BEFORE THE NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

In the Matter of: Gurvinder Bhatti, D.D.S. (License No. 9631) (Sedation Permit No. 1003)	)	**AMENDED CONSENT ORDER**

THIS MATTER is before the North Carolina State Board of Dental Examiners ["Board"] as authorized by N.C. Gen. Stat. 90-41.1(b) for consideration of an Amended Consent Order concerning Gurvinder Bhatti, D.D.S. ["Dr. Bhatti" or "Respondent"], in lieu of a formal administrative contested case hearing. Douglas J. Brocker represented the Board's Investigative Panel ["IP"]. Respondent represented himself in this Amended Consent Order. Based upon the information obtained in its investigation, the Board enters the following:

FINDINGS OF FACT

1. The Board entered a consent order involving Respondent on February 10, 2026 ["Consent Order"] following a settlement conference.

2. All findings of fact in the Consent Order, which is attached, are incorporated by reference into this Amended Consent Order.

3. Respondent was licensed to practice dentistry in North Carolina on December 6, 2013, and has held License Number 9631 since then ["License"].

4. Respondent was issued and has held a moderate conscious Sedation Permit 1003 ["Sedation Permit"] since September 28, 2016, which Respondent renewed through March 31, 2027.

5. After the Consent Order was entered and consistent with its provisions, Board Investigator and Inspector Rick Hetzel conducted a standard initial probationary visit and sedation inspection on April 8, 2026.

6. During the inspection, Investigator Hetzel identified multiple issues with sedation requirements and prohibitions, including the following issues:

a. Certain required emergency medical equipment, such as oral and nasal airways and an AED was not operational, immediately available, or accessible from the operatory and recovery room;

b. Multiple required emergency drugs, such as Epinephrine, Atropine, reversal medications, a bronchodilator, an anti-arrhythmic, and dextrose, were missing, expired, or were not immediately available and accessible from the operatory and recovery room,

c. Respondent did not maintain a current emergency drug log;

d. Respondent had used expired sedation medications to sedate patients; and

e. Respondent had not conducted required emergency medical drills with his auxiliary staff in multiple years.

7. During the sedation inspection and pursuant to a subsequent subpoena the Board issued on April 29, 2026, the Board obtained and reviewed patient sedation records that identified concerns, including the following issues:

a. Respondent's records did not have the required copy of the patient's vital signs from the monitor during the sedation procedure;

b. Respondent did not consistently perform or document an adequate pre-operative assessment of patients prior to sedation, including the patient's ASA status or designation, the patient's airway, or a physician's consultation or clearance for medically-compromised patients;

c. Respondent consistently administered sedation medications in amounts exceeding the manufacturer's maximum recommended dosage without documenting a clinical justification for doing so;

d. Respondent's records and forms did not adequately discuss all the potential risks of sedation, including possible brain damage or death, for patients to provide informed consent.

8. As part of the Consent Order, Respondent was required to have reports submitted to the Board from a practice monitor ["Monitor"]. In the first report submitted in the first quarter of 2026, from reviewing patient records the Monitor noted some of the same sedation issues as found in the inspection, such as missing patient vital monitor strips and administering sedation medication exceeding the maximum recommended dosage without documented clinical justification.

9. Shortly after the sedation inspection and review of records, Respondent voluntarily agreed to cease administering sedation until the Board completed its investigation and resolved the sedation related issues and concerns.

Based upon the foregoing Findings of Fact, the Hearing Panel enters the following:

CONCLUSIONS OF LAW

1. All conclusions of law in the attached Consent Order are incorporated by reference into this Amended Consent Order.

2. Respondent was properly notified of this matter and has consented to the entry of this Amended Consent Order.

3. As set forth in Findings of Fact 5-8, Respondent violated N.C. Gen. Stat. § 90-41(a)(6) and multiple Board regulations in the following respects:

a. Failing to have all required emergency equipment operational, immediately available, and accessible from the operatory and recovery room in violation of 21 NCAC 16Q .0103(c)(1) and (2);

b. Failing to have all unexpired emergency medications immediately available and accessible from the operatory and recovery room in violation of 21 NCAC 16Q .0103(c)(3);

c. Failing to provide training to familiarize all auxiliaries in the treatment of clinical emergencies and practice responding to clinical emergencies with all auxiliaries as a team at least every six months in violation of 21 NCAC 16Q .0103(d)(1);

d. Failing to maintain in the sedation record the printed or downloaded vital sign information from the capnograph in violation of 21 NCAC 16Q .0103(h)(4)(B), which is deemed a failure to monitor the patient as required by 16Q .0103(f)(3)-(6);

e. Failing to conduct or document an adequate pre-operative assessment in violation of 21 NCAC 16Q .0103(e) and .0302(c);

f. Administering sedative medications in amounts exceeding the maximum recommended dosage without documenting clinical justification in violation of 21 NCAC 16Q .302(d)(3);

g. Failing to provide or document adequate informed consent for the sedation procedure, including discussing all potential risks, in violation of 21 NCAC 16T .0101(12) and .0103(a)(4).

