



# Winter Newsletter

February 2018

## Executive Director's Message

Happy Winter! I would like to welcome our newly appointed Board Members, Dr. David Gesko, (who previously served four years on the Board until 2016) and Dr. P. Angela Rake. Check out their bios in this newsletter edition! I am looking forward to working with the two of them and our newly elected President for this year, Dr. Doug Wolff.

Just this weekend, one of our Public Members, Ms. Ruth Dahl and I attended the Federation of the Associations of Regulatory Boards meeting in California. This was a very relevant meeting focused on current trends, challenges and changes that we face as regulators and how we can continuously improve our process and way of thinking. Portability of professional licenses was discussed at length, along with regulatory requirements in various licensed professions.

This newsletter issue is focused on having important conversations with our patients for the benefit of their oral and overall health. Patients have a right to know and be empowered to make important treatment decisions. Providers can empower them with education and information. I believe that communications between providers and patients is quite possibly one of the most important elements in patient care, along with the quality of treatment performed.

Thank you for reading our newsletter! As always, please feel free to engage with the Board, email me with questions/comments [bridgett.anderson@state.mn.us](mailto:bridgett.anderson@state.mn.us).

**Bridgett Anderson ,LDA, MBA**  
**Executive Director**

## New Board President

### **Dr. Douglas Wolff, 2018 Board President**

Dr. Wolff was appointed by Governor Dayton in June 2015. Dr. Wolff has been practicing dentistry for 17 years. He obtained his D.D.S degree from the University of Minnesota School of Dentistry and received a law degree in 2006 from William Mitchell College of Law. He is a general dentist practicing in Stillwater. Dr. Wolff is a member of the American Dental Association and the Academy of General Dentistry. We welcome Dr. Wolff as the new Board President for 2018.



## New Members



### **Dr. P. Angela Rake, Dentist Board Member**

Dr. Rake was appointed by Governor Dayton to the Board January 2018. Dr. Rake received her D.D.S. degree from the University of Minnesota School of Dentistry in 1997. She then completed an Oral and Maxillofacial Surgery Internship at the Minneapolis Veterans Affairs Medical Center. She is a graduate of the Oral and Maxillofacial Surgery training program at the University of Minnesota. In 2002, Dr. Rake joined the Dakota Valley Oral and Maxillofacial Surgery practice. She remains active in academics as an adjunct associate professor at the University of Minnesota School of Dentistry, division of Oral and Maxillofacial Surgery. Dr. Rake replaces Dr. Matt Anzelc on the Board.

### **Dr. David Gesko, Dentist Board Member**

Dr. Gesko was appointed by Governor Dayton to the Board January 2018. Dr. Gesko is the Dental Director and Senior Vice President for HealthPartners. HealthPartners is an integrated, not-for-profit, consumer-governed health system based in Minnesota providing both plan (insurance) services along with the entire spectrum of care delivery including medical and dental care. He serves on several national organizations focused on improving quality in oral health. He is on the advisory panel for the Institute for Oral Health and currently chairs the Institute for Oral and Systemic Health sponsored by Marshfield Clinic in Marshfield, Wisconsin. He previously served a four term on the Board up until 2016. Dr. Gesko replaces Dr. Paul Walker on the Board.



## February is American Heart Month



Did you know that 12 % of adults have heart disease? It can and does impact your patients. It is critically important for dental professionals, as active members of the healthcare team, to be aware of their patients medical history, medications, and current conditions.

### Important Reminders:

- Have your patients provide you with a complete list of the names and dosages of the medications they are taking for their heart condition (as well as any other prescriptions, nonprescription medications and supplements that they may be taking). Remind patients that the detailed medication information will help you decide on the best treatment course for them, including the appropriate medications to use for dental procedures and appropriate treatment modalities. Providers can also use their e-prescribing software or other online prescribing resources to check for medication contraindications.
- Have your patients provide you with the name and phone number of their primary care provider. Let your patients know that there may be health considerations that you would like to speak with their medical provider about before providing dental care.
- If a patient is particularly nervous about undergoing a dental procedure because of their heart condition, encourage them to talk with you and/or their heart doctor. Ensure the patient that dental providers and medical providers can provide information and work on strategies for managing medication contraindications, controlling dental pain, easing fear and planning for the most optimal treatment.

