

Inside this issue	
Dental Discipline	1
Opioid Prescribing	1
Update in State's Dentis-	2
Closing or Relocating Practice	3
Minimal Sedation CE	4
Infamous or Famous	5
Legal Actions	7
CE Quiz	11

### Commission Members

- John Carbery, D.M.D.,  
Chair
- John R. Liu, D.D.S., Vice-  
Chair
- LouAnn Mercier, D.D.S.
- Robert Shaw, D.M.D.
- James Henderson,  
Public Member
- Bree Kramer, E.F.D.A.
- Kunal Walia, D.D.S.
- Aaron Stevens, D.M.D.
- Lyle McClellan, D.D.S.
- David Carsten, D.D.S.
- Ronald Marsh, D.D.S.
- Julia Richman, D.D.S.
- Dorothy Downes, Public  
Member
- Kathleen Elling, EFDA
- Brian Macall, DDS

## Dental Discipline

Provided by Aaron Stevens, D.M.D.

The name "Dental Quality Assurance Commission" says a lot about the "what" of what we do. We work to ensure that dentistry in Washington state is of high quality. We do this through licensure standards, rules for practice that promote quality, and the enforcement of those rules. The "why" is to protect the public. That is why we are appointed by a state official (the governor) who is elected by the people. In reality, we work for the people of Washington state.

When a dentist is found to have violated the laws or standards of dental care in this state, transparency demands that the public have access to that information. The public representatives on the commission have made this expectation very clear. Currently, we publish the name, error, and corrective measure via our website and in print. We are extending this to

[continued on page 6](#)

## Dental Opioid Prescribing

The Dental Quality Assurance Commission recently sent a letter to every licensed dentist explaining the opioid epidemic. Be sure to begin educating yourself, your office staff, and patients about alternatives for acute pain management.

Dentists write about 31 percent of opioid prescriptions for patients ages 10 to 19. This is a critical age window for addiction tendencies. High schoolers who receive an opioid prescription are 33 percent more likely to misuse opioids

between the ages of 18 and 23 years. In addition, those who are addicted to prescription opioids are 40 times more likely to be addicted to heroin. Dental providers have the opportunity and responsibility to play a critical role in minimizing opioid exposure for vulnerable young people, and in reducing the number of opioid prescriptions, addictions, and deaths in our community.

The Washington State legislature passed Engrossed Substitute House Bill 1427 this year requiring several boards and com-

[continued on page 5](#)



## Update in State's Dentistry Laws Gets Nod From State Lawmakers

Provided by Gary Pickard and Mellani McAleenan

SB 5322 updated RCW 18.32.675. See revised law [here](#).

An 82-year-old law that governs how dentists in Washington operate their practices has been updated with the passage of Senate Bill 5322. The bill was passed unanimously by the Washington State Legislature and signed by Governor Jay Inslee on May 16, 2017.

for the hiring of clinical staff, which is defined as licensed dentists, licensed dental hygienists, licensed expanded function dental auxiliaries, certified dental anesthesia assistants, and registered dental assistants.

Dental practice model options have increased since the original dentistry law was passed in 1935.

The new law also makes clear that an unlicensed person or entity may provide



business and management support services and own or lease assets used by dental practices.

While some dental professionals have preferred a traditional model of managing all aspects of their dental practice, others have chosen to hire third parties to manage administrative tasks required in a practice.

Fees for these services must be agreeable to the licensed dentist who owns the practice.

SB 5322 affirms that dentists must own 100% of their practice and be responsible for all clinical decisions related to patient care. The bill also requires dentists to be responsible

SB 5322 mandates that all licensed dentists not be limited or have requirements placed on them that result in interference in clinical decisions on behalf of their patients. It is required

[continued on page 4](#)

Access dentistry laws here

- [RCW 18.32](#)
- [WAC 246-817](#)
- [RCW 18.260](#)
- [RCW 18.350](#)
- [RCW 18.130](#)
- [WAC 246-12](#)
- [WAC 246-16](#)
- [RCW 70.02](#)

It is the purpose of the commission established in [RCW 18.32.0351](#) to regulate the competency and quality of professional healthcare providers under its jurisdiction by establishing, monitoring, and enforcing qualifications for licensure, continuing education, consistent standards of practice, continuing competency mechanisms, and discipline.



[Access your dental chapter 246-817 WAC rules here.](#)

## Closing or Relocating Dental Practice

Provided by Lyle McClellan, D.D.S.

There are many reasons that we all come into the profession of dentistry. There are just as many reasons that we choose to leave our practices. Some retire and pursue lifelong goals they were unable to pursue in practice. Some transition into group practice settings doing the dentistry they love. letting others manage the business of dentistry. Still others find themselves too ill to continue doing what they love. Whatever the reason, dentists must ensure that patients are taken care of during the transition.

