313.010 Definitions for chapter.

As used in this chapter, unless the context requires otherwise:

(1) "Board" means the Kentucky Board of Dentistry;

(2) "Certified dental technician" means an individual recognized as such by the National Board for Certification in Dental Laboratory Technology;

(3) "Delegated duties list" means the list of procedures authorized in administrative regulation which may be delegated by a dentist licensed under this chapter to a licensed dental hygienist or a registered dental assistant;

(4) "Dental auxiliary personnel" means any staff member of a dental office not licensed by or registered with the board;

(5) "Dental hygiene" means the treatment of the oral cavity, including but not limited to dental hygiene assessment or screening, scaling and root planing, nonsurgical therapy, removing calcareous deposits, removing accumulated accretion from beneath the free gingival margin, cavity preventive procedures, periodontal procedures that require administering antimicrobial agents along with other general dentistry activities outlined in the treatment care plan and not prohibited by this chapter or by administrative regulation promulgated by the board;

(6) "Dental hygienist" means any person who has graduated from a CODA accredited dental hygiene program at an institute of higher learning and has been credentialed as a "Registered Dental Hygienist";

(7) "Dental laboratory" includes any person, firm, or corporation other than a licensed dentist, who directly or through an agent or employee, by any means or method, in any way supplies or manufactures artificial substitutes for the natural teeth, other than those unfinished substitutes normally available through dental supply houses, or who furnishes supplies, constructs, or reproduces or repairs any prosthetic denture, bridge, or appliance to be worn in the human mouth or who performs or offers or undertakes to perform or accomplish dental laboratory technology;

(8) "Dental laboratory technician" means any person who performs or offers or undertakes to perform or accomplish dental laboratory technology;

(9) "Dental specialist" means a dentist who practices in fields of specialty recognized and approved by the American Dental Association;

(10) "Dentist" means any person who has graduated from a Commission on Dental Accreditation (CODA) accredited dental school and has been conferred with the degree of "Doctor of Medical Dentistry" (D.M.D.) or "Doctor of Dental Surgery" (D.D.S.);

(11) "Dentistry" means the evaluation, diagnosis, prevention, or surgical, nonsurgical, or related treatment of diseases, disorders, or conditions of the oral cavity, maxillofacial area, or the adjacent and associated structures and their impact on the human body provided by a dentist within the scope of his or her education, training, and experience and in accordance with the ethics of the profession and applicable law. Any person shall be regarded as "practicing dentistry" who, for a fee, salary, or other reward paid, or to be paid either to himself or herself, or to another person, performs or advertises to perform, dental operations of any kind, including the whitening of natural or manufactured teeth, or who diagnoses or treats diseases or lesions of human teeth or jaws, or attempts to correct malpositions thereof, or who diagnoses or treats disorders, or deficiencies of the oral cavity and adjacent associated structures, or who takes impressions of the human teeth or jaws to be used directly in the fabrication of any intraoral appliance, or shall construct, supply, reproduce or repair any prosthetic denture, bridge, artificial restoration, appliance or other structure to be used or worn as a substitute for natural teeth, except upon the written laboratory procedure work order of a licensed dentist and constructed upon or by the use of casts or models made from an impression taken by a licensed dentist, or who shall advertise, offer, sell, or deliver any such substitute or the services rendered in the construction, reproduction, supply, or repair thereof to any person other than a licensed dentist, or who places or adjusts such substitute in the oral cavity of another, or who uses the words "dentist," "dental surgeon," the letters "D.D.S.," "D.M.D.," or other letters or title in connection with his or her name, which in any way represents him or her as being engaged in the practice of dentistry;

(12)  "Direct supervision" means that the dentist is physically present in the dental office or treatment facility, personally diagnoses the condition to be treated, authorizes the procedures to be performed, remains in the dental office or treatment facility while the procedures are being performed, and evaluates the performance of the individual supervised;

(13)  "General supervision" means a circumstance of treatment in which a dentist licensed under this chapter must diagnose and authorize the work to be performed on a patient by the dental hygienist authorized pursuant to administrative regulation to work under general supervision but the dentist is not required to be on the premises while the treatment is carried out;

(14)  "Registereddentalassistant"meansanypersonwhoisregisteredwiththeboardand works under the direct supervision of a dentist;

(15)  "Telehealth" means the use of interactive audio, video, or other electronic media to deliver health care. It includes the use of electronic media for diagnosis, consultation, treatment, transfer of health or medical data, and continuing education; and

(16)  "Volunteer community health setting" means a setting in which services are rendered at no charge to the patient or to third-party payors.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 1, effective July 15, 2010. - - Amended 2009 Ky. Acts ch. 55, sec. 1, effective June 25, 2009. -- Amended 1978 Ky. Acts ch. 155, sec. 162, effective June 17, 1978. -- Amended 1974 Ky. Acts ch. 303, sec. 1. -- Amended 1970 Ky. Acts ch. 75. sec. 1. -- Amended 1964 Ky. Acts ch. 12, sec. 1. -- Amended 1950 Ky. Acts ch. 139, sec. 1. -- Amended 1948 Ky. Acts ch. 6, sec. 1. -- Created 1942 Ky. Acts ch. 60, sec. 1. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-11, 2636-18.

Legislative Research Commission Note (7/15/2010). Under the authority of KRS 7.136(1), the Reviser of Statutes has changed the internal numbering of this statute to place definitions in alphabetical order. No words were changed in this process.

313.020 Kentucky Board of Dentistry -- Members -- Qualifications -- Terms -- Meetings -- Quorum -- Vacancies -- Compensation -- Annual reports.

(1)  The Kentucky Board of Dentistry shall consist of ten (10) members, each appointed by the Governor to a four (4) year term. Seven (7) members of the board shall be licensed dentists appointed from a list of three (3) names recommended for each board position by the resident licensed dentists of Kentucky at an annual election at a time selected by the Kentucky Board of Dentistry. Two (2) members of the board shall be dental hygienists licensed to practice dental hygiene in the Commonwealth. Each appointment to the board of a licensed dental hygienist shall be made from a list of three (3) names recommended for this position by the resident licensed dental hygienists of Kentucky at an annual election at a time selected by the board. One (1) member shall be a citizen at large who is not associated with or financially interested in the practice or business regulated. One (1) nonvoting ex officio representative from each the University of Kentucky and the University of Louisville shall represent the dental schools' interests. One (1) nonvoting ex officio representative from a hygiene program not associated with the University of Kentucky or the University of Louisville shall represent the dental hygiene programs' interests. The hygiene school seats shall rotate on a yearly basis. One (1) nonvoting ex officio representative from the Department for Public Health shall represent the department's interests.

(2)  Individuals seeking board appointment, other than the citizen member, shall have been an actual resident and licensed practicing dentist or dental hygienist of the Commonwealth for not less than five (5) years immediately preceding his or her appointment to the board, be in good standing with the board, and shall not have been disciplined by the board in the past eight (8) years. A voting member shall not receive compensation from or have a financial interest in any dental college or dental department of any institution of learning, dental supply business, or any entity over which the board has regulatory authority or sets standards for. For this subsection alone, a private admonishment shall not count as discipline.

(3)  No board member shall serve more than two (2) consecutive terms. A member appointed to a partial term vacancy exceeding two (2) years shall be deemed to have served one (1) full term. A former member may be reappointed following an absence of one (1) term.

(4)  The board shall annually:

* 1. (a)  Meet at least four (4) times a year;
  2. (b)  At the first meeting of the board after July 1, elect officers of the board by majority vote of the members present; and
  3. (c)  Set a schedule of at least four (4) regular meetings for the next twelve (12) month period.

(5)  A majority of the voting members of the board shall constitute a quorum for the transaction of business.

(6)  (a) A member of the board who misses three (3) regular meetings in one (1) year shall be deemed to have resigned from the board, and his or her position shall be deemed vacant.

(b) The failure of a board member to attend a special or emergency meeting shall not result in any penalty.

(c) The year specified in paragraph (a) of this subsection shall begin with the first meeting missed and end three hundred sixty-five (365) days later or with the third meeting missed, whichever occurs earlier.

(d) The Governor shall appoint a person of the same class to fill the vacancy within ninety (90) days.

(e) A person removed under this subsection shall not be reappointed to the board for four (4) years.

(7)  Each voting member of the board shall receive any necessary expenses incurred in attending its meetings. Each voting member shall receive as compensation two hundred dollars ($200) for each day actually engaged in the duties of his or her office.

(8)  Annual reports and recommendations from the board shall be sent by February 1 each year to the Governor and the General Assembly.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 2, effective July 15, 2010. - - Amended 1998 Ky. Acts ch. 556, sec. 2, effective July 15, 1998, prevails over ch. 552, sec. 4, effective July 15, 1998. -- Amended 1964 Ky. Acts ch. 12, sec. 2(1). -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-3, 2636-18.

Legislative Research Commission Note (7/15/98). This section was amended by 1998 Ky. Acts chs. 552 and 556. Where these Acts are not in conflict, they have been codified together. Where a conflict exists, Acts ch. 556, which was last enacted by the General Assembly, prevails under KRS 446.250.

313.021 Functions and duties of board -- Authority for administrative regulations - - Employees -- Biennial budget.

(1) The board shall:

(a)  Exercise all of the administrative functions of the Commonwealth in the regulation of the profession of dentistry, including but not limited to dentists, dental hygienists, dental assistants, and dental laboratories;

(b)  Subject to the provisions of this chapter, create levels of licensure or registration as appropriate for individuals providing services under this chapter. These shall consist of:

* 1. Dentist;
  2. Dental hygienist; and
  3. Dental assistant;

(c)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A for any license or registration the board may create. The administrative regulations shall, at a minimum, address:

1. Requirements for students, if appropriate;
2. Requirements for education;
3. Eligibility for licensure or registration; and
4. Renewal requirements;

(d)  Oversee the operations and establish the organizational structure of the Office of the Kentucky Board of Dentistry, which is created and shall be attached to the board for administrative purposes. The office shall be headed by the executive director appointed under paragraph (e) of this subsection and shall be responsible for:

1. Personnel and budget matters affecting the board;
2. Fiscal activities of the board, including grant writing and disbursement of funds;
3. Information technology, including the design and maintenance of databases;
4. Licensure of dentists and dental hygienists;
5. Registration of dental assistants;
6. Investigation of complaints; and
7. Other responsibilities which may be assigned to the executive director by the board;

(e)  Employ an executive director and fix his or her compensation. The executive director shall serve at the pleasure of the board, administer the day-to-day operations of the Office of the Kentucky Board of Dentistry, and supervise all directives of the board. The executive director shall possess a baccalaureate degree and shall have no less than five (5) years of experience in public administration;

(f)  Employ or contract with an attorney licensed to practice law in Kentucky and fix his or her compensation. The attorney shall serve at the pleasure of the board and have primary assignment to the board;

(g)  Employ or contract with personnel sufficient to carry out the statutory responsibilities of the board;

(h)  Establish committees and subcommittees and the membership thereof. Members of committees and subcommittees shall not need to be members of the board;

(i)  Provide for affiliation with the American Association of Dental Boards;

(j)  Select the subject matter and standards of proficiency for examinations related to issuance of licenses or registrations issued under this chapter or administrative regulations promulgated hereunder; and

(k)  Have the authority to issue advisory opinions and declaratory rulings related to this chapter and the administrative regulations promulgated thereunder as established by administrative regulation.