4. The above violations that occurred after February 10, 2026, also violated the Consent Order and constituted unprofessional conduct in violation of 21 N.C.A.C. 16V .0101(4).

5. Pursuant to N.C. Gen. Stat. § 90-41 and 21 N.C.A.C. 16Q .0701, failure to comply with the provisions of 21 N.C.A.C. 16Q, including those noted above, may result in suspension or revocation of Respondent's License and Sedation Permit.

ADDITIONAL FINDINGS AND CONCLUSIONS CONCERNING DISCIPLINE

1. All additional findings and conclusions in the Consent Order, which is attached, are incorporated by reference into this Amended Consent Order.

2. Much of the conduct and violations noted above occurred while Respondent's License was on probationary status under the Consent Order, which could be the basis to activate the suspension of Respondent's License in the Consent Order.

3. By violating the Dental Practice Act and the Board regulations after entry of the Consent Order, as noted herein, Respondent is subject to potential additional discipline by the Board, including suspension or revocation of his License and Sedation Permit.

4. The above findings and conclusions form a pattern requiring action concerning Respondent, including the loss of his Sedation Permit, to carry out the Board's duty to protect the public.

Based upon the foregoing Findings of Fact and Conclusions of Law, the Additional Findings and Conclusions Concerning Discipline, and with the consent of the parties hereto, it is ORDERED as follows:

ORDER OF DISCIPLINE

1. All 15 paragraphs and all provisions in the order of discipline of the attached Consent Order, including all probationary terms and conditions, are incorporated by reference into this Amended Consent Order and remain in full force and effect.

2. Respondent surrenders Sedation Permit 1003 effective upon entry of this Consent Order. Respondent shall return to the Board by the effective date his original Sedation Permit and current renewal. As a result of Respondent's surrender of his Sedation Permit, Respondent shall not administer any level of sedation to patients nor supervise a CRNA or any other person administering sedation.

3. Notwithstanding the surrender of his Sedation Permit, Respondent:

   a. May administer to patients, if clinically appropriate to do so: (i) local anesthetic; (ii) nitrous oxide; and (iii) anxiolysis but only in strict compliance with 21 NCAC 16Q .0101(3) and the interpretive statements attached to this Amended Consent Order;

   b. May utilize a permittee with a current mobile/itinerant permit issued by the Board to administer general anesthesia without supervision; and

c. Shall keep records demonstrating his use of a general anesthesia mobile/itinerant permit holder for each patient to whom sedation or general anesthesia is administered and shall provide such records to the Board upon request.

4. If Respondent in the future applies for any level of sedation permit in North Carolina, he shall provide satisfactory evidence that he has met all applicable requirements in effect at the time of his application, which for moderate conscious sedation includes submitting an application meeting all the requirements that currently are set forth in 21 NCAC 16Q .0102(a)-(c) and .0301(a)-(f), including:

a. Completing a sedation training course or program meeting all requirements in the Rule and approved by the IP in advance after the surrender of his Sedation Permit; and

b. Passing an evaluation and facility inspection by a permit holder selected by the Board and after completing the training course.

5. If Respondent subsequently applies for any level of sedation permit in the future, Respondent agrees to the following as conditions of obtaining such a permit:

a. A Sedation Practice Monitor selected by the IP ["Sedation Monitor"] shall be present in Respondent's office for first ten (10) patients to whom he administers sedation and report to the Board promptly any violations observed or upon conclusion of those first ten sedations.