When complaints involving office closures are received by the dental commission we look to see the adherence to several rules.

Were patients properly notified that the practice is closing and was adequate notice given to patients to provide for their emergency care? WAC 246-817-380 states in part that a dentist must (1) Advise the patient that termination of treatment is contemplated and that another dentist should be sought to complete the current procedure and for future care; and (2) Advise the patient that the dentist shall remain reasonably available under the circumstances for up to fifteen days from the date of such notice to render emergency care related to that current procedure. If these rules are not implemented then the dentist may be committing patient neglect or abandonment.

Were patients provided access to their dental records? Responsibility of records availability is outlined in WAC 246-817-310. It reads in part (1) A licensed dentist shall keep readily accessible patient records for at least six years from the date of the last treatment. (2) A licensed dentist shall respond to a written request from a patient to examine or copy a patient's record within fifteen working days after receipt. A licensed dentist shall comply with chapter 70.02 RCW for all patient record requests. If records are not retained and available in a timely manner the dentist may be committing unprofessional conduct.

continued on page 6



See the patient abandonment laws [here](#).

See Patient record retention and accessibility law [here](#).

## Renew Your Credential Online

Dentists, dental hygienists, dental assistants, expanded function dental auxiliaries, and dental anesthesia assistants who are within 60 days of their license expiration date, are able to renew their active status licenses, registrations or certifications online.

To renew online, you must register with Secure Access Washington and sign-in to the Department of Health Online Services. Go to the [Secure Access Washington \(SAW\) website](#). Here is a link to [online renewal frequently asked questions](#).

If you're having problems with the Department of Health Online Services site, [contact our Customer Service Office by email](#) or phone at 360-236-4700.



## Minimal Sedation Continuing Education

Stay Informed!  
See minimal sedation rules [here](#).

Do you administer minimal sedation for dentistry? Don't forget that dentists who administer minimal sedation are required to complete seven hours of continuing education every five years in one or more of the following areas:

- Sedation
- Physiology
- Pharmacology
- Nitrous oxide analgesia
- Patient evaluation
- Patient monitoring
- Medical emergencies

See minimal sedation by inhalation (to include, but not limited to, nitrous oxide) rules [here](#).

In addition, to administer minimal sedation you must maintain a health care provider basic life support (BLS) or advanced cardiac life support (ACLS) certification.

## Update in State's Dentistry Law

*continued from page 2*

The dental commission is now using GovDelivery to deliver notifications to subscribers. GovDelivery affords the user more control over topics of interest, when and how often the messages are received.

that all dentists make ethical decisions that are in the best interest of their patients at all times.

The bill also clarifies state law regarding the termination of a patient relationship. An attending dentist may not neglect, ignore, abandon, or refuse to complete a current procedure for a patient without reasonable cause. In such a case, a dentist who withdraws responsibility for a patient must advise the patient that termination of treatment is contemplated and that another dentist should be sought. The dentist must be reasonably available for up to 15 days to render emergency care in these instances.

SB 5322 helps all dentists continue to provide high quality care to patients across Washington state.

---

*Gary Pickard is director of government and industry affairs at Pacific Dental Services, a dental support organization.*

*Mellani McAleenan is director of government affairs for the Washington State Dental Association.*

## Opioid Prescribing

continued from page 1

missions, including the Dental Quality Assurance Commission, to adopt rules by January 1, 2019 that establish requirements for prescribing opioid drugs. The dental commission will work with other regulatory entities to develop consistent rules for all prescribing practitioners.

## TEENS AND OPIOIDS



**1 in 5** teens experiment with prescription drugs.

*Centers for Disease Control and Prevention*

Resources are available. Here is a link to get you started.

<http://starttalkingnow.org/sites/default/files/Opioid-Medication-Pain-Fact-Sheet-revised.pdf>

You did not get a letter? Contact Jennifer Santiago, [Jennifer.santiago@doh.wa.gov](mailto:Jennifer.santiago@doh.wa.gov) for a copy.

Dispose of leftover opioids  
<http://www.takebackyourmeds.org>

## Infamous or Famous

**Paul Revere:** This Revolutionary War hero was made famous by his April 7, 1775 midnight ride just before the battles of Concord and Lexington warning the people that, “The British are coming! The British are coming!”

If he were advertising his day job, he might just as easily called out, “The dentist is coming! The dentist is coming!” Revere was not only a skilled silversmith, but was also a dentist who was known for making false teeth for his patients.



---

## Closing Practice

continued from page 3

When complaints are received, the dental commission looks to see how the patients are notified of the office closure. For example a letter sent to all patients of record explaining how their emergency care will be handled for the required 15 days with contact information where they can obtain their records is more favorable than a sticky note on the door saying that the office is closed. Any unusual circumstances are also considered such as a sudden illness but the responsibility of the dentist to take care of patients is still not removed.