1. (2)  The board may utilize materials, services, or facilities as may be made available to it by other state agencies or may contract for materials, services, or facilities.
2. (3)  The board shall develop a proposed biennial budget for all administrative and operational functions and duties.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 3, effective July 15, 2010. - - Created 1998 Ky. Acts ch. 556, sec. 1, effective July 15, 1998.

313.022 Board to prescribe fees, charges, and fines -- Trust and agency fund -- Petty cash fund.

(1)  The board shall, by administrative regulation promulgated in accordance with KRS Chapter 13A, prescribe a schedule of reasonable fees, charges, and fines not to exceed the national average of other state dental boards for:

(a)  Examination;

(b)  Issuance, renewal, and reinstatement of licenses;

(c)  Issuance, renewal, and reinstatement of registrations;

(d)  Inspections and reinspections;

(e)  Applications;

(f)  Other services and materials provided by the board;

(g)  Investigations;

(h)  Administrative legal costs; and

(i)  Fines for infractions.

(2)  All fees, charges, or other moneys collected or received by the board shall be paid into the State Treasury and credited to a trust and agency fund which, notwithstanding KRS 45.229, shall not lapse, to be used by the board for the carrying out of the provisions of this chapter.

(3)  All disbursements by the board in the transactions of its business and in the enforcement of the provisions of this chapter shall be paid out of such trust and agency account as claims against the state in accordance with the provisions of KRS Chapters 45 and 45A.

(4)  The board may establish a petty cash fund not to exceed one thousand dollars ($1,000) for the purpose of making disbursements requiring prompt cash outlay, and to carry out the provisions of KRS 45A.045 applying to the delegation of authority to purchase.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 4, effective July 15, 2010. - - Amended 1980 Ky. Acts ch. 188, sec. 149, effective July 15, 1980. --Amended 1976 (1st Extra. Sess.) Ky. Acts ch. 14, sec. 272, effective January 2, 1978. -- Created 1950 Ky. Acts ch. 139, sec. 2.

Formerly codified as KRS 313.360

313.030 Licensing and registration of dentists, dental hygienists, and dental assistants -- Duration, expiration, and renewal -- Disciplinary action by board - - Board's power to extend license or registration.

(1)  The license or registration held by a dentist, dental hygienist, or dental assistant shall be valid for a period of two (2) years.

(2)  Each license or registration held by a dentist, dental hygienist, or dental assistant shall expire on December 31. A dentist's license shall expire in odd-numbered years, while all other licenses or registrations issued by the board shall expire in even-numbered years.

(3)  Each license or registration held by any person issued under the provisions of this chapter shall be renewed at least biennially. Upon receipt of the application and fee, the board shall verify the accuracy of the application to determine whether the licensee or person seeking licensure or registration has met all the requirements as set forth in this chapter and in the administrative regulations promulgated by the board, and, if so, shall issue to the applicant a license or registration to practice or engage in the activity for the ensuing licensure or registration period. Such license or registration shall render the holder a legal practitioner of the practice or activity specified in the license or registration for the period stated on it. The board shall prescribe by administrative regulation promulgated in accordance with KRS Chapter 13A the beginning and ending of the licensure or registration period.

(4)  Any person who is licensed or registered by the board who allows his or her license or registration to lapse by failing to renew the license or registration as provided in this section may be reinstated by the board on payment of the current fee for original licensure or registration in addition to any late fees and by meeting the requirements of administrative regulations promulgated by the board.

(5)  An application for renewal of a license or registration shall be completed online or, if a written request is made to the board prior to November 1 of the year of expiration, a paper application shall be sent to the last known address of each licensee or certified or registered person requesting a paper application.

(6)  Any person engaging in any practice or activity regulated by the board during the time his or her license or registration has lapsed shall be considered practicing with an expired license or registration and shall be subject to the penalties provided for violations of this chapter.

(7)  Failure to receive the application for renewal of a license or registration shall not relieve a dentist, dental hygienist, or dental assistant from the duty to renew his or her license or registration prior to December 31 of the year in which the license or registration expires.

(8)  The duration of any license or registration issued by the board may be limited by disciplinary action of the board.

(9)  Every license or registration issued by the board shall have the seal of the board affixed. A holder of a license or registration shall retain it in his or her possession and be prepared to exhibit it upon demand by an employer or anyone to whom the holder of the license or registration offers treatment or any board or staff member of the Kentucky Board of Dentistry. Each license or registration issued by the board shall be posted in a conspicuous place in each place of employment of the dentist, dental hygienist, or dental assistant.

(10)  Failure or refusal to produce a license or registration upon demand shall be prima facie evidence that no such license or registration exists.

(11)  In order to ensure a proper transition during the implementation of the provisions of this section, the board may, for a period of no longer than three (3) years, extend a license or registration of any person in order to utilize the expiration date provided for in this section. The board shall, in writing, notify each person whose license or registration is extended of the extension and the new date of expiration. The extension shall be without charge.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 5, effective July 15, 2010. - - Amended 2007 Ky. Acts ch. 96, sec. 12, effective June 26, 2007. -- Amended 1998 Ky. Acts ch. 556, sec. 3, effective July 15, 1998. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. sec. 2636-21.

313.035 Scope of administrative regulations -- Specialties -- Limitation of liability -- Power to prescribe -- Exceptions from requirements of chapter.

(1)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A relating to dentists. The administrative regulations shall include the classification of and licensure of dentists, by examination or credentials, the licensure of specialists, student limited licenses, faculty limited licenses, reciprocity, retirement of a license, reinstatement of a license, charity licenses, and conscious sedation and anesthesia permits.

(2)  Renewal programs shall be organized to include continuing education approved by the board.

(3)  For the purposes of licensure of specialists the board shall only recognize fields of specialty duly recognized and approved by the American Dental Association. Individuals licensed as specialists shall not practice outside of that specialty except as provided for in charitable dentistry as defined by administrative regulation, during a declared disaster by order of the Governor, or when the special needs of the patient require they be followed past the age of eighteen (18) by a pediatric dentist.

(4)  No person licensed under this chapter, who in good faith renders emergency care at the scene of an emergency, shall be liable for any civil damages as a result of any acts or omissions by such person in rendering the emergency care.

(5)  Any dentist who serves on any committee, board, commission, or other entity which is duly constituted by any licensed hospital, dental society or association affiliated with the American Dental Association, dental care foundation affiliated with such dental society or association or governmental or quasi-governmental agency for the purpose of reviewing and evaluating the dental acts of other dentists, or dental auxiliary personnel, shall not be required to respond in damages for any action taken by him or her in good faith as a member of such committee, board, commission, or other entity.

(6)  Licensed dentists may prescribe any drug necessary within the scope of their practice.

(7)  Dentists may sign death certificates the same as physicians, when necessary in the line of their profession.

(8)  Nothing in this chapter shall apply to a legally licensed doctor of medicine unless he or she practices dentistry as a specialty.

(9)  Nothing in this chapter shall apply to a practitioner of dentistry duly licensed by another state or the District of Columbia while making a clinical demonstration before a dental society, convention, association of dentists, or a dental school.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 6, effective July 15, 2010. - - Created 1992 Ky. Acts ch. 243, sec. 1, effective July 14, 1992.

313.040 Administrative regulations governing dental hygienists.

(1)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A relating to dental hygienists. The administrative regulations may include at a minimum the classification of and licensure of dental hygienists, by examination or credentials, general supervision privileges, anesthesia registration, retirement of a license, reinstatement of a license, and charity licenses.

(2)  Renewal programs shall be organized to include continuing education approved by the board.

(3)  A licensed dental hygienist shall practice under the supervision, order, control, and full responsibility of a dentist licensed under this chapter and may practice:

(a)  In a dental office, public or private school, health care facility, or government institution with a dentist on staff;

(b)  Without the physical presence of a supervising dentist as provided in administrative regulations promulgated pursuant to subsections (6), (7), and (8) of this section; or

(c)  Without a supervising dentist if providing screening services in accordance with subsection (9) of this section.

(4)  It shall be unlawful for a person or corporation to practice dental hygiene in a manner that is separate or independent from the dental practice of a supervising dentist or to establish or maintain an office or practice that is primarily devoted to the provision of dental hygiene services.

(5)  A dental hygienist may be employed by the supervising dentist or under contract with a dentist licensed under this chapter who is one (1) of the following:

(a)  The employer of the supervising dentist;

(b)  A shareholder in a professional association formed under KRS 274.015 of which the supervising dentist is a shareholder;

(c)  A member or manager of a limited liability company formed under KRS 275.005 of which the supervising dentist is a member or manager;

(d)  A shareholder in a corporation formed under KRS Chapter 271B of which the supervising dentist is a shareholder;

(e)  A partner or employee of a partnership of which the supervising dentist is a partner or employee; or

(f)  A government entity that employs the dental hygienist to provide dental hygiene services in a public school in connection with other programs the government entity administers.

(6)  A dental hygienist may provide the following procedures in a volunteer community health setting without the supervision of a dentist:

(a)  Dental health education;

(b)  Nutritional counseling;

(c)  Preparing a generalized oral screening with subsequent referral to a dentist; (d) Applying fluoride on patients;

(e)  Demonstration of oral hygiene technique; and

(f)  Sealants.

(7) (a) A dental hygienist may provide, for not more than fifteen (15) consecutive full business days, dental hygiene services to a patient when the supervising dentist is not physically present at the location at which the services are provided if all the following requirements are met:

1. The dental hygienist has at least two (2) years with a minimum of three thousand (3,000) hours of experience in the practice of dental hygiene;
2. The dental hygienist has successfully completed a course approved by the board in the identification and prevention of potential medical emergencies with reregistration in this course every two (2) years;
3. The dental hygienist complies with written protocols for emergencies the supervising dentist establishes;
4. The dental hygienist does not examine or provide dental health services to a patient who has not been examined by the supervising dentist within the previous seven (7) months. The supervising dentist shall have completed and evaluated a medical and dental history of the patient and shall have placed a written order for treatment in the patient's file. The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to determine guidelines for the written order; and
5. A patient is notified in advance of an appointment for dental hygiene services when the supervising dentist will be absent from the location. The patient shall be required to sign an informed consent form, prior to treatment by the hygienist, acknowledging the dentist's absence.