b. Thereafter, the Sedation Monitor shall meet with Respondent regularly and no less than quarterly to review example patient charts selected by the Sedation Monitor, not by Respondent or employees

at the office(s) where he practices. During these meetings, the Sedation Monitor shall examine a minimum of ten example patient records to determine Respondent's compliance with the Dental Practice Act, the Board's rules, and the applicable standard of care concerning: (i) sedation treatment, procedures, and protocols; (ii) recordkeeping, including documentation of all required elements of patient treatment and sedation records; and (iii) any other issues identified by the Sedation Monitor. Respondent shall ensure that the Sedation Monitor prepares and timely submits to the Board quarterly reports with the findings concerning those issues for the quarter, **including identifying the specific patient treatment records reviewed**. The IP reserves the right to review the charts that the Sedation Monitor selects for his/her report, which records Respondent shall provide to the IP upon its request. The Sedation Monitor reports shall be due no later than April 30, July 30, October 30, and January 30 for the previous quarter in each year. Respondent is responsible for payment of all costs associated with this monitoring. If the Sedation Monitor reports information to the Board indicating that Respondent may be engaging in a violation of the Board's statutes or regulations or this Order, Respondent understands that such findings may result in further disciplinary action by the Board, including potential license suspension, following notice to Respondent and an opportunity to be heard. If the Sedation

Monitor's reports and the Board's inspections demonstrate no violations of the Dental Practice Act or the Board's rules continuously for three years, then Respondent may petition the Board to eliminate this requirement.

c. Respondent shall violate no provision of the Dental Practice Act or the Board's rules.

d. Respondent shall neither direct nor permit any of his employees to violate any provision of the Dental Practice Act or the Board's rules.

e. Respondent shall permit the Board or its agents to inspect and observe his office, conduct a random review of patient chart records, and interview employers, employees, and coworkers at any time during normal office hours.

f. Respondent's dental License shall be placed on probationary status for a minimum of three years after a new sedation permit is granted subject to the above conditions and any other conditions the Board deems necessary at the time of a potential permit reinstatement.

6. The Board shall retain jurisdiction of this matter and Respondent to enforce the provisions herein or enter orders as necessary in the future.

This the 16th day of June 2026.

THE NORTH CAROLINA STATE
BOARD OF DENTAL EXAMINERS

Casie S. Goode

Casie S. Goode
Director of Investigations

STATEMENT OF CONSENT

I, Gurvinder Bhatti, D.D.S., consent as follows solely for the purposes of this proceeding and any future proceedings before or involving the Board: I hereby certify that I have read the foregoing Amended Consent Order ["Order"] in its entirety. I assent to its terms and conditions set out in the Order and desire to resolve this matter without the need for formal proceedings. I freely and voluntarily acknowledge that I will not contest any of the findings, conclusions, or the requirements and conditions in the Order in any future proceedings before or involving the Board but make no admissions for any other purposes or proceedings. I knowingly waive any right to seek judicial review, appeal, or otherwise challenge this Order once entered. In exchange for resolving this matter without further proceedings or action and upon entry of the Order, I forever release the Board, and all its members, officials, agents, counsel, representatives, and employees, both past and present, in their individual or official capacities, from any and all liability, suits, claims, and causes of action arising prior to or as a result of the execution of this Consent Order. I agree to service of the Order to my email address on record with the Board and waive service by any other method. I understand that the Board will report the contents of this Order to the National Practitioner Data Bank and that this Consent Order will become part of the Board's permanent public record. I further acknowledge that this required reporting may have adverse consequences in other contexts, and any potential effects will not be the basis for a reconsideration of this Order. I have had the opportunity to consult with an attorney prior to signing this Order.

This the 26 day of MAY 2026.

Gurvinder Bhatti, D.D.S.

Waiver of Limited Ex Parte Communication

I understand that the proposed Amended Consent Order ["Order"] that I have signed is subject to review and approval and is not effective until approved by the Hearing Panel. **I agree and consent that the Hearing Panel members may be provided with the proposed Order for review and consideration.**

I further agree and consent that the Board staff, the Investigative Panel ["IP"], and its counsel may discuss the proposed Order and related information and documentation with Hearing Panel members for the purpose of advocating approval of the proposed Order without me or my counsel being present.

If the proposed Order is not approved, I agree and consent that neither I nor anyone on my behalf will assert that these limited ex parte communications, including review of the documents, will disqualify any Hearing Panel members from considering and deciding this matter after a contested case hearing. I also understand that rejection of the proposed Order will not be a basis for a further continuance of any scheduled hearing dates.

I also agree that I am not entitled to obtain or discover the above-referenced limited communications or the substance of these communications between the Hearing Panel members and the Board staff, the IP, and its counsel, regardless of whether the proposed Order is approved.

I have had the opportunity to consult with an attorney before signing and agreeing to this waiver of limited ex parte communication.

Gurvinder Bhatti, D.D.S.

MAY 26, 2026
Date