BEFORE THE NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

In the Matter of: Justin Michael Runyon, D.D.S. (License No. 10981)	)	**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 a Consent Order concerning Justin Michael Runyon, D.D.S. ["Dr. Runyon" or "Respondent"], in lieu of a formal administrative contested case hearing. Carrie Meigs represented Respondent. Douglas J. Brocker represented the Board's Investigative Panel ["IP"]. Based upon the information obtained in its investigation and the consent of the parties hereto, the Board enters the following:

FINDINGS OF FACT

1. The Board is a body duly organized under the laws of North Carolina and is the proper party to bring this proceeding pursuant to the authority granted to it in Chapter 90 of the North Carolina General Statutes, including the Dental Practice Act and the Rules and Regulations of the Board.

2. Respondent was licensed to practice dentistry in North Carolina on May 18, 2018, and has held license number 10981 since then.

3. Respondent is subject to the Dental Practice Act and the Board's Rules and Regulations.

Treatment of Patient MW

4. On November 28, 2023, the Board received a complaint from Patient MW who had been treated by Respondent in January 2023 and experienced significant complications following his treatment of her.

5. Patient MW presented to Respondent's dental office on January 5, 2023, for an evaluation based on reported pain.

6. A different treatment provider in Respondent's dental office evaluated Patient MW and determined that Patient MW had gross decay on tooth #3 underneath a bridge spanning from teeth number's 3-5 and referred Patient MW to Dr. Runyon for his evaluation.

7. On January 16, 2023, Respondent examined Patient MW's teeth to determine restorability and proceed with treatment accordingly. Respondent removed the bridge and determined that both number 3 and number 5 were non-restorable due to gross decay and recommended surgical extraction.

8. Prior to the procedure, Patient MW disclosed on her medical history form that she was taking alendronate, and the dental records available to Respondent indicated that she had been taking alendronate since at least 2021. Patient MW also informed Respondent prior to the procedure that another dentist had told her she did not have enough bone for implants.

9. Individuals who take alendronate are at an increased risk for experiencing osteonecrosis of the jaw following tooth extraction.

10. Respondent did not discuss with Patient MW or document in her treatment record the increased risk that the extraction of her teeth could cause osteonecrosis due to the fact that she was taking alendronate before performing the dental procedure.

11. Respondent proceeded to extract Patient MW's teeth numbers 3 and 5 without obtaining Patient MW's informed consent to such risk or without documenting such informed consent in the treatment record.

12. A CT scan taken following Respondent's treatment of Patient MW showed bone irregularity consistent with medication-related osteonecrosis.

Treatment of Patient CW

13. On April 7, 2025, the Board received a complaint from Patient CW who had been treated by Respondent between May 2023 and March 2025.

14. On May 24, 2023, Patient CW presented to Respondent for replacement of teeth numbers 4, 18, and 19. After evaluating the condition of Patient CW's teeth, Respondent noted that tooth number 4 could be replaced by implant, but that teeth numbers 18 and 19 could not be replaced by implants due to inadequate bone height.

15. Respondent told Patient CW that a bridge could replace teeth numbers 18 and 19, and that this would benefit Patient CW because teeth numbers 17 and 20, which would be used as abutments, had already been root canal treated and were in need of permanent crowns.

16. Respondent did not discuss with Patient CW or document in her treatment record that he discussed the risks associated with this type of four-tooth fixed partial denture, including risks associated with the tilt, height, and root-canaled treatment of teeth numbers 17 and 20.

17. Respondent proceeded with the treatment plan without obtaining or documenting informed consent from Patient CW. For over a year and a half after initial

delivery of the bridge, Patient CW repeatedly presented to Respondent's office because her bridge was loose or had come out completely.

18. Respondent demonstrated a commitment to resolving the issues presented by Patient CW.

19. Patient CW became frustrated with the bridge's repeated failure to stay in place and demanded a refund from Respondent's office in March 2025, which Respondent's office provided.

20. Respondent's office records reflect that Patient CW told the office on March 7, 2025, that Respondent never discussed the challenges presented by the specific condition of her teeth in relation to the bridge, including the slant and short height.

21. Respondent desires to enter into this Consent Order for the purpose of resolving the foregoing issues identified by the IP. By entering into this Consent Order, Respondent is not making any admissions for any current or future proceedings, other than those by, against, or involving the Board.

22. Respondent is willing to participate in additional continuing education courses addressing the issues identified by the IP.

Based upon the foregoing Findings of Fact and with the consent of the parties hereto, the Hearing Panel enters the following:

CONCLUSIONS OF LAW

1. The Board has jurisdiction over the subject matter of this action and over Respondent.

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

3. Respondent violated N.C. Gen. Stat. § 90-41(a)(6) and (12) and 21 NCAC 16T .0101 and 16T .0103 by failing to obtain or document in the treatment record informed consent for Patient MW.

4. Respondent violated N.C. Gen. Stat. § 90-41(a)(6) and (12) and 21 NCAC 16T .0101 and 16T .0103 by failing to obtain or document in the treatment record informed consent for Patient CW.