(b) The board shall promulgate administrative regulations to determine procedures the dental hygienist shall not be allowed to perform while the supervising dentist is absent from the work site.

(8)  A dental hygienist licensed by the board may practice as a public health hygienist and may provide dental hygiene services if:

(a)  The services are provided as part of a dental health program;

(b)  The program for which the hygienist works is operated through the Department for Public Health or a governing board of health; and

(c)  The hygienist performs only accepted standardized protocols which are contained within the scope of practice of dental hygiene and which are reviewed and approved by the Board of Dentistry and either the Department for Public Health or the dentist member of the governing board of health, as set out in administrative regulation.

(9)  A dental hygienist may provide screening services in any setting without the supervision of a dentist if:

(a)  The screening is conducted to fulfill the requirements of KRS 156.160(1)(j); and

(b)  Patients are informed that the service being provided is a screening and that only a dentist is licensed to make a definitive diagnosis of the need for dental care.

Effective: July 12, 2012

History: Amended 2012 Ky. Acts ch. 27, sec. 3, effective July 12, 2012. -- Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 7, effective July 15, 2010. -- Amended 1990 Ky. Acts ch. 443, sec. 18, effective July 13, 1990. -- Amended 1970 Ky. Acts ch. 120, sec. 6. -- Amended 1964 Ky. Acts ch. 12, sec. 3. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-3, 2636-10, 2636-19.

313.045 Administrative regulations governing dental assistants.

(1)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to define registration requirements, duties, training, and standards of practice that may be performed by a dental assistant who has a minimum of one (1) year of dental office experience.

(2)  The board shall approve the instructor and the courses of study for approving duties, training, and standards of practice that may be performed by a registered dental assistant.

(3)  A registered dental assistant shall practice under the supervision, order, control, and full responsibility of a dentist licensed under this chapter.

(4)  The registration for each registered dental assistant shall be continuously displayed in a conspicuous place in the office of the licensee.

(5)  Supervising dentists shall only assign to registered dental assistant’s procedures that do not require the professional competence of a licensed dentist or a licensed dental hygienist.

(6)  Registered dental assistant services may include coronal polishing, a cosmetic procedure that is not essential to therapeutic oral prophylaxis, if the following criteria are observed:

(a)  Polishing activities are limited to the use of a rubber cap attached to a slow- speed rotary dental handpiece;

(b)  The assistant has received a certificate from the board's approved instructor that ensures the assistant has successfully completed a dental assisting course developed by the board and a committee of dental educators from the Kentucky institutions of dental education accredited by the Council on Dental Accreditation; and

(c)  The dental assisting course includes basic dental assisting and coronal polishing instruction that includes didactic, preclinical, clinical training, and competency testing.

(7)  Registered dental assistant services shall not include the following:

(a)  The practice of dental hygiene or the performance of the duties of a licensed dental hygienist that require the use of any instrumentation which may elicit the removal of calcareous deposits or accretions on the crowns and roots of teeth;

(b)  Diagnosis;

(c)  Treatment planning and prescription, including prescriptions for drugs or medicaments, or authorization for restorative, prosthodontic, or orthodontic appliances;

(d)  Surgical procedures on hard or soft tissues of the oral cavity, or any other intraoral procedure that contributes to or results in an irreversible alteration of the oral anatomy; and

(e)  The making of final impressions from which casts are made to construct any dental restoration.

(8) A licensed dentist may delegate the taking of radiographs to registered dental assistants who have completed a board-approved course in radiography technique and safety. The course completion certificate shall be maintained by the supervising dentist and be made available to the board upon request.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 8, effective July 15, 2010. - - Created 1964 Ky. Acts ch. 12, sec. 6.

313.045 Administrative regulations governing dental assistants.

(1)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to define registration requirements, duties, training, and standards of practice that may be performed by a dental assistant who has a minimum of one (1) year of dental office experience.

(2)  The board shall approve the instructor and the courses of study for approving duties, training, and standards of practice that may be performed by a registered dental assistant.

(3)  A registered dental assistant shall practice under the supervision, order, control, and full responsibility of a dentist licensed under this chapter.

(4)  The registration for each registered dental assistant shall be continuously displayed in a conspicuous place in the office of the licensee.

(5)  Supervising dentists shall only assign to registered dental assistants procedures that do not require the professional competence of a licensed dentist or a licensed dental hygienist.

(6)  Registered dental assistant services may include coronal polishing, a cosmetic procedure that is not essential to therapeutic oral prophylaxis, if the following criteria are observed:

(a)  Polishing activities are limited to the use of a rubber cap attached to a slow- speed rotary dental handpiece;

(b)  The assistant has received a certificate from the board's approved instructor that ensures the assistant has successfully completed a dental assisting course developed by the board and a committee of dental educators from the Kentucky institutions of dental education accredited by the Council on Dental Accreditation; and

(c)  The dental assisting course includes basic dental assisting and coronal polishing instruction that includes didactic, preclinical, clinical training, and competency testing.

(7)  Registered dental assistant services shall not include the following:

(a)  The practice of dental hygiene or the performance of the duties of a licensed dental hygienist that require the use of any instrumentation which may elicit the removal of calcareous deposits or accretions on the crowns and roots of teeth;

(b)  Diagnosis;

(c)  Treatment planning and prescription, including prescriptions for drugs or medicaments, or authorization for restorative, prosthodontic, or orthodontic appliances;

(d)  Surgical procedures on hard or soft tissues of the oral cavity, or any other intaoral procedure that contributes to or results in an irreversible alteration of the oral anatomy; and

(e)  The making of final impressions from which casts are made to construct any dental restoration.

(8) A licensed dentist may delegate the taking of radiographs to registered dental assistants who have completed a board-approved course in radiography technique and safety. The course completion certificate shall be maintained by the supervising dentist and be made available to the board upon request.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 8, effective July 15, 2010. - - Created 1964 Ky. Acts ch. 12, sec. 6.

313.060 Administrative regulations governing minimal requirements for documentation, oath for disease control compliance, sedation of patients, and compliance with federal statutes and regulations -- Death or incapacity of dentist -- Telehealth -- Continuing education.

(1)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A relating to dental practices which shall include minimal requirements for documentation, Centers for Disease Control compliance, conscious sedation of patients, compliance with federal controlled substances regulations, and any applicable federal statute or regulation.

(2)  Any person practicing or offering to practice dentistry or dental surgery shall practice under his or her own name or the name of a deceased or incapacitated dentist for whom the person practicing dentistry has contracted to perform continuing operations.

(3)  No person shall conduct a dental office in his or her name nor advertise his or her name in connection with any dental office unless he or she personally performs services as a dentist or dental surgeon in such office or personally supervises such services as are performed in such office during a portion of the time such office is operated by him or her only, and shall not use his or her name in connection with that of any other dentist, except as provided for deceased or incapacitated dentists in subsection (4) of this section.

(4)  The executor or administrator of a deceased dentist's estate, or the legal guardian or authorized representative of a dentist who has become incapacitated, may contract with another dentist or dentists to continue the operations of the deceased or incapacitated dentist's practice if the practice of the deceased or incapacitated dentist is a:

(a)  Sole proprietorship;

(b)  Corporation in which the deceased or incapacitated dentist is the sole shareholder; or

(c)  Limited liability company in which the deceased or incapacitated dentist is the sole member.

(5)  Contracts to continue the operations of a deceased or incapacitated dentist's practice may extend until the practice is sold.

(6)  Prior to contracting with another dentist or dentists to continue operations of a deceased or incapacitated dentist's practice, the executor, administrator, guardian, or authorized representative shall file a notification of intent to contract for continuation of practice with the board on a form prescribed by the board. The notification shall include the following information:

(a)  The name and license number of the deceased or incapacitated dentist;

(b)  The name and address of the dental practice;

(c)  The name, address, and tax identification number of the estate;

(d)  The name and license number of each dentist who will provide services in the dental practice;

(e)  An affirmation, under penalty of perjury, that the information provided is true and correct and that the executor, administrator, guardian, or authorized representative understands that any interference by the executor, administrator, guardian, or authorized representative, or any agent or assignee of the executor, administrator, guardian, or authorized representative, with the contracting dentist's or dentists' practice of dentistry or professional judgment or any other violation of this chapter is grounds for an immediate termination of the operations of the dental practice; and

(f)  Any other information the board deems necessary for the administration of this chapter.

(7)  Within thirty (30) days after the death or incapacitation of a dentist, the executor, administrator, guardian, or authorized representative shall send notification of the death or incapacitation by mail to the last known address of each patient of record that has received treatment by the deceased or incapacitated dentist within the previous twelve (12) months, with an explanation of how copies of the practitioner's records may be obtained. This notice may also contain any other relevant information concerning the continuation of dental practice.

(8)  A treating dentist who provides or facilitates the use of telehealth shall ensure:

(a)  That the informed consent of the patient, or another appropriate person with authority to make the health care treatment decision for the patient, is obtained before services are provided through telehealth; and

(b)  That the confidentiality of the patient's medical information is maintained as required by this chapter and other applicable law. At a minimum, confidentiality shall be maintained through appropriate processes, practices, and technology as designated by the board and that conform to applicable federal law.

(9)  The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section and as necessary to:

(a)  Prevent abuse and fraud through the use of telehealth services;

(b)  Prevent fee-splitting through the use of telehealth services; and

(c)  Utilize telehealth in the provision of dental services and in the provision of continuing education.

(10)  A licensed dentist may delegate to a licensed dental hygienist the administration of block and infiltration anesthesia and nitrous oxide analgesia under the direct supervision of a dentist if the dental hygienist completes the following requirements and receives a certificate of verification from the board:

(a)  Formal training from a dental or dental hygiene school accredited by the Commission on Dental Accreditation;

(b)  A minimum of thirty-two (32) hours covering all of the following topics, including but not limited to anatomical considerations, basic injunction technique, basic placement technique, nitrous oxide administration, recordkeeping, armamentarium exercise, local anesthesia and nitrous oxide, techniques of maxillary anesthesia, techniques of mandibular injections, partner injections and partner administration of nitrous oxide, neurophysiology, pharmacology of local anesthetics and nitrous oxide, pharmacology of vasoconstrictors, physical and psychological evaluation, local and systemic complications, and contraindications;

(c) A minimum of two (2) hours of clinical education for nitrous oxide administration with successful completion of administration, monitoring, and removal of nitrous oxide on at least two (2) patients;

(d)  A minimum of twelve (12) hours demonstrating mastery of local anesthesia applications and successful completion of at least three (3) injections each of all maxillary and mandibular injection sites; and

(e)  A score that exceeds seventy-four percent (74%) on a written examination administered after coursework and clinical training.

