



DOH 646-175 July 2018

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## Hot Topic Opioid Prescribing

In the November 2017 dental commission newsletter, we shared a letter sent to all licensed dentists related to the opioid epidemic. The dental commission, with four other boards and commissions, continues to work to finalize new opioid prescribing rules required by Engrossed Substitute House Bill 1427. The dental commission approved proposed rules on June 1, 2018. The proposed rules include:

- Consider multimodal pharmacologic and non-pharmacologic therapy for pain rather than defaulting to the use of opioids.
- A one-time, three-hour continuing education course regarding best practices in prescribing opioids and opioid prescribing rules.
- Maximum seven-day limit when prescribing opioids for acute non-operative and acute perioperative pain.

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### Commission Members

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## New Continuing Education Rules

**Provided by Aaron Stevens, DMD**

I have to stand up straight and on my tiptoes to make average. It's a consistent theme in my life on almost every level. At times, I can get behind. It can happen with continuing education (CE) (cough cough, this year) and the one-year reporting cycle really doesn't help. That said, every once in a while, life throws us average guys a bone. For example, the CE rule is getting modernized!

Overview:

Starting in 2019, the CE reporting cycle will be 63 hours every three years. License renewal is still annual.

The seven-hour online CE limitation is gone. All hours can be online but online hours count only at half rate. For example, two hours of online CE count as one hour for licensure credit.

The jurisprudence examination (JP exam) is required once every three years and counts as one hour CE.

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## Radiographs and Standard of Care

The Dental Quality Assurance Commission filed an interpretive statement on August 30, 2017 for the standard of care for dentists related to taking of radiographs.

Patients and dentists frequently ask the Dental Quality Assurance Commission whether radiographs are required to be taken as part of a dental examination. The Commission issued an interpretive statement to give guidance to dentists regarding the use of radiographs as part of a dental examination.

The Commission finds that the dental standard of care includes a report on the patient's subjective complaints, objective findings, an assessment or diagnosis of the patient's condition, and treatment plan. Dentists must use their clinical and professional judgment in determining when dental radiographs are required to make an accurate diagnosis or to provide treatment to a patient. A patient has the right to refuse any treatment, including X-rays.

A dentist should inform the patient of the benefits and risks associated with refusing treatment and potential risks of X-rays. A dentist is not obligated to treat a patient who does not agree with a treatment plan, including X-rays. If the patient refuses treatment, the dentist should make a notation in the patient record regarding the discussion and refusal.

The complete background and analysis in the interpretive statement is available on our [website](#).



The dental commission has other interpretive statements and guidelines on the [website](#) that may be useful:

[Dentist Scope of Practice – Use of Botulinum toxin Injections/Dermal fillers](#)

[Dentist-Sleep Dentistry](#)

[Appropriate Use of Teledentistry](#)

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.](#)

## New CE Rules

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Basic life support CE can count as one hour per year (three hours total for three-year reporting period).

There are new ways to gain CE as well as clarification on documentation requirements.

Why this is a win:

I can and probably will wear pajamas for all CE for the rest of my life. Unlimited online... ☺

If I want to take a 70-hour course on a cruise at some point, it can cover three years CE, not just one.

Other things I already do in dentistry will give me CE credit.

Dental rules and laws change, and I'm responsible to know and follow them. Keeping current via taking the open-book JP exam every three years is a good way to do that.

My documentation method of snapping a picture of the CE certificate and saving it to a running document on my phone is still acceptable (I lose paper but not my phone) and a really simple way to deal with an audit. Just type in the auditor's email and hit send.

There is a good bit more to this rule than what this quick overview has. If you are one of those "above average" details-type people, please read the rule to get the level that fits you. For the rest of us, this cliff notes version may suffice.



Dentistry laws and rules can be located on our [laws webpage](#).

To get updates about rule making and other topics related to dental professionals, please [Subscribe](#). After entering your email address, choose Health Systems Quality Assurance, Health Professions, Dental List.

## Reader Input

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



## Answers From March Newsletter Quiz

Below are the answers to the continuing education quiz in the March 2018 newsletter. Look for the answers to this month's quiz in the November 2018 newsletter.

1. B      2. C      3. C      4. A

Access past Newsletters on our [webpage](#).