The bottom line is that practice transitions need to be choreographed with patient care. This involves good communication and measures to ensure patients are cared for and their records are available upon request. A patient in the state of Washington should never show up at a dental office to find a notice posted that the office is closed with no further information given.

---

## Dental Discipline

Continued from page 1

our newsletter, which is one of our principle methods of outreach to the public. This change does not disclose any more information than in the past, but makes the information more accessible to the public. It also brings our commission more in line with the practices of other Washington professional commissions (MQAC, for example) as well as neighboring states' dental boards.

Beyond meeting the public's expectation for complete transparency, there is benefit for dentists. Seeing what errors are made brings the ability to make changes and avoid pitfalls. Personally, seeing the cases up close and personal has helped me become a better dentist. I wish that every dentist had the opportunity to serve on DQAC. It is an invaluable education for which I am grateful. Since it isn't possible for everyone to be here, sharing what can be learned may be the next best thing. Dentists, please read the discipline section, analyze your processes, and take corrective measures if appropriate.

I hope you will forgive a quick personal note from me to the public: The Dentists in Washington state do a great job. Exceptions are incredibly rare. When looking at how many dental procedures take place in our state on a given day vs how many complaints there are vs how many complaints have merit and move towards discipline, the percentage is tiny. Good dentists can get complaints. I received two complaints during my career and prior to my term on the commission. They both were dismissed as not having merit. Those types of cases you won't see here. We only publish cases that merit discipline action, and frankly, there aren't many. Hopefully, with this transparency/educational tool, there can be even less.

We appreciate feedback about how we serve the public. If you feel the need, please reach out to us so that we can discuss it.

## Legal Actions March 2017 — June 2017

Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Allen, Ryan (dentist) Spokane County	4/21/2017	Agreed Order	Substance Abuse – misused legend drugs or controlled substances	Indefinite suspension; before reinstatement - evidence of 3 years clean and sober
Bears, Graig (unlicensed) Jefferson County	3/8/2017	Cease and Desist	Practicing dentistry without a valid license	May not practice dentistry in Washington until obtain Washington dentist license
Booksby, Lyle (dentist) Clallam County	4/21/2017	Agreed Order	Nevada State Board revoked dental license for unprofessional conduct	Jurisprudence exam, presentation to commission regarding WA Dental Practice Act, practice audits, and infection control inspections
CDWA, LLS (unlicensed) Jefferson County	3/8/2017	Cease and Desist	Practicing dentistry without a valid license	May not practice dentistry in Washington until obtain Washington dentist license
Comfort Dental Group (unlicensed) Jefferson County	3/8/2017	Cease and Desist	Practicing dentistry without a valid license	May not practice dentistry in Washington
Compton, Jennifer (dental assistant) Snohomish County	4/21/2017	Agreed Order	Practicing on a suspended credential	Indefinitely Suspended; before reinstatement - \$1000 fine, 12 months clean and sober
Dareva-Morrison, Yana (dental assistant)	06/05/2017	Cease and Desist	Practicing without a valid license	May not practice in Washington until obtain Washington dental assistant registration, \$1000 fine

### Reader Input

The commission is looking for reader input. If you want to read about something specific, [please let us know](#).



## Legal Actions

continued from page 7

Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Do, Liem (dentist)	6/2/2017	Agreed Order	Failed to obtain proper informed consent due to patient being sedated	One year probation, \$1,000 fine, cost recovery, refund patient fees, practice audits, 33 hours continuing education in dental medications, dental office emergencies, oral surgery, risk management, and nitrous oxide
Gibson, Rena (dental assistant) Pierce County	6/2/2017	Agreed Order	Substance Abuse - Misused alcohol, legend drugs or controlled substances	Evaluation by Washington Recovery and Monitoring Program and any recommended treatment
Heuer, Jeanne (dental assistant) Ada, Idaho	6/2/2017	Agreed Order	Practice beyond scope/without appropriate dentist supervision	Voluntarily Surrender credential
Hood, James (dentist) Spokane County	3/17/2017	Final Order	Lack of charting, no record of prescription or dispensing of legend drugs, lack of appropriate infection control	Indefinitely Suspended
Hsu, Richard (dentist) King County	6/2/2017	Agreed Order	Oregon Board of Dentistry placed restrictions on dental license. Contesting terms of Oregon order.	Cost recovery, compliance with Oregon order
Jones, Cynthia (dentist) Pierce County	3/17/2017	Agreed Order	Inadequate supervision of dental assistant	\$1000 fine, \$4,969.02 cost recovery, 6 hours of continuing education in Law and Ethics, and Jurisprudence examination



