr>
<th>Profession</th>
<th>Violation(s)</th>
<th>Remedies</th>
</tr>
</thead>
</table>
| Dental Assistant | Failure to Maintain Continuous CPR  
- Licensee failed to maintain current CPR certification for approximately a one month period. | Written Report  
- Focused on maintaining current CPR certification |
| Dentist | Substandard Recordkeeping  
- Licensee failed to make or maintain an adequate patient record. | Coursework  
- Treatment Planning/Recordkeeping |
| Dentist | Substandard Recordkeeping  
- Licensee allowed patient to direct course of treatment rather than follow own procedures.  
- Licensee failed to make or maintain an adequate patient record. | Written Report  
- Focused on professional responsibility and patient boundaries.  
Coursework  
- Treatment Planning/Recordkeeping |
| Dentist | Substandard Recordkeeping and Substandard Oral Surgery  
- Licensee failed to provide an appropriate diagnosis and oral surgery.  
- Licensee failed to make or maintain an adequate patient record. | Coursework  
- Decision Making/Ethics Monitoring/Consultative Services  
- Contract for one-on-one monitoring and consultative services regarding recordkeeping and communication skills. |

### Disciplinary Actions

May 04, 2017—July 27, 2017

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

<table>
<thead>
<tr>
<th>Licensee</th>
<th>License #</th>
<th>City</th>
<th>Date of Order</th>
<th>Type of Order</th>
</tr>
</thead>
</table>
| Tompach, Paul C.  
Tompach, Paul C. | D11128  
D11128 | Edina | 04/21/17  
06/29/17 | Limited, Conditional  
Unconditional |
| Mrosak, Craig M. | D8781  
D8781 | Rochester | 07/14/17 | Conditional |
| Sari, Traci A. | A11821 | Minnetonka | 07/19/17 | Stayed Suspension, Conditional |
| Saxton, Theresa M. | A7335  
St. Paul | 07/14/17 | Unconditional |
| Tholen, Elaine | A1225  
Balaton | 07/14/17 | Unconditional |
| Tomaides, Milos | D9495  
Maple Grove | 07/14/17 | Unconditional |
| Walters (Fairbanks), Amanda | A14918  
Hibbing | 07/14/17 | Unconditional |

### Board Members

John Manahan, JD, Public Member, President (2019) ...Bloomington  
Douglas Wolff, DDS, Vice President (2019) ....................St. Paul  
Teri Youngdahl, LDA, Secretary (2018) .........................Elk River  
Matt Anzelc, DDS (2021) ............................................Lake Elmo  
Christy Fogarty, DH (2021) .......................................Farmington  
Paul Walker, DDS (2019) ...........................................Shoreview  
Steven Sperling, DDS (2018) ...................................Rochester  
Carl Ebert, DDS (2020) ..............................................Golden Valley  
Ruth Dahl, Public Member (2021) ..............................Northfield

### Board Staff

Bridgett Anderson ............................................Executive Director  
Mary Liesch ...........Investigator Senior, Complaints & Discipline  
Deborah Edly ...........Investigator Senior, Compliance Officer  
Diane Anderson ..................Complaint Analyst  
Kathy Johnson .......................Legal Analyst  
Joyce Nelson ......Director of Licensing & Professional Dvlpmnt  
Amy Johnson .....Licensing & Professional Dvlpmnt Analyst  
Sheryl Herrick .........................Office Manager  
Carolyn Tanner ..................Administrative Assistant  
David Tajima ..................Administrative Assistant