



E-Forum

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Sedation Rules Review

The first sedation rules review conference was held in Greensboro on March 28th. The many excellent suggestions made at the conference will be considered as the Board begins the process of reviewing and modifying current se-

dition rules. Two more conferences are scheduled: May 9, 2014 from 9-11 a.m. at the Marriott Renaissance in Asheville, and July 11, 2014 from 8:30 – 10:30 a.m. at the Hilton Inn in Greenville.

The Board Responds

From time to time licensees submit questions to the Board seeking guidance with specific issues. The answers provided by the Board are based on the specific facts submitted and should be considered as guidance only and not as an enforceable rule.

Inquiry #1: May a dentist charge a periodontal visit as a prophylaxis appointment since insurance companies typically will not pay for more than two periodontal appointments per year. Also, may a periodontal patient ever be classified otherwise?

Answer: Licensees are required to bill for the service actually performed. However, the dentist should check with the individual insurance company to determine a patient's coverage. It is possible for periodon-

tal patients to return to routine maintenance should their periodontal condition improve.

Inquiry #2: Are study models required, both initial and final, for orthodontic cases, including Invisalign.®

Answer: All orthodontic cases require both an initial and a final model. Initial models may be traditional or digital and must be maintained as part of the patient record. The final model may not be digital and must be maintained as part of the record for both traditional orthodontics and Invisalign.®

(Editor's Note: A previous version of this response incorrectly stated that initial models did not have to be maintained as part of the record.)

Inside this issue:

State Requirements for Infection Control in Dental Healthcare Set-	2
Study Clubs	2
Board Elections	3

Upcoming Board Meetings

Meetings begin at 8:30 am unless otherwise noted.

- April 11-12, 2014 Morrisville meeting begins at 1:00 pm
- May 14-15, 2014 Thistle Golf Club, Brunswick County
- June 13-14, 2014 Morrisville
- July 11-12, 2014 Greenville

State Requirements for Infection Prevention in Dental Health Care Settings

The letter below from the Department of Health and Human Services is intended for all dental healthcare providers.

Date: March 28, 2014

To: North Carolina Dental Healthcare Providers

From: Megan Davies, MD, State Epidemiologist

Re: State Requirements for Infection Prevention in Dental Health Care Settings

This memo is intended to remind all North Carolina Dental Healthcare Providers of the state requirement for infection prevention in health care settings and to provide resources for meeting these requirements.

North Carolina Administrative Code Rule 10A NCAC 41A .0206 (Rule .0206) establishes requirements for infection prevention in health care settings. According to Rule .0206, every health care organization that performs invasive procedures is required to do the following:

1. Implement a written infection control policy;
2. Ensure that health care personnel in its employ or who have staff privileges are trained in the principles of infection control and the practices required by the policy;
3. Require and monitor compliance with policy; and

Update the policy as needed to prevent the transmission of HIV, hepatitis B, hepatitis C and other blood borne pathogens.

Rule .0206 defines health care organizations as any organization that provides clinical care. Invasive procedures are broadly defined to include the use of needles to puncture skin, surgery, and dental procedures during which bleeding may occur.

Rule .0206 requires that each health care organization that performs invasive procedures designate one on-site staff member for each non-contiguous facility to direct infection prevention activities. The designated staff member in each health care facility must complete a state-approved course in infection control.

The North Carolina Statewide Program for Infection Control and Epidemiology (SPICE) has developed state-approved courses in infection control for a variety of settings, including dental settings. Courses meeting the Rule .0206 requirements for dental health care settings have been recently updated and are currently available online (<http://spice.unc.edu/infection-control-curriculum-for-dental-settings/>). For more information about state-approved courses, email SPICE (spice@unc.edu) or call 919-966-6383.

I want to take this opportunity to re-emphasize the importance of infection control in all health care settings and to encourage you to ensure your practice is compliant with these North Carolina Administrative Code requirements.

Study Clubs

Issue

How can a local dental society or association "study club" become an approved sponsor of continuing education under 21 NCAC 16R .0104?

Background

N.C. Gen. Stat. §90-31.1 requires all dentists to attend Board-approved continuing education courses in subjects relating to dentistry. In addition, N.C. Gen. Stat. §90-29(c)(5) allows the temporary practice of dentistry in North Carolina by dentists licensed in another state, territory, or country "at meetings of organized dental societies, associations, colleges or similar

dental organizations...." This exemption to the licensing requirement facilitates the free exchange of ideas, information, and expertise, while at the same time allowing dentists from other states to perform dental procedures on North Carolina citizens. Therefore, the Board must exercise care to ensure that all groups approved as sponsors of continuing education courses have sufficient resources to assume the risk of having non-licensees perform dental procedures on citizens of this state.

What constitutes a Study Club?

To be an approved sponsor for purposes of 21 NCAC 16R .0104, a study club must share some or all of the following characteristics:

- Continuity – they are on-going organizations not formed for a single short-term purpose
- Hold regular meetings
- Elect officer(s)
- Collect dues
- Treatment follow-up –establish safety protocols and appropriate follow-up for patients treated during CE
- Maintain records of meeting time, place, and events
- Have as members only licensed North Carolina dentists
- Have as their primary goal the furtherance and improvement of the practice of clinical dentistry

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Board Elections

Those interested in running for Board positions may do so by filing an appropriate petition between January 1, 2014 and midnight May 20, 2014. Two dentists and one dental hygiene position will be eligible for election this year. (One dentist member and the current registered dental hygiene member are eligible to run for a second term.) Interested parties must submit a petition before the deadline signed by not less than 10 dentists or dental hygienists respectively who are licensed to practice in North Carolina and residing or practicing in this state. Since signatures are often difficult to read and the identity of those signing the petition must be verified, please ask signatories to include their license number and print their names.

We're on the web!
ncdentalboard.org

Current Board Members

<u>Current Board Member</u>	<u>Term Expires</u>	<u>Hometown</u>
David A. Howdy, DDS (President)	2016	Washington, NC
Stanley L. Allen, DDS (Sec/Treas.)	2014*	Greensboro, NC
Kenneth M. Sadler, DDS (Past Pres.)	2015	Winston-Salem, NC
Millard W. "Buddy" Wester, DDS	2014	Henderson, NC
Clifford O. Feingold, DDS	2015*	Asheville, NC
William M. Litaker, DDS	2016*	Hickory, NC
Carla J. Stack, RDH	2014*	Charlotte, NC
James B. Hemby, Jr, PhD (Consumer)	2015	Raleigh, NC

**Eligible to run for a second term.*