## The HPV Conversation

As dental professionals, there are a few things that can be uncomfortable to talk about with patients. Just as mental health and substance use conversations can be challenging at times, what about talking about sex? Human Papilloma Virus is the most common STD. It is also responsible for over 70% of oropharyngeal cancers. Dental professionals are responsible for screening and working to identify suspicious lesions, but they are not always having the conversation regarding patient risk, lifestyle habits or the available HPV vaccination. As healthcare professionals, we need to proactively treat disease, with a focus on prevention. Prevention for HPV related oral cancer involves identifying and eliminating behaviors that can influence the risk for disease. Providers cannot get the answers to questions that they need in order to best treat their patients, unless they ask them in the first place. A [recent study](#) assessed what tools are being used in practice and gauged dentists literacy in the area of HPV education for their patients. Researchers found variation among providers and this is an area of continued growth and improvement.

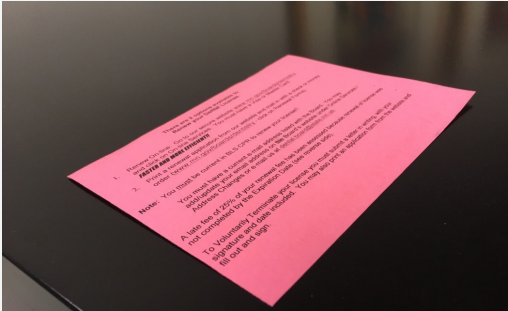
The Oral Cancer Foundation has introduced a new tool for patient engagement:

### [Introduction - Check Your Mouth](#)





## WHERE IS MY **PINK** RENEWAL POSTCARD?



The Minnesota Board of Dentistry has gone paperless. Correspondence is now sent via email. Per Minn. Stat. [150A.09](#), the Board requires that all licensees maintain a current email address on file.

Newsletters, rulemaking alerts, professional development audit requests, professional corporation renewals, **LICENSE RENEWALS** (no more **pink** cards), sedation renewals, and other very important information is communicated via email.

Please 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, helps lower operational cost, and adds convenience for licensees.

## Your Patient May Need Help... What's Next?

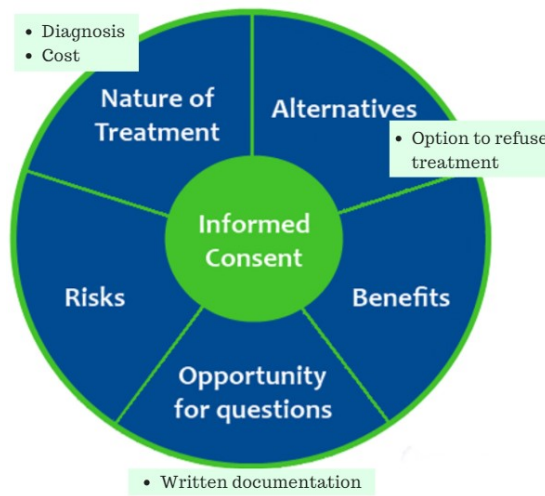
Scenario: You have identified that you may have a patient that is high risk for substance use disorder. You have checked the PMP and see multiple opioid medications prescribed by multiple providers. The patient has indicated that several years ago they received treatment for alcohol use and their medical history indicates that they suffer from chronic pain and depression. You have decided to have a conversation with the patient regarding connecting them with resources for mental health and substance use.

Dental Professionals are an integral part of the overall healthcare team. It is time for dental professionals to become comfortable with this conversation, as the opioid epidemic has impacted thousands of individuals, from varied age ranges, gender and cultures. Every dental professional in the state has likely had a patient that has been impacted.

A new resource that is available, Fast Tracker, is a virtual community that can connect patients, providers and families with treatment programs and resources. It provides a real-time searchable directory of mental health and substance use disorder resources and available programs. Visit [www.fast-trackermn.org](http://www.fast-trackermn.org) or click the icon below.



# Informed Consent



This is not new information, but always relevant and important in patient care. Patients have had the legal right to meaningful informed consent since the 1960's. However, this is still an area that can be lacking, incomplete or not well documented between patients and providers.

Patients have a right to be informed of the procedure(s)/ treatment that is being recommended to them. By receiving comprehensive information on the treatment during a conversation with their provider, they have the ability to give proper consent for the treatment.

Patients rely on their providers to provide them with an explanation of recommended treatment, treatment alternatives, an option to refuse treatment, the risk of no treatment, and expected outcomes of treatments that are being recommended. This discussion must be well documented as a part of the patient record. Many providers choose to use written consent forms for patients, especially for more complex dental procedures.