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

ORDER OF DISCIPLINE

1. License number 10981 issued to Respondent for the practice of dentistry in North Carolina is suspended for a period of six (6) months but conditionally restored with no active suspension, provided that for a period of 3 years, Respondent complies with the requirements in Paragraphs 2 and 3 of this Consent Order of Discipline.

2. Within one (1) year after the effective date of this Consent Order, Respondent shall complete the following continuing education ["CE"] courses especially designed for him by the University of North Carolina School of Dentistry or the East Carolina School of Dental Medicine in conjunction with and approved in advance by the Board's IP, including a comprehensive remedial course covering: (1) the risks presented by dental treatments or procedures in relation to a patient's specific medical condition or medication regimen and (2) obtaining and documenting informed consent in the treatment record prior to undertaking treatment. This requirement shall be in addition to the continuing education required by the Board for renewal of Respondent's dental license. Respondent shall submit

to the Board's Director of Investigations written proof of satisfactory completion of these courses before they will be accepted in satisfaction of this requirement. It is the Respondent's responsibility to make all arrangements for and bear the costs of these courses within the specified time.

3. Respondent shall engage a licensed North Carolina dentist approved by the Board's IP to serve as a practice monitor related to any practice in which he engages in the practice of dentistry. Within 30 days of entry of the Consent Order, Respondent shall submit a proposed practice monitor for review and potential approval by the Board's IP, at its discretion. The practice monitor shall meet face to face with Respondent regularly and no less than quarterly and review example patient charts and billing records selected by the monitor, not by Respondent or his employees. Face to face includes meeting in person or virtually using both visual and audio means. During these meetings, the monitor shall examine example patient records to determine Respondent's compliance with all requirements, including obtaining and documenting informed consent. Respondent shall ensure that the monitor prepares and submits to the Board quarterly reports with findings concerning those issues for the quarter, including identifying the specific patient treatment and billing records reviewed. The IP reserves the right to review the charts that the monitor selects for the report, which records Respondent shall provide to the IP upon its request. The reports shall be due no later than January 1, April 1, July 1, and October 1, for the previous quarter in each year. Respondent is responsible for payment of all costs associated with this monitoring. If the monitor reports information to the Board indicating that Respondent may be engaging in a violation of the Board's statutes or regulations, Respondent understands that such findings may result in further disciplinary action by the

Board, including potential activation of his suspension, following notice to Respondent and an opportunity to be heard. If the monitor timely submits quarterly reports indicating that Respondent has been engaged in the practice of dentistry and has been in full compliance with the Board's statutes and regulations for one (1) year, Respondent may petition the Board's Hearing Panel to reduce or eliminate this practice monitor requirement.

4. Respondent shall also adhere to the following standard additional probationary terms and conditions:

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

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

c. 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.

5. Respondent recognizes that the conditions, limitations, or requirements set forth in this Consent Order may present him with certain practical difficulties. The Board concludes that each one is necessary to ensure public protection and it does not intend to modify or eliminate any of the conditions, limitations, or requirements set forth herein based on such potential difficulties, other than as set forth in Paragraph 3.

6. If Respondent fails to comply with any provision of this Consent Order or breaches any term or condition thereof, the Board shall promptly schedule a public Show

Cause Hearing to allow Respondent an opportunity to show cause as to why the suspension of Respondent's license shall not be activated for violating a valid order of the Board. If after the Show Cause Hearing, the Board is satisfied that Respondent failed to comply or breached any term or condition of this Consent Order, the Board shall activate the suspension of his license and may enter such other discipline or conditions as the evidence warrants for proven violations of the Dental Practice Act or of the Board's rules occurring after entry of this Order.

7. This Consent Order and the provisions contained herein shall be effective upon entry.

8. 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 12th day of January 2025. 26

THE NORTH CAROLINA STATE
BOARD OF DENTAL EXAMINERS

Casie S. Goode

Casie S. Goode
Director of Investigations

STATEMENT OF CONSENT

I, Justin M. Runyon, 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 Consent Order in its entirety. I assent to its terms and conditions set out herein and desire to resolve this matter without the need for formal proceedings. I freely and voluntarily acknowledge that I will not contest the findings of fact, the conclusions of law, or the order in any future proceedings before or involving the Board. I knowingly waive any right to seek judicial review, appeal, or otherwise later challenge this Consent Order once entered. In exchange for resolving this matter without further proceedings or action and upon entry of the Consent 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 Consent Order to the email address of my counsel and waive service by any other method. I understand that the Board will report the contents of this Consent 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 Consent Order. I have consulted with my attorney prior to signing this Consent Order.

This the 18th day of December 2025.

Justin M. Runyon, D.D.S.

Waiver of Limited Ex Parte Communication

I understand that the proposed Consent 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 the proposed Consent 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 Consent Order and related information and documentation with Hearing Panel members for the purpose of advocating approval of the proposed Consent Order without me or my counsel being present.

If the proposed Consent 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 Consent Order will not be a basis for a further continuance of the 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 Consent Order is approved.

I have consulted with my counsel before signing and agreeing to this waiver of limited ex parte communication.

Justin M. Runyon, D.D.S. — Date: 12/18/25

Carrie Meigs
Counsel for Respondent — Date: 12/22/25