(11) The board shall approve all continuing education courses and require them for individuals holding anesthesia registration for over one (1) year without practical application. The courses shall be developed and implemented by dental education institutions accredited by the Commission on Dental Accreditation.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 10, effective July 15, 2010. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. sec. 2636-10.

313.070 Persons not licensed or registered -- Prohibitions on practicing -- Penalties -- Disciplinary powers of board -- Exceptions -- Hearing in Circuit Court.

(1)  A person who is not licensed or registered to do so, or whose license or registration to do so has been suspended, revoked, or denied, shall not practice as a dentist, dental hygienist, or dental assistant.

(2)  Any person who violates subsection (1) of this section is guilty of a Class B misdemeanor for the first offense and a Class A misdemeanor for each subsequent offense.

(3)  The provisions of this section shall not preclude the board from revoking or increasing the suspension period of a person practicing as a dentist, dental hygienist, or dental assistant who has illegally practiced while his or her license or registration is under suspension or has been revoked.

(4)  The filing of criminal charges or a criminal conviction for violation of the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the board from instituting or imposing board disciplinary action authorized by this chapter against any person or organization violating this chapter or the administrative regulations promulgated thereunder.

(5)  The institution or imposition of disciplinary action by the board against any person or organization violating the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the filing of criminal charges against or a criminal conviction of any person or organization for violation of the provisions of this chapter or the administrative regulations promulgated thereunder.

(6) (a) Nothing in this chapter shall prohibit students from performing dental operations under the supervision of competent instructors approved by the dental school, college, or department of a university. The board may authorize the students of any dental college, school, or department of a university to practice dentistry in any state or municipal institution or public school, or under the board of health, or in a public clinic or a charitable institution. No fee shall be accepted by the student beyond the expenses provided by the stipend.

(b) Students shall be at all times under the direct supervision of a dentist licensed in this state, who is an instructor of the institution at which they are studying.

(7)  Nothing in this chapter shall prohibit volunteer health practitioners providing services under KRS 39A.350 to 39A.366.

(8)  Violations of this chapter shall be heard in the Circuit Court of the county in which the alleged offense occurred.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 12, effective July 15, 2010. -- Amended 1964 Ky. Acts ch. 12, sec. 4. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-8, 2636-19.

**313.080 Grounds for discipline or for revocation or suspension of license or registration -- Criminal prosecution.**

(1) No person shall:

(a) Call or hold himself out as or use the title dentist, dental specialist, dental hygienist, or dental assistant unless licensed or registered under the provisions of this chapter;

(b) Operate, offer to operate, or represent or advertise the operation of a dental practice of any type unless licensed by or employing individuals licensed by the board;

(c) Employ a dentist, dental hygienist, or dental assistant unless that person is licensed or registered under the provisions of this chapter; or

(d) Maintain any license or certificate authorized by this chapter if convicted of, having entered a guilty plea to, having entered an Alford plea to, or having completed a diversion program for a Class A, B, or C felony offense on or after the date of initial licensure or registration.

(2) Persons licensed or registered by the board or who are applicants for licensure or registration by the board shall be subject to disciplinary action by the board if they:

(a) If licensed or registered by the board, violate any provision of this chapter or any administrative regulation promulgated by the board;

(b) Use fraud or deceit in obtaining or attempting to obtain a license or registration from the board, or are granted a license upon mistake of a material fact;

(c) If licensed or registered by the board, negligently act in a manner inconsistent with the practice of the discipline for which the person is licensed or registered;

(d) Are unable to practice a discipline regulated by the board with reasonable skill or safety or are unfit or incompetent to practice a discipline regulated by the board;

(e) Abuse, misuse, or misappropriate any drugs placed in the custody of the licensee or certified person for administration, or for use of others, or those drugs prescribed by the licensee;

(f) Falsify or fail to make essential entries on essential records;

(g) Are convicted of a misdemeanor which involved acts which bear directly on the qualifications or ability of the applicant, licensee, or certified person to practice the discipline for which the person is an applicant, licensee, or certified person, if in accordance with KRS Chapter 335B;

(h) Are convicted of a misdemeanor which involved fraud, deceit, breach of trust, or physical harm or endangerment to self or others, acts which bear directly on the qualifications or ability of the applicant, licensee, or certificate holder to practice acts in the license or registration held or sought, if in accordance with KRS Chapter 335B;

(i) Are convicted of a misdemeanor offense under KRS Chapter 510 involving a patient;

(j) Have had a license or certificate to practice as a dentist, dental hygienist, or dental assistant denied, limited, suspended, probated, revoked, or otherwise disciplined in Kentucky or in another jurisdiction on grounds sufficient to cause a license to be denied, limited, suspended, probated, revoked, or otherwise disciplined in this Commonwealth;

(k) Have a license or registration to practice any activity regulated by the board denied, limited, suspended, probated, revoked, or otherwise disciplined in another jurisdiction on grounds sufficient to cause a license or registration to be denied, limited, suspended, probated, revoked, or otherwise disciplined in this Commonwealth;

(l) Violate any lawful order or directive previously entered by the board;

(m) Have been listed on the National Practitioner Databank with a substantiated finding of abuse, neglect, or misappropriation of property;

(n) Fail to notify the board in writing of any change in the person's name, residential address, employment address, preferred mailing address, or telephone number within thirty (30) days of the change;

(o) Fail to comply with KRS 422.317 regarding patient records; or

(p) Fail to report to the board any negative outcome related to dental treatment involving intravenous or conscious sedation beyond anxiety control that requires hospital admission.

(3) A person who violates subsection (1)(a), (b), (c), or (d) of this section shall be guilty of a Class B misdemeanor for a first offense and a Class A misdemeanor for each subsequent offense. The board shall consider each individual count of a violation as a separate and subsequent offense.

(4) The provisions of this section shall not preclude prosecution for the unlawful practice of dentistry by an agency of the Commonwealth.

(5) The filing of criminal charges or a criminal conviction for violation of the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the Office of the Board from instituting or imposing board disciplinary action authorized by this chapter against any person or organization violating this chapter or the administrative regulations promulgated thereunder.

(6) The institution or imposition of disciplinary action by the Office of the Board against any person or organization violating the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the filing of criminal charges against or a criminal conviction of any person or organization for violation of the provisions of this chapter or the administrative regulations promulgated thereunder.

**Effective:**June 29, 2017

**History:** Amended 2017 Ky. Acts ch. 158, sec. 57, effective June 29, 2017. -- Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 13, effective July 15, 2010. -- Amended 2001 Ky. Acts ch. 61, sec. 8, effective June 21, 2001. -- Amended 1998 Ky. Acts ch. 552, sec. 1, effective July 15, 1998. -- Amended 1992 Ky. Acts ch. 387, sec. 2, effective July 14, 1992. -- Amended 1990 Ky. Acts ch. 443, sec. 7, effective July 13, 1990. -- Amended 1978 Ky. Acts ch. 351, sec. 1, effective June 17, 1978. -- Amended 1970 Ky. Acts ch. 75, sec. 2. -- Amended 1964 Ky. Acts ch. 12, sec. 5. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-9, 2636-19.

313.085 Law Enforcement Committee -- Emergency order for suspension of license or certificate -- Appeals.

(1)  The Law Enforcement Committee shall consist of three (3) members of the board, including at least two (2) licensed dentists, appointed by the president of the board.

(2)  The Law Enforcement Committee may, by a majority vote, issue an emergency order for the immediate temporary suspension of a license or certificate against which disciplinary action or an investigation is pending if the order is necessary to protect the public.

(3)  The emergency order shall be made in accordance with KRS 13B.125 and shall be based upon a finding by the board that the emergency order is in the public interest and there is substantial evidence of immediate danger to the health, welfare, and safety of any patient or the general public.

(4)  A licensee may appeal the emergency order by a written request to the board for an emergency hearing in accordance with KRS 13B.125 within thirty (30) days after receipt of the order.

(5)  The appeal of an emergency order shall address only the necessity for the action and shall not constitute an appeal of the merits of the underlying complaint or charge.

(6)  The emergency order shall remain in effect until modified or vacated by the Law Enforcement Committee or hearing officer or superseded by final disciplinary action of the Law Enforcement Committee or hearing officer on the underlying complaint or charge.

(7)  The Law Enforcement Committee shall expedite disciplinary hearings in which a license has been suspended under subsection (2) of this section.

(8)  Any party aggrieved by a final order of the board may appeal the final order to the Circuit Court of the county in which the licensee or certificate holder resides after a written decision is rendered.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 14, effective July 15, 2010. -- Created 1964 Ky. Acts ch. 12, sec. 7.

313.090 Law Enforcement Committee's jurisdiction when complaint filed against dentist, dental hygienist, dental assistant, or other registered person -- Procedure for resolving complaint -- Appeals.

(1)  In accordance with the provisions of KRS Chapter 13B, all discipline for which the board is authorized to conduct investigations, hold hearings, and impose punishments is delegated to the executive director, board attorney, and hearing panel as provided in this section.

(2)  Any person may make a complaint to the executive director that a dentist, dental hygienist, dental assistant, or other person licensed or registered by the board has violated a provision of this chapter, an administrative regulation promulgated pursuant to this chapter, a practice standard, or an order of the board.

(3)  Each complaint shall:

(a) Be in writing;

(b) Identify specifically the person or organization against whom the complaint is made;

(c) Set forth the facts relating to the violation alleged and any other supporting information which may have a bearing on the matter;

(d) Contain the name, address, telephone number, facsimile number, and e-mail address, if available, of the complainant; and

(e) Be signed by the complainant as the truth of the statements contained in the complaint by the complainant.

(4)  A complaint which is unsigned shall not be acted upon by the executive director unless the complaint involves a violation of standards set forth by the Centers for Disease Control or alleged mental or physical impairment as provided for in KRS 313.130. A complaint which is not signed in the manner specified in subsection (3) of this section shall be returned to the complainant for completion.

(5)  The executive director of the board may, on behalf of the board, based on knowledge available to the Office of the Board, make a complaint against any person or organization regulated by the board in the same manner as provided in subsection (3) of this section.

(6)  Upon receipt of a properly completed complaint, the executive director shall assign the complaint to a staff investigator who shall investigate the complaint and shall make findings of fact and recommendations to the executive director who shall then convene a meeting of the Law Enforcement Committee.

(7)  The staff investigator shall notify the person or organization against whom the complaint has been filed and shall notify the employer of the dentist, dental hygienist, or dental assistant of the complaint.