## New — What's Happening Webpage

### Recent Dental Rule (WAC) Changes

The Dental Quality Assurance Commission (dental commission) makes changes to rules occasionally. The dental commission determines rule changes are necessary for many reasons including: legislative law change, request to change a rule, national standards change, and updating outdated rule language. The rules writing process is open to the public. The public is welcome to take part in helping us write rules. Rules are also known as regulations, Washington Administrative Code, or WAC. The rule making process includes public notices and workshops, and usually a public hearing before a rule becomes final.

#### Rules changes completed in 2018

##### [Dentist continuing education requirements – WAC 246-817-440](#)

The dental commission adopted amendments to clarify continuing education (CE) requirements. Amendments clarify CE subject matter, minimum and maximum number of hours in specified subject matter, and methods to obtain CE including web-based options. The dental commission adopted the rule changes on April 20, 2018 that include changing the CE reporting period to three years. The new requirements begin January 1, 2019. Please note, although the CE reporting period is changing from annually to every three years, this does not change the annual renewal of a dentist license. You must still renew your dental license every year on or before your birthdate.

##### [Dentist suicide prevention education – New WAC 246-817-441](#)

[Engrossed Second Substitute House Bill \(E2SHB\)1612 \(chapter 262, Laws of 2017\)](#) amended RCW 43.70.442 directing the dental commission to adopt rules to establish a one-time continuing education (CE) and training requirement for dentists on suicide prevention education. The dental commission adopted a three-hour requirement for suicide prevention education to include assessment of issues related to imminent harm by lethal means. The CE will be required after August 1, 2020. Courses taken before August 1, 2020 are acceptable for the one-time CE requirement. Approved suicide prevention courses are available on the Department of Health [website](#).

#### Rules changes completed in 2017

##### Dental Assistant and EFDA delegation rules – [WAC 246-817-510](#), [246-817-520](#), [246-817-525](#), [246-817-540](#), and [246-817-545](#)

The dental commission adopted rule amendments to update the scope of practice (listing of allowable and prohibited tasks that may and may not be performed) for registered dental assistants (DAs) and licensed expanded function dental auxiliaries (EFDAs). Adopted rule amendments clarify tasks that dentists are currently delegating to DAs and EFDAs in dental facilities.

##### Examination content – [WAC 246-817-120](#)

The adopted rule clarifies that a complete dentist clinical examination must be obtained by a single testing agency. Each testing agency creates its examination as a whole examination, identifying each content section. The successful completion of a whole examination demonstrates the minimum competency necessary for licensure. Completing portions of examinations from multiple examination organizations may not provide a true assess-

## Summary of Continuing Education Required for Licensed Dentists

Credential Type	Annually	Every three years	Every five years	One time only
Dentist license	21 hours (until December 31, 2018)	63 hours (effective January 2019)		
Minimal sedation by inhalation (nitrous)			7 hours	
Minimal sedation			7 hours	
Moderate sedation permit			7 hours	
Moderate sedation with parenteral agents permit		18 hours		
General anesthesia permit		18 hours		
Dentist suicide prevention education				3 hours (effective August 2020)
Dentist prescribing long-acting opioids				4 hours (pending repeal under opioid rules)
Healthcare provider basic life support (BLS)	Current certification required			
<b>The following CE requirements are pending final rule adoption</b>				
Dentist opioid prescribing education				3 hours
DHCP infection control – Initial hire				2 hours
DHCP infection control	1 hour			

## Frequently Asked Questions

### Q. May dentists administer botox or derma-fillers?

The Dental Quality Assurance Commission has issued an interpretive statement about [Dentist Scope of Practice – Use of Botulinum Toxin Injections/Dermal Fillers \(PDF\)](#). The commission approved the interpretive statement on July 26, 2013. The Office of the Code Reviser filed it on August 20, 2013, as WSR 13-17-090.

The use of botulinum toxin injections or dermal fillers in the soft tissues throughout the face can be within the scope of practice of a dentist licensed [under chapter 18.32.020 RCW](#) when:

- Used to treat functional or esthetic dental conditions and their direct esthetic consequences; and
- The treating dentist has appropriate, verifiable training and experience.

The use of botulinum toxin injections or dermal fillers outside the treatment of dental-related conditions for purely cosmetic purposes isn't within the scope of practice of dentists not specialty trained as oral and maxillofacial surgeons ([RCW 18.32.020](#)).