Malpractice insurance carriers may also strongly recommend a written consent form. It can be helpful to review the consent form before the procedure and then again at the time of the procedure. By doing this, the patient has an opportunity to absorb what they have learned prior to having the scheduled procedure performed. It can also be helpful to provide a step-wise consent form for treatment, which allows the patient to consent to procedures as they move along in the treatment plan. This also can facilitate an ongoing conversation with the patient. If the patient had any unexpected results or complications this can also be a good time to discuss. As patients are going through treatment it is imperative to keep the lines of communication open at all times.

Breakdowns between provider and patient communication can have further impact to the relationship and trust between the two parties. This often leads to treatment dissatisfaction or causes the patient to leave the practice if they do not feel that they are being informed, given the opportunity for questions, and collaborating in their care with the provider. Patients need to be empowered and participate in their healthcare decisions. This can lead to better health outcomes and continuity of care.

There are resources available when working with patients with language barriers, as this can be a true barrier to having the conversation with the patient. There can also be issues with low oral health literacy and the patient does not understand what they are being told. They may be embarrassed to ask more questions. Providers need to do their best to offer explanation in understandable terms.

**Engage. Empower. Preserve Informed Consent.**

## New CDT Code for Diabetes Testing



Effective January 1, 2018, there is a new CDT code for reporting Point of Care Diabetes Testing and Reporting. The code to use for this procedure is D0411. Currently, this is not listed in the scope of practice for dental therapists, assistants or hygienists, as Minnesota is a permissive state and delegated duties for allied dental professionals are listed in their respective scopes of practice in Minnesota Rules 3100. Dentists may perform the procedure. For more information on how dentists can report this code, additional regulatory considerations and resources for the patients visit, see [ADA Guide to Point of Care Diabetes Testing and Reporting](#).

## 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 against a licensee.

Profession	Violation(s)	Remedies
Dentist 01/02/2018	<u>Substandard Diagnosis</u> <ul style="list-style-type: none"><li>Licensee permitted patients and patients' parents to drive treatment planning decisions for which Licensee should have final responsibility.</li></ul>	<u>Coursework</u> <ul style="list-style-type: none"><li>Professional Boundaries course</li></ul>
Dentist 1/26/2018	<u>Substandard Diagnosis and Prosthodontic Care</u> <ul style="list-style-type: none"><li>Licensee failed to provide appropriate diagnostic and prosthodontic care.</li></ul> <u>Substandard Recordkeeping</u> <p>Licensee initially submitted only handwritten records and failed to submit the electronic records for the patient.</p>	<u>Coursework</u> <ul style="list-style-type: none"><li>Prosthodontics, including written report</li><li>Monitoring and Consultative Services for Prosthodontic Care</li></ul>

## Disciplinary Actions

October 21st 2017—February 1st 2018

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

Licensee	License #	City	Date of Order	Type of Order
<a href="#">Erickson, Brandi</a> <a href="#">Erickson, Brandi</a>	A12988	Shakopee	12/27/17 1/16/18	Order Removal Stayed Suspension Findings of Fact, Conclusions, & Order (for Suspension)
<a href="#">Las, Sheldon</a>	H6244	Cass Lake	01/12/18	Unconditional
<a href="#">Berg, Jason</a>	D12816	Virginia	01/12/18	Conditional

### Board Members

Douglas Wolff, DDS, President (2019).....St. Paul  
 Steven Sperling, DDS, Vice President (2018).....Rochester  
 Teri Youngdahl, LDA, Secretary (2018).....Elk River  
 John Manahan, JD, Past President (2019).....Bloomington  
 Christy Fogarty, DH (2021).....Farmington  
 Carl Ebert, DDS (2020).....Golden Valley  
 P. Angela Rake, DDS (2022).....Shakopee

### Board Staff

Bridgett Anderson — Executive Director  
 Mary Liesch — Investigator Senior, Complaints & Discipline  
 Deborah Endly — Investigator Senior, Compliance Officer  
 Diane Anderson — Complaint Analyst  
 Kathy Johnson — Legal Analyst

Sheryl Herrick— Office Manager  
 Joyce Nelson — Director of Licensing & Professional Development  
 Amy Johnson — Licensing & Professional Development Analyst  
 Carolyn Tanner — Administrative Assistant  
 Thamyr Obas — Administrative Assistant