(8)  The notification shall name the person or organization complained against, the complainant, the violations alleged, and the facts presented in the complaint and shall notify the person or organization complained against and the employer of:

(a) The fact that the complaint shall be answered, the steps for answering the complaint, and the action to be taken if the complaint is not answered;

(b)  The timeframe and steps in the proceedings of a complaint;

(c)  The rights of the parties, including the right to counsel; and

(d)  The right to testify at any hearing.

(9)  Upon the failure of a licensee or certificate holder to respond to a written accusation or to request a hearing within twenty (20) days after the sending of the accusation, the accused shall be considered to have admitted the truth of the facts and the circumstances in the allegation and appropriate discipline may be imposed.

(10)  After reviewing the complaint and results of any investigation conducted on behalf of the board, the Law Enforcement Committee shall consider whether the accusation is sufficient to remand the matter for a hearing as provided in this section and KRS Chapter 13B. A majority vote of the members of the Law Enforcement Committee shall be necessary for action to either remand the matter for hearing or dismiss the complaint without a hearing.

(11)  If the Law Enforcement Committee dismisses the complaint, all parties notified previously shall be notified of the action. If the Law Enforcement Committee remands the matter for a hearing, all parties notified previously shall be notified of the action.

(12)  Each proceeding to consider the imposition of a penalty which the board is authorized to impose pursuant to this chapter shall be conducted in accordance with KRS Chapter 13B.

(13)  A hearing panel for purposes of making a decision in any disciplinary matter shall consist of a quorum of the remaining seven (7) members of the board who are not on the Law Enforcement Committee and the hearing officer.

(14)  The board may issue subpoenas to compel the attendance of witnesses and the production of documents in the conduct of an investigation. The subpoenas may be enforced by any Circuit Court for contempt. Any order or subpoena of the court requiring the attendance and testimony of witnesses and the production of documentary evidence may be enforced and shall be valid anywhere in this state.

(15)  At all hearings the board attorney or, on request of the board, the Attorney General of this state or one (1) of the assistant attorneys general designated, shall appear and represent the board.

(16)  The dentist, dental hygienist, or dental assistant who is the defendant in a hearing shall be a party to the action and may appear and testify in the matter at any deposition or hearing on the matter and may propose conclusions of law, findings of fact, and penalties to the hearing panel.

(17)  To make a finding or impose discipline, a majority of the members of the hearing panel who are not the hearing officer shall agree on the finding or discipline.

(18)  The final order in any disciplinary proceeding shall be prepared by the hearing officer and sent to all parties in the manner prescribed by law.

(19)  Any person or entity aggrieved by a final order of the board may appeal the final order to the Circuit Court of the county in which the person or entity resides in accordance with KRS Chapter 13B.

(20) Upon final disposition of a complaint which results in disciplinary action, the final order shall be published on the Web site of the board, placed in the record of the licensed or registered individual, and reported to the National Practitioner Database.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 15, effective July 15, 2010. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. sec. 2636-13.

313.100 Sanctions for violation of statute, administrative regulation, or practice standard -- Administrative hearing -- Criminal charges -- Expungement of record.

(1)  If it is determined that an entity regulated by the board, a dentist, dental hygienist, dental specialist, or dental assistant has violated a statute, administrative regulation, or practice standard relating to serving as an entity regulated by the board, a dentist, dental hygienist, dental specialist, or dental assistant, the Office of the Board may impose any of the sanctions provided in subsection (2) of this section. Any party to the complaint shall have the right to propose findings of fact and conclusions of law, and to recommend sanctions.

(2)  The Office of the Board shall require an acceptable plan of correction and may use any one (1) or more of the following sanctions when disciplining a dentist, dental hygienist, dental specialist, or dental assistant or any entity regulated by the board:

(a)  Private admonishment;

(b)  Public reprimand;

(c)  Fines;

(d)  Revocation of licensure or registration;

(e)  Suspension of licensure or registration until a time certain;

(f)  Suspension until a certain act or acts are performed;

(g)  Limitation of practice permanently;

(h)  Limitation of practice until a time certain;

(i)  Limitation of practice until a certain act or acts are performed;

(j)  Repassing a portion of the clinical examination;

(k)  Probation for a specified time and conditions of probation; or

(l)  Costs of the disciplinary action as defined by administrative regulation.

(3)  A private admonishment shall not be subject to disclosure to the public under KRS 61.878(1)(l). A private admonishment shall not constitute disciplinary action but may be used by the board for statistical purposes or in subsequent disciplinary action against the same licensee, certificate holder, or applicant.

(4)  The filing of criminal charges or a criminal conviction for violation of the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the Office of the Board from instituting or imposing board disciplinary action authorized by this chapter against any person or organization violating this chapter or the administrative regulations promulgated thereunder.

(5)  The institution or imposition of disciplinary action by the Office of the Board against any person or organization violating the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the filing of criminal charges against or a criminal conviction of any person or organization for violation of the provisions of this chapter or the administrative regulations promulgated thereunder.

(6)  The board may maintain an action to enjoin the practice of or the attempt to practice as a dentist, dental hygienist, or dental assistant without a license or registration to do so.

(7) In case of a violation of any injunction granted under this section, the court may use its inherent powers for adequate relief.

(8) (a) Any licensee or certificate holder who has received a private admonishment may request in writing for the board to expunge the private admonishment from the licensee or certificate holder's permanent record.

(b)  The request for expungement may be filed no sooner than three (3) years after the date on which the licensee or certificate holder has completed disciplinary sanctions imposed and if the licensee or certificate holder has not been disciplined for any subsequent violation of the same nature within this period of time.

(c)  No person may have his record expunged under this chapter more than once.

(9)  If it is found the person who is licensed or registered by the board has been convicted of, pled guilty to, or entered an Alford plea to a Class A, B, or C felony offense, or has completed a diversion program for a Class A, B, or C felony offense, the license or registration shall be revoked.

(10)  A licensee subject to any disciplinary proceeding under this chapter shall be afforded an administrative hearing conducted in accordance with KRS Chapter 13B and may appeal any final order of the board to the Franklin Circuit Court.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 16, effective July 15, 2010. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. secs. 2636-3, 2636-6.

313.130 Examination of licensee, certificate holder, or applicant by physician or psychologist -- Temporary suspension -- Well-being Committee to promote identification, treatment, and rehabilitation of impaired individuals -- Confidentiality of documents -- Limits on disclosure.

(1)  If the Law Enforcement Committee has reasonable cause to believe any licensee or certificate holder or any applicant for licensure or registration by examination, reinstatement, credentials, or change of status is unable to practice with reasonable skill or safety or has abused alcohol or drugs, it may require such person to submit to a mental or physical examination by a physician or psychologist it designates. Upon the failure of the person to submit to a mental or physical examination, unless due to circumstances beyond the person's control, the Law Enforcement Committee may initiate an action for immediate temporary suspension pursuant to this chapter or deny the application until the person submits to the required examination. The Law Enforcement Committee may issue an immediate and temporary suspension from the time of the examination until the hearing.

(2)  Every licensee or certificate holder or applicant for licensure or registration by examination, reinstatement, credentials, or change of status shall be deemed to have given consent to submit to an examination when so directed in writing by the board. The direction to submit to an examination shall contain the basis of the Office of the Board's reasonable cause to believe that the person is unable to practice with reasonable skill or safety, or has abused alcohol or drugs. The person shall be deemed to have waived all objections to the admissibility of the examining physician's or psychologist's testimony or examination reports on the ground of privileged communication.

(3)  The licensee or certificate holder or applicant for licensure or registration by examination, reinstatement, credentials, or change of status shall bear the cost of any mental or physical examination ordered by the Office of the Board.

(4)  The board shall establish a committee for individuals licensed or registered by the board, to be designated as the Well-being Committee, to promote the early identification, intervention, treatment, and rehabilitation of individuals licensed or registered who may be impaired by reasons of illness, alcohol or drug abuse, or as a result of any physical or mental condition. The board may enter into a contractual agreement with a nonprofit corporation or a dental association for the purpose of creating, supporting, and maintaining the Well-being Committee. The board may promulgate administrative regulations in accordance with KRS Chapter 13A to effectuate and implement the committee and may expend any funds it deems necessary to adequately provide for operational expenses of the committee. Any member of the Well-being Committee, as well as any administrator, staff member, consultant, agent, or employee of the committee acting within the scope of their duties and without actual malice, and all other persons who furnish information to the committee in good faith and without actual malice, shall not be liable for any claim of damages as a result of any statement, decision, opinion, investigation, or action taken by the committee, or by any individual member of the committee.

(5)  All information, interviews, reports, statements, memoranda, or other documents

furnished to or produced by the Well-being Committee, as well as communications to or from the committee, and any findings, conclusions, interventions, treatment, rehabilitation, or other proceedings of the committee which in any way pertain to an individual licensed or registered who may be, or who actually is, impaired shall be privileged and confidential.

(6)  All records and proceedings of the Well-being Committee which pertain or refer to an individual licensed or registered who may be, or who actually is, impaired shall be privileged and confidential and shall be used by the committee and its members only in the exercise of the proper function of the committee and shall not be considered public records and shall be subject to court subpoena and subject to discovery or introduction as evidence in any civil, criminal, or administrative proceedings except as described in subsection (4) of this section.

(7)  The Well-being Committee may disclose information relative to an impaired licensee or certificate holder only when:

(a)  It is essential to disclose the information to further the intervention, treatment, or rehabilitation needs of the impaired individual, and only to those persons or organizations with a need to know;

(b)  Its release is authorized in writing by the impaired individual;

(c)  The committee is required to make a report to the board; or

(d)  The information is subject to court order.

Effective: July 15, 2010

History: Repealed and reenacted 2010 Ky. Acts ch. 85, sec. 17, effective July 15, 2010. -- Amended 2007 Ky. Acts ch. 101, sec. 2, effective June 26, 2007. -- Amended 2005 Ky. Acts ch. 45, sec. 7, effective June 20, 2005; and ch. 93, sec. 4, effective March 16, 2005. -- Amended 2004 Ky. Acts ch. 163, sec. 1, effective July 13, 2004. -- Amended 1992 Ky. Acts ch. 387, sec. 3, effective July 14, 1992. -- Amended 1970 Ky. Acts ch. 75, sec. 3. -- Amended 1966 Ky. Acts ch. 255, sec. 246. -- Amended 1964 Ky. Acts ch. 12, sec. 9. -- Recodified 1942 Ky. Acts ch. 208, sec. 1, effective October 1, 1942, from Ky. Stat. sec. 2636-6a.