## Legal Actions

continued from page 8

Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Keller, David (dentist) Clark County	5/8/2017	Final Order	Treatment below standard of care and misleading advertising	Reimburse patient fees, \$12,439.53 cost recovery, \$15,000 fine, 28 hours of continuing education in ethics, treatment of dental occlusions, pain management, treatment planning, and Jurisprudence exam.
Khorsandi, Shohreh (dentist) King County	05/18/2017	Final Order	Practice below standard of care; lack of charting, no record of administering legend drugs, overcharging for professional services, records retention	License suspended 12 months. Evaluation by Dental Professional and Evaluation Program (D-PREP) with completion of any recommended education and training
McMahan, Kent (unlicensed) Jefferson County	3/8/2017	Cease and Desist	Practicing dentistry without a valid license	May not practice dentistry in Washington until obtain Washington dentist license
Pinon, Robert (dentist) Yakima County	4/21/2017	Agreed Order	Substance Abuse of controlled substances or legend drugs	5 year monitoring, Assessment by Washington Physicians Health Program and any recommended treatment, quarterly reports, and \$5000 fine

You can find previous newsletters on the dental commission [webpage](#).

Look up any healthcare provider's credential on the Department of Health [Provider credential Search page](#).

## Answers From March Newsletter Quiz

Below are the answers to the continuing education quiz in the March 2017 newsletter. Look for the answers to this month's quiz in the November 2017 newsletter.

1. C      2. C      3. A      4. A

## Legal Actions

continued from page 9

Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Sharma, Sanjeev Kumar (dentist) Clark County	4/10/2017	Final Order	Practice below standard of care – failure of restorations, inappropriate billing, refused to give copy of patient record, misrepresented services, inadequate implant surgery, failed to explain risks, inadequate dentures, missed decay, excess cement at site of bridge, open margins	12 months Suspension, Evaluation by Dentist Professional and Evaluation Program (D-PREP) and any recommended education and training, 5 year probation, \$13,500 fine, and \$3,000 cost recovery
Williams, Brizjette (dental assistant) King County	5/22/2017	Notice of Decision and Agreement to Practice with Conditions	Criminal convictions – Theft, Attempted theft, Criminal Attempt, Possessing stolen property, Criminal trespass, Attempted identity theft,	7 hours of continuing education in ethics
Williams, Chelsea (dental assistant) Clallam County		Final Order	Substance Abuse – misused legend drugs or controlled substances	One year suspension, five year probation, WA Recovery and Monitoring Program evaluation and comply with recommendations
Yeh, Cynthia Leu (dentist) Pierce County	06/02/2017	Agreed Order	Failure to comply with previous Agreed Order	Suspended until - Successful completion of Custom Remediation Preceptor Program and Skill Assessment Hands On Program at the University of Texas Houston School of Dentistry

## Earn Continuing Education Credit!

The commission allows one hour of continuing education credit for reading this newsletter! To qualify, please take the quiz below. Keep the completed quiz with your other continuing education certificates of completion.

If you are audited, provide the quiz along with your other proof of continuing education and you will receive one hour of continuing education under WAC 246-817-440(4)(c). You are allowed no more than seven hours in the categories of educational audio or videotapes, films, slides, internet, or independent reading, where an assessment tool is required. This section will provide one of those seven hours allowed.

### Continuing Education Quiz

1. High schoolers who receive an opioid prescription are \_\_\_\_ percent more likely to misuse opioids between the ages of 18 and 23 years.
  - A. 10
  - B. 25
  - C. 33
  
2. Dentists write \_\_\_\_ percent of opioid prescriptions for patients ages 10 to 19?
  - A. 31
  - B. 15
  - C. 5
  
3. When closing a practice a dentist must:
  - A. Remain reasonably available for up to fifteen days from the date of notice that the practice is closing for emergency care.
  - B. Advise the patient to seek another dentist to complete current procedures or for future care.
  - C. Keep readily accessible patient records for at least six years.
  - D. All of the above.
  
4. If you administer minimal sedation for dentistry, you must participate in seven hours of CE every five years.
  - A. True
  - B. False

#### Commission Staff Contact Information

Department of Health  
P.O. Box 47852  
Olympia, WA 98504-7852

[Trina Crawford](#), Executive Director

[Jennifer Santiago](#), Program Manager

[Tracie Drake](#), Assistant Program Manager

[Erin Obenland](#), Case Manager

Customer Service  
360-236-4700

[www.doh.wa.gov](http://www.doh.wa.gov)

[Commission website](#)

#### Commission Meeting Dates

July 21, 2017  
Sept. 8, 2017  
Oct. 27, 2017  
Dec. 15, 2017

**Public Health - Always  
Working for a Safer and  
Healthier Washington.**