### Q. May dentists delegate silver diamine fluoride to dental hygienists, dental assistants, or expanded function dental auxiliaries?

Yes. Silver diamine fluoride is a fluoride preventative treatment. [WAC 246-817-550](#) (5) and [246-817-525](#) (6)(b) allow dentists to delegate under general supervision to licensed dental hygienists and licensed expanded function dental auxiliaries. [WAC 246-817-520](#) (f) allows dentists to delegate under close supervision to registered dental assistants.

### Q. May a dentist charge a patient for a copy of the patient record?

Yes. [RCW 70.02 governs medical records](#) — healthcare information access and disclosure [RCW 70.02.010](#), [RCW 70.02.080](#), and [WAC 246-08-400](#) provides how much can be charged.

### Q. How long must a dentist keep a record?

Six years, according to the [maintenance and retention of records law \(WAC 246-817-310\)](#).

### Q. Do I have to post my license in my office?

Yes. Dentists, dental hygienists, expanded function dental auxiliaries, dental assistants, and dental anesthesia assistants must place their license so it's visible to people receiving services in the premises ([WAC 246-817-301](#)).

### Q. I'm a sterilization technician. Do I have to register?

Yes. You are a dental assistant. Dental assistants provide supportive services. Supportive services means services related to clinical functions in direct relationship to treating a patient. The commission agreed that sterilizing dental tools and equipment is a clinical function, and people providing this supportive service are dental assistants who must register.

### Q. May a dental assistant perform a blood glucose screening?

Yes. Law lists taking and recording blood pressure and vital signs as allowable under close supervision. ([WAC](#)



## Dental Rules in Progress

Dental Quality Assurance Commission (dental commission) is working on several rule modifications. Details are on our [Rules in Progress webpage](#).

### Dental infection control standards – WAC 246-817-601 through new 246-817-660

The dental commission is considering updated current dental infection control standards. The Dental Infection Control Committee held multiple open public meetings from January 2017 through May 2018, discussing appropriate rule modifications. The committee will hold an additional meeting on September 7, 2018 to discuss stakeholder comments. If you have comments related to the proposed infection control rules, please submit them to Jennifer Santiago at [Jennifer.santiago@doh.wa.gov](mailto:Jennifer.santiago@doh.wa.gov).

### Opioid prescribing rules – WAC 246-817-901 through new 246-817-980

The Washington State legislature passed Engrossed Substitute House Bill 1427 (ESHB 1427) in 2017. It requires five boards and commissions, including the dental commission, to adopt rules by January 1, 2019 that establish requirements for prescribing opioids. The dental commission has worked with the other regulatory entities to develop consistent rules for all prescribing practitioners. The CR102 was filed on July 16, 2018 as WSR 18-15-056. The rules hearing is September 7, 2018. The commission is accepting written comments for these rules on the [agency rules comment page](#) through August 31, 2018.

### Delegation to dental hygienist under general supervision – WAC 246-817-550

The dental commission considered a rule request in July 2017 to allow dental hygienists to perform certain tasks under general supervision that dental assistants typically complete under close supervision. Close supervision requires the dentist to be physically present in the treatment facility during the performance of a delegated task, while general supervision does not.

The Dental Collaboration Committee has been holding open public meetings with stakeholders, discussing rule modifications regarding dental hygienists performing certain tasks listed in [WAC 246-817-520](#) under general supervision. [WAC 246-817-520](#) details tasks dental assistants can perform under close supervision. Dental hygienists can also perform the same tasks under close supervision. Proposed changes will allow dental hygienists to perform identified tasks under general supervision of a dentist. A den-

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## FAQ's Continued

[246-817-520](#) (28)). The commission determined blood glucose screening is a vital sign. Licensed dentists should ensure appropriate referrals are made to a medical provider when results of a blood glucose screening warrant it.

Additional FAQs can be found on our [website](#).

### **Q. Under which type of supervision must a dental assistant work? What is close supervision?**

"[Close supervision](#)" means that a licensed dentist whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. A dentist shall be physically present in the treatment facility while the procedures are performed. Close supervision does not require a dentist to be physically present in the operatory; however, an attending dentist must be in the treatment facility and be capable of responding immediately in the event of an emergency.