Legislative Research Commission Note (6/20/2005). Although KRS 313.130 was included in 2005 Ky. Acts ch. 45, sec. 7 and ch. 93, sec. 4, as having been amended, the amendment relettering paragraphs of this section in those acts became unnecessary when the Office of the Kentucky Attorney General requested that other changes be made to the rearrangement of the paragraphs of KRS 61.878, which was also amended in 2005 Ky. Acts chs. 45 and 93. The Statute Reviser made these changes under the authority of KRS 7.136.

313.254 Temporary license for dentist or dental hygienist to provide medical care to indigent populations -- Waiver for volunteers.

(1)  The board may grant a temporary license to a dentist or dental hygienist who holds a currently valid license from another state, district, possession, or territory of the United States for the sole purpose of providing medical care to indigent populations who may not otherwise be able to obtain such services, without expectation of compensation or charge to the individual, and without payment or reimbursement by any governmental agency or insurer. The health care services shall be provided to charitable organizations only. A temporary license issued under this section shall be valid for no more than a ten (10) day period during any given charitable event.

(2)  To obtain the temporary license issued under subsection (1) of this section, the dentist or dental hygienist shall:

(a)  Apply online or in writing to the Board of Dentistry at least thirty (30) days prior to providing the health care services under subsection (1) of this section;

(b)  Submit himself or herself for a National Practitioner Databank query to be conducted by the board.

(3)  Prior to beginning the services permitted under subsection (1) of this section, the dentist or dental hygienist shall notify the appropriate agent in the Cabinet for Health and Family Services.

(4)  A dentist or dental hygienist working under this section may perform all preventive procedures and treatments including but not limited to scaling, prophylaxis, radiographs, sealants, and fluoride application.

(5)  In addition to the procedures permitted under subsection (4) of this section, a dentist may perform those procedures or treatments considered to be routine in nature and that are typically performed and completed in one (1) appointment. The procedures include simple extractions and basic restorative procedures. All procedures performed other than those provided in this subsection and subsection (4) of this section shall be performed by a dentist holding a currently valid license in the Commonwealth.

(6)  A dentist or dental hygienist working under this section who registers as a charitable health care provider under KRS 216.941 shall be eligible for the provision of medical malpractice insurance procured under KRS 304.40-075.

(7)  The board may waive the requirements of subsections (1), (2), and (3) of this section and the requirements of KRS 313.035 and 313.040 for a dentist or dental hygienist who volunteers to provide dental services through a nonprofit, all- volunteer charitable organization.

(8)  The board shall promulgate administrative regulations that are reasonably necessary to administer this section.

(9)  Any person or organization that conducts a nonprofit charitable dentistry event shall be granted immunity from civil liability in accordance with KRS 411.200.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 85, sec. 22, effective July 15, 2010. -- Amended 2008 Ky. Acts ch. 92, sec. 2, effective April 14, 2008. -- Amended 2005 Ky. Acts ch. 99, sec. 595, effective June 20, 2005. -- Created 2002 Ky. Acts ch. 142, sec. 1, effective July 15, 2002.

Legislative Research Commission Note (7/15/2010). A reference in subsection (7) of this statute to "KRS 313.045" has been changed in codification to "KRS 313.035 and 313.040" to correct an inadvertent omission by the drafter, since KRS 313.045 was repealed and reenacted in the same Act to relate to administrative regulations concerning dental assistants, rather than licensing requirements addressed in KRS 313.035 and 313.040.

313.550 Dental laboratories -- Employees -- Prohibitions.

(1) A dental laboratory shall employ at least one (1) of the following:

(a) A certified dental technician who shall supervise all work performed in accordance with a written laboratory procedure work order issued by a dentist licensed pursuant to this chapter; or

(b) A dentist licensed pursuant to this chapter.

(2)  No dentist shall use the services of any dental laboratory to construct, alter, repair, or duplicate any denture, plate, bridge, splint, orthodontic, or prosthetic appliance, without first furnishing the commercial dental laboratory a written procedure work order. Both the commercial dental laboratory and the dentist producing the work order shall keep a copy on file for two (2) years, and all laboratory procedure work orders required by this subsection shall be open to inspection by the board.

(3)  A dental laboratory that employs or contracts with a dentist licensed according to this chapter may construct, alter, repair, or duplicate any denture, plate, bridge, splint, orthodontic, or prosthetic appliance without a work order from a referring dentist if the patient is seen or evaluated, or whose care is supervised by the referring dentist.

Effective: July 15, 2010  
History: Created 2010 Ky. Acts ch. 85, sec. 11, effective July 15, 2010.

**201 KAR 8:016. Registration of dental laboratories.**

      RELATES TO: KRS 313.021, 313.022, 313.550

      STATUTORY AUTHORITY: KRS 313.021(1)(a), (c), 313.022(1)(c), 313.080, 313.090, 313.100

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.021(1)(a) requires the board to govern dental laboratories. KRS 313.021(1)(c) requires the board to promulgate administrative regulations for any license or registration created by the board. KRS 313.022(1) requires the board to promulgate administrative regulations to prescribe a reasonable schedule of fees, charges, and fines. This administrative regulation establishes requirements for the issuance and renewal of dental laboratory registration with the board. This administrative regulation establishes fees for the issuance, renewal, and reinstatement of registrations of dental laboratories with the board.

      Section 1. (1) Each commercial dental laboratory operating, doing business, or intending to operate or do business in the state shall register with the board and pay the fee established in Sections 4 and 8 of this administrative regulation.

      (2) A dental laboratory shall be considered operating or doing business within this state if its work product is prepared pursuant to a written authorization originating within this state.

      Section 2. The board shall not issue a registration to a commercial dental laboratory unless the applying dental laboratory is operated under the supervision of at least one (1) certified dental technician (CDT) or dentist licensed in this state in accordance with KRS 313.550.

      Section 3. If the dental laboratory has violated any provision of KRS Chapter 313 or 201 KAR Chapter 8, the dental laboratory shall be subject to disciplinary action pursuant to KRS 313.080 and 313.100.

      Section 4. Each commercial dental laboratory shall pay a fee of $150 to the board before a registration shall be issued to the applicant.

      Section 5. Upon the granting of a registration, the board shall assign to that laboratory a dental registration number. The laboratory registration number shall appear on all invoices or other correspondence of the laboratory.

      Section 6. A dentist shall use only those services of a commercial dental laboratory that is duly registered with the board as required by this administrative regulation. A dentist shall include the registration number of the dental laboratory on the dentist’s work order.

      Section 7. Each commercial dental laboratory operating, doing business, or intending to operate or do business within the state shall submit an Application for Registration of Dental Laboratory or Renewal of Registration of Dental Laboratory to the board on a form provided by the board accompanied with the registration or renewal fee required. The application shall include:

      (1) The name, mailing address, phone number, and e-mail address of the laboratory;

      (2) The physical address of the laboratory if different from the mailing address;

      (3) The name and CDT number of the supervising CDT or the name and license number of the supervising dentist who is licensed in this state;

      (4) A statement that the laboratory meets the infectious disease control requirements under Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention (CDC) of the United States Public Health Service;

      (5) An acknowledgement by the supervising CDT or dentist who is licensed in this state that the laboratory will provide material disclosure to the prescribing dentist that contains the U.S. Food and Drug Administration registration number of all patient contact materials contained in the prescribed restoration in order that the dentist may include those numbers in the patient's record; and

      (6) An acknowledgement by the supervising CDT or dentist who is licensed in this state that he or she will disclose to the prescribing dentist the point of origin of the manufacture of the prescribed restoration. If the restoration was partially or entirely manufactured by a third-party provider, the point of origin disclosure shall identify the portion manufactured by a third-party provider and the city, state, and country of the provider.

      Section 8. Each commercial dental laboratory registered with the board shall be required to renew its registration before July 31 each year by completing and submitting a Renewal of Registration of Dental Laboratory form and paying a fee of $150.

      Section 9. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Application for Registration of Dental Laboratories”, June 2014; and

      (b) "Renewal Application for Registration of Dental Laboratories”, March 2014.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at <http://dentistry.ky.gov>. (40 Ky.R. 2385; Am. 2679; 41 Ky.R. 257; eff. 6-18-2014.)

**201 KAR 8:510. Advisory opinions.**

      RELATES TO: KRS 313.021(1)(k)

      STATUTORY AUTHORITY: KRS 313.021(1)

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.021(1) authorizes the board to issue advisory opinions. This administrative regulation establishes the procedures for submission, consideration, and disposition of a request for an advisory opinion.

Section 1. Form of Request. (1) The request shall be signed by one (1) or more persons, with each signer’s mailing address and telephone number, and if available, fax number and e-mail address, clearly indicated. If a person signs on behalf of a corporation or association, the name of the entity, the address, telephone number, and fax number of the entity shall be included. The signer shall date the request.

      (2) The request shall be submitted on the Advisory Opinion Request Form.

Section 2. Consideration. (1) The board president or designee may, in writing schedule an informal meeting between the requester, any interested persons, and a representative of the board, to present information and discuss questions raised. A final decision shall not be made at an informal meeting.

      (2) In rendering an advisory opinion, the board shall:

      (a) Consider all materials submitted with the request;

      (b) Consider any relevant document, data, or other material; and

      (c) Consider comments from the board’s staff.

      (3) The board may:

      (a) Consult experts or other individuals;

      (b) Require argument of the question; or

      (c) Permit the introduction of evidence.

Section 3. Issuance of Opinion or Refusal to Issue an Opinion. The board shall issue an advisory opinion in response to the request, unless one (1) of the following applies:

      (1) The board does not have jurisdiction over the questions presented in the request;

      (2) The questions presented are pending in a disciplinary matter, other board, or judicial proceeding that may definitively decide the issues;

      (3) The questions presented by the request would be more properly resolved in a different type of proceeding;

      (4) The facts or questions presented in the request are unclear, overbroad, insufficient, or otherwise inappropriate as a basis upon which to issue an opinion;

      (5) There is no need to issue an opinion because the questions raised in the request have been settled due to a change in circumstances;

      (6) The requester is asking the board to determine if a statute is unconstitutional; or

      (7) An opinion would not be in the public interest.

      Section 4. Publication of Advisory Opinions. (1) All advisory opinions shall be published and maintained by the office of the board. Publication shall be made by hard copy and by placing the entire opinion on the board’s Web site.

      (2) All names or references that allow for the identification of a party shall be redacted from the final published advisory opinion.

      (3) An index of all final published advisory opinions shall be maintained by the office of the board. The index shall include the subject of each opinion, its publication date, and any prospective changes effectuated by the opinion.

      Section 5. Reconsideration and Appeals. (1) Any person may request the board to reconsider a published advisory opinion within ten (10) working days of the publication of the opinion.

      (2) The request for reconsideration shall be submitted on the Advisory Opinion Request Form.

      (3) Requests for reconsideration shall contain:

      (a) A clear and concise statement of the grounds for the reconsideration;

      (b) The proposed conclusion with a summary of the rationale supporting the proposed conclusion;

      (c) Any supportive statute, administrative regulation, document, order, or other statement of law or policy, with an explanation of the relevance of the material offered; and

      (d) A statement of adverse impact, if any, resulting from the published advisory opinion.

      (4) Any notice of appeal to the Franklin Circuit Court filed pursuant to KRS 313.090 shall be served upon the board president, the executive director, and the general counsel for the board.

      Section 6. Incorporation by Reference. (1) "Advisory Opinion Request Form", July 2010, is incorporated by reference.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at http://dentistry.ky.gov. (37 Ky.R. 616; Am. 1627; eff. 2-4-2011.)

**201 KAR 8:520. Fees and fines.**

      RELATES TO: KRS 218A.205(3)(e)4., 313.022, 313.030, 313.100(2)(c)

      STATUTORY AUTHORITY: KRS 218A.205(3)(e)4., 313.022(1)

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.022(1) requires the board to promulgate administrative regulations to prescribe a reasonable schedule of fees, charges, and fines. This administrative regulation establishes fees, charges, and fines for the issuance, renewal, and reinstatement of licenses, for services and materials provided by the board, for investigations, and for infractions.

      Section 1. Dentists. (1) The initial licensure fee for a general dental license applied for in a nonrenewal year shall be $325.

      (2) The initial licensure fee for a general dental license applied for in a renewal year shall be $175.

      (3) The renewal fee for a general dental license appropriately renewed on or before the expiration of the license shall be $295.

      (4) The renewal reinstatement fee for a general dental license renewed between January 1 and January 15 of the year following the expiration of the license shall be $280 in addition to the renewal fee.

      (5) The renewal reinstatement fee for a general dental license renewed between January 16 and January 31 of the year following the expiration of the license shall be $560 in addition to the renewal fee.

      (6) The renewal reinstatement fee for a general dental license renewed on or after February 1 of the year following the expiration of the license shall be $1,120 in addition to the renewal fee.

      (7) The initial fee for a dental anesthesia or sedation permit shall be $250.

      (8) The renewal fee for a dental anesthesia or sedation permit shall be seventy-five (75) dollars and is in addition to the renewal fee for a general dental license.

      (9) The initial fee for an anesthesia or sedation facility certificate shall be $250.

      (10) The renewal fee for an anesthesia or sedation facility certificate shall be seventy-five (75) dollars.

      (11) The specialty license application fee shall be $100.

      (12) The specialty license renewal fee shall be fifty (50) dollars and is in addition to the renewal fee for a general dental license.

      (13) The fee for reinstatement of a properly retired general dental license shall be $350.

      (14) The fee for reinstatement of a properly retired specialty license shall be fifty (50) dollars and is in addition to the renewal fee for a general dental license.

      Section 2. Dental Hygienists. (1) The initial licensure fee for a dental hygiene license applied for in a nonrenewal year shall be $125.

      (2) The initial licensure fee for a dental hygiene license applied for in a renewal year shall be seventy-five (75) dollars.

      (3) The renewal fee for a dental hygiene license appropriately renewed on or before the expiration of the license shall be $110.

      (4) The renewal reinstatement fee for a dental hygiene license renewed between January 1 and January 15 of the year following the expiration of the license shall be $130 in addition to the renewal fee.

      (5) The renewal reinstatement fee for a dental hygiene license renewed between January 16 and January 31 of the year following the expiration of the license shall be $260 in addition to the renewal fee.

      (6) The renewal reinstatement fee for a dental hygiene license renewed on or after February 1 of the year following the expiration of the license shall be $520 in addition to the renewal fee.

      (7) The initial dental hygiene anesthesia registration fee shall be fifty (50) dollars.

      (8) The initial dental hygiene general supervision registration fee shall be fifty (50) dollars.

      (9) The initial dental hygiene intravenous access line registration fee shall be fifty (50) dollars.

      (10) The initial dental hygiene laser debridement registration fee shall be fifty (50) dollars.

      (11) The fee for reinstatement of a properly retired dental hygiene license shall be $125.

      Section 3. General Fees. (1) The fee for the verification of a license shall be forty (40) dollars.

      (2) The fee for a duplicate license shall be twenty-five (25) dollars.

      (3) The fee for a contact list for either currently licensed dentists, currently licensed dental hygienists, or currently registered dental assistants shall be:

      (a) $100 for lists obtained for not-for-profit use; and

      (b) $1,000 for lists obtained for profit use.

      (4) The fee for a query of the National Practitioner Data Bank shall be twenty-five (25) dollars.

      (5) The fee for any returned check or rejected electronic payment shall be twenty-five (25) dollars.

      Section 4. General Fines. (1) Fines may be agreed to by settlement agreement or as listed in this section.

      (2) The costs of a disciplinary action taken as a result of a hearing shall be equal to the amount of all actual and necessary costs associated with the hearing.

      (3) If a licensee is found to be deficient on hours following a continuing education audit, the fine shall be $200 per hour deficient not to exceed $5,000.

      (4) The fine for failure of a follow-up infection control inspection shall be $500.

      (5) The fine for failure of a follow-up anesthesia or sedation facility inspection, performed no sooner than thirty (30) days following an initial failed inspection, shall be $1,500.

      Section 5. All fines and fees paid to the board shall be nonrefundable. (37 Ky.R. 618; Am. 1628; eff. 2-4-2011; 39 Ky.R. 512; 1377; eff. 2-1-2013.)

**201 KAR 8:532. Licensure of dentists.**

      RELATES TO: KRS 39A.350-39A.366, 214.615, 218A.205, 304.040-075, 313.010(9), 313.030, 313.254

      STATUTORY AUTHORITY: KRS 214.615(2), 218A.205, 313.021(1)(a), (b), (c), 313.035(1), (3), 313.254

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.035 and 218A.205 require the board to promulgate administrative regulations relating to requirements and procedures for the licensure of dentists. This administrative regulation establishes requirements and procedures for licensure of dentists.

      Section 1. General Licensure Requirements. An applicant desiring dental licensure in the Commonwealth shall at a minimum:

      (1) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;

      (2) Submit a completed, signed, and notarized Application for Dental Licensure with an email contact address and with an attached applicant photo taken within the past six (6) months;

      (3) Pay the fee required by 201 KAR 8:520;

      (4) Not be currently subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

      (5) Provide proof of completion of the requirements of KRS 214.615(1);

      (6) Complete and pass the board’s jurisprudence exam;

      (7) Provide proof of having current certification in cardiopulmonary resuscitation (CPR) which meets or exceeds the guidelines set forth by the American Heart Association;

      (8) Submit to a nation-wide criminal background check by fingerprint through the Federal Bureau of Investigation or by the Department of Kentucky State Police;

      (9) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or currently in any state or jurisdiction;

      (10) Provide proof that the applicant is a graduate of a Commission on Dental Accreditation (CODA) accredited dental school or college or dental department of a university;

      (11) Provide proof that the applicant has successfully completed Part I and Part II of the National Board Dental Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations; and

      (12) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      Section 2. Requirements for Licensure by Examination. (1) Each individual desiring initial licensure as a dentist by examination shall complete all of the requirements listed in Section 1 of this administrative regulation.

      (2) Each individual desiring initial licensure as a dentist by examination shall successfully complete a clinical examination within the five (5) years preceding the filing of the application. The board shall accept the following regional clinical examinations:

      (a) The examination of the Council of Interstate Testing Agencies (CITA);

      (b) The examination of the Central Regional Dental Testing Service (CRDTS);

      (c) The examination of a North East Regional Board of Dental Examiners (NERB);

      (d) The examination of the Southern Regional Testing Agency (SRTA); and

      (e) The examination of the Western Regional Examining Board (WREB).

      (3) An individual desiring initial licensure as a dentist by examination more than two (2) years after fulfilling all of the requirements of his CODA accredited dental education shall:

      (a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or

      (b) If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky.

      (4) An applicant who has taken a clinical examination three (3) times and failed to achieve a passing score shall not be allowed to sit for the examination again until the applicant has completed and passed a remediation plan approved by the board.

      Section 3. Requirements for Licensure by Credentials. Each individual desiring initial licensure as a dentist by credentials shall:

      (1) Complete all of the requirements listed in Section 1 of this administrative regulation;

      (2) Provide proof of having passed a state, regional, or national clinical examination used to determine clinical competency in a state or territory of the United States or the District of Columbia; and

      (3) Provide proof that, for five (5) of the six (6) years immediately preceding the filing of the application, the applicant has been engaged in the active practice of dentistry when he or she was legally authorized to practice dentistry in a state or territory of the United States or the District of Columbia if the qualifications for the authorization were equal to or higher than those of the Commonwealth of Kentucky.

      Section 4. Requirements for Student Limited Licensure. (1) Each individual desiring a student limited license shall:

      (a) Complete all of the requirements listed in Section 1 of this administrative regulation with the exception of subsections (10) and (11);

      (b) Provide a letter from the dean or program director of a postgraduate, residency, or fellowship program in the Commonwealth of Kentucky stating that the applicant has been accepted into the program and the expected date of completion;

      (c) Submit a signed Statement Regarding Student Licensure Limitations; and

      (d) Submit an official final transcript of the applicant's dental coursework with the degree posted.

      (2) An individual licensed under this section shall only practice dentistry in conjunction with programs of the dental school where the individual is a student and shall only provide professional services to patients of these programs.

      (3) Licenses issued under this section shall be renewed with all other dental licenses issued by the board and shall automatically expire upon the termination of the holder’s status as a student.

      (4) A program enrolling an individual holding a student limited license shall notify the board in writing of the date the student graduates from or exits the program.

      (5) Nothing in this section shall prohibit:

      (a) A student from performing a dental operation under the supervision of a competent instructor within the dental school, college, or department of a university or private practice facility approved by the board. The board may authorize a student of any dental college, school, or department of a university to practice dentistry in any state or municipal institution or public school, or under the board of health, or in a public clinic or a charitable institution. A fee shall not be accepted by the student beyond the expenses provided by the stipend;

      (b) A student limited license holder from working under the general supervision of a licensed dentist within the confines of the postgraduate training program; and

      (c) A volunteer health practitioner from providing services under KRS 39A.350-39A.366.