## Dental Rules in Progress

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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](#)

tist must examine and diagnose all patients before delegating under [general supervision](#).

### [Specialty representation – WAC 246-817-420](#)

The dental commission considered a rules petition requesting the dental commission recognize in rule the American Board of Dental Specialties boards/areas of practice specialty. The current rule lists American Dental Association-recognized specialties only. Additional specialty areas in dentistry could be considered. The Dental Continuing Competency Committee has been holding open public meetings with stakeholders, discussing rule modifications.

### [Dental Anesthesia rules – WAC 246-817-701 through 790](#)

The dental commission is considering amendments to update general requirements for administering anesthetic agents for dental procedures. In addition to general updates, the dental commission is considering 24-hour on-call availability, on-site inspections for sedation permit holders, and creation of pediatric sedation endorsement. The Dental Anesthesia Committee has been holding open public meetings with stakeholders, discussing rule modifications.

Dentistry rules in progress (proposed rule modifications) can be located on our [Rules in Progress](#) webpage.

## Prescription Monitoring Program (PMP) Access

Having difficulty registering or accessing the PMP? The [PMP website](#) has available [resources](#); [instructional videos](#), [step-by-step instructions](#), and helpful tips.

Additionally, PMP user support services are available. High call volumes keep PMP staff members very busy; the best option is emailing [prescriptionmonitoring@doh.wa.gov](mailto:prescriptionmonitoring@doh.wa.gov) to schedule an appointment for assistance so you can connect with PMP user support staff members at a time that's convenient for you. The PMP user support line is 360-236-4806 . Keep in mind staff members may be actively engaged in providing assistance to others.

## 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.





## What's Happening Webpage

Continued from page 4

ment of minimum dentist competency. Additionally, the adopted rule includes acceptance of the Canada clinical examination.

Moderate sedation with parenteral agents – [WAC 246-817-760](#)

The dental commission adopted amendments to include specific requirements and exceptions for dentists when sedating pediatric patients. The adopted rule amendments specifically add monitoring and equipment requirements with three exceptions for dentists when sedating children related to intravenous infusions, monitoring expired carbon dioxide (CO<sub>2</sub>), and monitoring end-tidal CO<sub>2</sub>. Requiring all dentists administering moderate sedation with parenteral agents to monitor appropriate patient vitals follows consistent practice standards. Providing specific exemptions for dentists when sedating children is consistent with the American Academy of Pediatric Dentistry Guidelines on Behavior Guidance for the Pediatric Dental Patient.

License by residency in lieu of examination – [WAC 246-817-110](#), [246-817-160](#), [246-817-155](#), and [246-817-220](#)

Substitute House Bill 1411, (Chapter 100, Laws of 2017) modifies RCW 18.32.040 (3)(c) by changing the dentist licensure eligibility. The law allows dental residency in lieu of practical (clinical) examination. The residencies must be Commission on Dental Accreditation-approved community-based residency in general practice residency, advanced education in general dentistry residency, or pediatric residency. The residency must also be at least one year in length and must be in a setting that serves predominantly low-income patients in Washington State.

Recently completed rules can be located on our [What's Happening webpage](#).

Check out the Bree Collaborative Dental Guidelines on Prescribing Opioids for Pain. [Bree Collaborative Guidelines](#)

## Opioid Prescribing

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- Maximum of 12 tablets for patients 24 years of age and under when prescribing opioids.
- Prescription Monitoring Program (PMP) registration required if prescribing opioids.
- Prescription Monitoring Program (PMP) query every time an opioid prescription is given.

The proposed rules apply to all dentists who prescribe opioids. Additional requirements in the complete proposed rules are available on our [website](#).

The dental commission encourages all dental practitioners to educate themselves, their office staff members, and patients about alternatives for acute pain management.

You can find Department of Health Opioid Prescribing recommendations on our [webpage](#).

## Legal Actions March 2018 — June 2018

The following are final actions taken by the commission or Secretary of Health. Notices of decision on applications, modifications to orders, terminations of orders, and stipulations to informal discipline are not listed. The actions below have been edited for clarity and brevity. You can view the actual orders on the [provider credential search webpage](#).

Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Cha, Peter M. (dentist) King County	6/1/2018	Amended Final Order	Treatment below standard of care—over-diagnosis; did not offer alternative treatment; altered treatment records.	3 years oversight; chart reviews; complete D-PREP skills assessment program; CE in ethics; \$20,000 fine; \$10,000 cost recovery.
Greene, Tera (dentist) State of Idaho	6/1/2018	Agreed Order	Closed dental practice without notifying or refunding a patient who had pre-paid for dentures.	License surrendered.
Kirkland, Travis Zean (dentist) State of Nevada	4/20/2018	Default Order	Did not fulfill three patients' requests for timely transfer of records to another dental practice.	Indefinite suspension of dental license.
Salvatori, Keith (dentist) King County	6/1/2018	Agreed Order	Treatment below standard of care—lack of physical exam prior to treatment; incomplete lab documentation.	Indefinite suspension of dental license.
Seal, Thomas (dentist) King County	4/20/2018	Agreed Order	Criminal conviction – 2 <sup>nd</sup> degree unlawful discharge of a laser.	Obtain substance use assessment; CE in ethics; take and pass jurisprudence exam; \$1,769.08 cost recovery.
Siew, Michael T. (dentist) King County	6/1/2018	Agreed Order	Billing for clinically undocumented services.	One year probation; 3 years chart audits; complete Dental Ethics and Conduct course; CE in chart management and recordkeeping; take and pass jurisprudence exam; \$3,982.98 cost recovery; \$10,000 fine.
Su, Jonathan	4/2018	Agreed Order	Dental care, administration of anesthesia, and sedation monitoring below standard of care; omitted or deleted information in patient's records.	Dental license monitored; indefinite suspension of moderate sedation with par-enteral agents permit; CE in ethics; IV course; mindfulness training; written report; \$10,000 cost recovery; \$20,000 fine with \$10,000 waived if free public dental care provided.

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## Legal Actions

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Practitioner and County	Date	Order Type	Cause of Action	Commission Action
Young, Warner R. (dentist) Snohomish County	4/20/2018	Final Order	Abruptly closed dental practice without notice to patients; did not make prior arrangements to reimburse patients for prepaid treatments not provided.	Indefinite suspension of dental license.

## New Dentist Continuing Education Quick Reference

- Sixty-three CE hours every three years; license renewal is still annual on your birthdate
- Jurisprudence examination required once every three years, counts as one hour of CE (free, online, open book)
- No limit on live webinars
- Specialty board certification/recertification counts as 62 hours of CE, earned in CE reporting period
- Self-study/online CE, 30 minutes counts for every one hour completed; no limit on number of total hours
- Basic life support, count one hour per year (three hours total for three-year reporting period)
- Clinical supervision is acceptable CE
- Publishing a paper is acceptable CE
- Reading journal articles is acceptable CE, with additional requirements
- Award of fellow of the Academy of General Dentistry, master of AGD, or lifelong learning and service recognition award counts as 62 hours of CE

The three-year requirement begins January 1, 2019.

You begin obtaining your CE for the three-year reporting period beginning on January 1, 2019.

First CE due date will be with your renewal in 2022.

Example: Your birthdate is June 15, 2019. Begin obtaining 63 hours of CE on January 1, 2019 through June 15, 2022.

Dentists should continue to maintain their current 21 hours of CE through renewal in 2018.

## Earn Continuing Education Credit!

### Continuing Education Quiz

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.

1. In the proposed new opioid prescribing rules, when prescribing opioids, how many tablets may a dentist prescribe to patients 24 years of age and under?
  - A. 48
  - B. 24
  - C. 12
2. Under the new continuing education rules, what is the reporting cycle for CE?
  - A. 21 hours every year
  - B. 42 hours every two years
  - C. 63 hours every three years
3. Is a dentist obligated to treat a patient who does not agree with a treatment plan, including X-rays?
  - A. Yes
  - B. No
  - C. No, but the dentist should make a notation in the patient record regarding the discussion and refusal.
4. The commission adopted a rule requiring a one-time continuing education suicide prevention training. When does this training requirement take effect?
  - A. August 1, 2020
  - B. January 1, 2019
  - C. December 31, 2018

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#### Commission Meeting Dates

Sept. 7, 2018

Oct. 26, 2018

Dec. 7, 2018

Jan. 18, 2019

March 1, 2019

April 19, 2019

June 7, 2019

July 26, 2019

Sept. 13, 2019

Oct. 25, 2019

Dec. 6, 2019

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