      Section 5. Requirements for Faculty Limited Licensure. (1) Each individual desiring a faculty limited license shall:

      (a) Complete all of the requirements listed in Section 1 of this administrative regulation with the exception of subsections (10) and (11);

      (b) Provide a letter from the dean or program director of the dental school showing a faculty appointment with one (1) of the Commonwealth’s dental schools;

      (c) Submit a signed Statement Regarding Faculty Licensure Limitations; and

      (d) Submit an official final transcript of his or her dental coursework with the degree posted.

      (2) An individual licensed under this section shall only practice dentistry in conjunction with programs of the dental school where the individual is a faculty member and shall only provide professional services to patients of these programs.

      (3) Licenses issued under this section shall be renewed with all other dental licenses issued by the board and shall automatically expire upon the termination of the holder’s status as a faculty member.

      (4) A program employing an individual holding a faculty limited license shall notify the board in writing of the date the licensee exits the program.

      Section 6. Requirements for Licensure of Foreign Trained Dentists. (1) Each individual desiring licensure as a dentist who is a graduate of a non-CODA accredited dental program shall successfully complete two (2) years of postgraduate training in a CODA accredited general dentistry program and shall:

      (a) Provide proof of having passed the Test of English as a Foreign Language (TOEFL) administered by the Educational Testing Service with a score of 650 on the paper-based examination or a score of 116 on the internet-based examination, if English is not the applicant's native language;

      (b) Submit a completed, signed, and notarized Application for Dental Licensure with an email contact address and with an attached applicant photo taken within the past six (6) months;

      (c) Pay the fee required by 201 KAR 8:520;

      (d) Not be currently subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

      (e) Provide proof of having completed the requirements of KRS 214.615(1);

      (f) Complete and pass the board’s jurisprudence exam;

      (g) Provide proof of having current certification in cardiopulmonary resuscitation (CPR) that meets or exceeds the guidelines set forth by the American Heart Association;

      (h) Submit to a criminal background check by fingerprint through the Federal Bureau of Investigation or by the Department of Kentucky State Police;

      (i) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or currently in any state or jurisdiction;

      (j) Provide proof of having successfully completed two (2) years postgraduate training in a CODA accredited general dentistry program;

      (k) Submit one (1) letter of recommendation from the program director of each training site;

      (l) Provide proof of successful completion of Part I and Part II of the National Board Dental Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations within the five (5) years preceding application for licensure;

      (m) Provide proof of successfully completing within the five (5) years prior to application a clinical examination required by Section 2(2) of this administrative regulation; and

      (n) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      (2) An individual desiring initial licensure as a dentist who is a graduate of a non-CODA accredited dental program and applies more than two (2) years after fulfilling all of the requirements of his or her postgraduate training in a CODA accredited general dentistry program shall:

      (a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or

      (b) If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky.

      Section 7. Requirements for Charitable Limited Licensure. (1) Each individual desiring a charitable limited license shall:

      (a) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;

      (b) Submit a completed, signed, and notarized Application for Charitable Dental Licensure with an attached applicant photo taken within the past six (6) months;

      (c) Not be subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

      (d) Have a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; and

      (e) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      (2) An individual licensed under this section shall:

      (a) Work only with charitable entities registered with the Cabinet for Health and Family Services that have met the requirements of KRS 313.254 and 201 KAR 8:581;

      (b) Only perform procedures allowed by KRS 313.254(4) and (5) which shall be completed within the duration of the charitable event;

      (c) Be eligible for the provisions of medical malpractice insurance procured under KRS 304.40-075;

      (d) Perform these duties without expectation of compensation or charge to the individual, and without payment or reimbursement by any governmental agency or insurer;

      (e) Have a charitable limited license that shall be valid for no more than two (2) years and shall expire during the regular dental renewal cycle; and

      (f) Comply with reciprocity requirements if applicable.

      1. A state that extends a reciprocal agreement shall comply with this section.

      2. An individual shall notify the sponsor of a charitable clinic and the board of the intent to conduct or participate in the clinic.

      3. An individual conducting or participating in a charitable clinic shall have a license to practice dentistry in the state in which the dentist practices.

      (3) A dentist licensed under this section shall not be allowed to prescribe any medications while practicing in the Commonwealth.

      Section 8. Requirements for Specialty Licensure. Each individual desiring initial licensure as a specialist as defined by KRS 313.010(9) shall:

      (1) Submit a completed, signed, and notarized Application for Specialty Licensure with an attached applicant photo taken within the past six (6) months;

      (2) Pay the fee required by 201 KAR 8:520;

      (3) Hold an active Kentucky license to practice general dentistry prior to being issued a specialty license; and

      (4) Submit satisfactory evidence of completing a CODA accredited graduate or postgraduate specialty program after graduation from a dental school.

      Section 9. Minimum Continuing Education Requirements. (1) Each individual desiring renewal of an active dental license shall complete thirty (30) hours of continuing education that relates to or advances the practice of dentistry and would be useful to the licensee's practice.

      (2) Acceptable continuing education hours shall include course content designed to increase:

      (a) Competency in treating patients who are medically compromised or who experience medical emergencies during the course of dental treatment;

      (b) Knowledge of pharmaceutical products and the protocol of the proper use of medications;

      (c) Competence to diagnose oral pathology;

      (d) Awareness of currently accepted methods of infection control;

      (e) Knowledge of basic medical and scientific subjects including biology, physiology, pathology, biochemistry, pharmacology, epidemiology, and public health;

      (f) Knowledge of clinical and technological subjects;

      (g) Knowledge of subjects pertinent to patient management, safety, and oral healthcare;

      (h) Competency in assisting in mass casualty or mass immunization situations;

      (i) Clinical skills through the volunteer of clinical charitable dentistry that meets the requirements of KRS 313.254;

      (j) Knowledge of office business operations and best practices; or

      (k) Participation in dental association or society business meetings.

      (3) A minimum of ten (10) hours shall be taken in a live interactive presentation format.

      (4) A maximum of ten (10) hours total may be taken that meet the requirements of subsection (2)(i) - (k) of this section.

      (5) All continuing education hours shall be verified by the receipt of a certificate of completion or certificate of attendance bearing:

      (a) The signature of or verification by the provider;

      (b) The name of the licensee in attendance;

      (c) The title of the course or meeting attended or completed;

      (d) The date of attendance or completion;

      (e) The number of hours earned; and

      (f) Evidence of the method of delivery if the course was taken in a live interactive presentation format.

      (6) It shall be the sole responsibility of the individual licensee to obtain documentation from the provider or sponsoring organization verifying participation as established in subsection (5) of this section and to retain the documentation for a minimum of five (5) years.

      (7) At license renewal, each licensee shall attest to the fact that he or she has complied with the requirements of this section.

      (8) Each licensee shall be subject to audit of proof of continuing education compliance by the board.

      Section 10. Requirements for Renewal of a Dental License. (1) Each individual desiring renewal of an active dental license shall:

      (a) Submit a signed, completed Application for Renewal of Dental Licensure with an email contact address;

      (b) Pay the fee required by 201 KAR 8:520;

      (c) Maintain with no more than a thirty (30) day lapse CPR certification that meets or exceeds the guidelines set forth by the American Heart Association unless a hardship waiver is submitted to and subsequently approved by the board;

      (d) Meet the requirements of KRS 214.615(1) regarding HIV/AIDS education for healthcare providers;

      (e) Obtain at least one and one-half (1.5) hours of continuing education in the use of the Kentucky All Schedule Prescription Electronic Reporting System, pain management, or addiction disorders per year or a total of three (3) hours in a two (2) year renewal cycle; and

      (f) Meet the continuing education requirements as outlined in Section 9 of this administrative regulation except in the following cases:

      1. If a hardship waiver has been submitted to and is subsequently approved by the board;

      2. If the licensee graduated in the first year of the renewal biennium, in which case the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation; and

      3. If the licensee graduated in the second year of the renewal biennium, in which case the licensee shall not be required to complete the continuing education requirements outlined in Section 9 of this administrative regulation.

      (2) If a licensee has not actively practiced dentistry in the two (2) consecutive years preceding the filing of the renewal application, he or she shall complete and pass a board approved refresher course prior to resuming the active practice of dentistry.

      Section 11. Retirement of a License. (1) Each individual desiring retirement of a dental license shall submit a completed and signed Retirement of License Form.

      (2) Upon receipt of this form, the board shall send written confirmation of retirement to the address provided by the licensee on the Retirement of License form.

      (3) A licensee shall not retire a license that has a pending disciplinary action against it.

      (4) Each retirement shall be effective upon the processing of the completed and signed Retirement of License Form by the board.

      Section 12. Reinstatement of a License. (1) Each individual desiring reinstatement of a properly retired dental license shall:

      (a) Submit a completed, signed, and notarized Application to Reinstate a Dental License with an attached applicant photo taken within the past six (6) months;

      (b) Pay the fee required by 201 KAR 8:520;

      (c) Show proof of having current certification in CPR that meets or exceeds the guidelines set forth by the American Heart Association;

      (d) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or currently in any state or jurisdiction;

      (e) Submit to a nation-wide criminal background check by fingerprint through the Federal Bureau of Investigation or by the Department of Kentucky State Police; and

      (f) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      (2) If an individual is reinstating a license that was retired within the two (2) consecutive years immediately preceding the filing of the reinstatement application, the individual shall provide proof of having met the continuing education requirements as outlined in Section 9 of this administrative regulation within those two (2) years.

      (3) If the applicant has not actively practiced dentistry in the two (2) consecutive years immediately preceding the filing of the reinstatement application, the applicant shall complete and pass a refresher course approved by the board.

      (4) If a license is reinstated in the first year of a renewal biennium, the licensee shall complete all of the continuing education requirements as outlined in Section 9 of this administrative regulation prior to the renewal of the license.

      (5) If a license is reinstated in the second year of a renewal biennium, the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation prior to the renewal of the license.

      Section 13. Requirements for Verification of Licensure. Each individual desiring verification of a dental license shall:

      (1) Submit a signed and completed Verification of Licensure or Registration Form; and

      (2) Pay the fee required by 201 KAR 8:520.

      Section 14. Requesting a Duplicate License. Each individual desiring a duplicate dental license shall:

      (1) Submit a signed and completed Duplicate License or Registration Request Form; and

      (2) Pay the fee required by 201 KAR 8:520.

      Section 15. Issuance of Initial Licensure. If an applicant has completed all of the requirements for licensure within six (6) months of the date the application was received at the office of the board, the board shall:

      (1) Issue a license in sequential numerical order; or

      (2) Deny licensure due to a violation of KRS Chapter 313 or 201 KAR Chapter 8.

      Section 16. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Application for Dental Licensure", July 2010;

      (b) "Statement Regarding Student Licensure Limitations", July 2010;

      (c) "Statement Regarding Faculty Licensure Limitations", July 2010;

      (d) "Application for Charitable Dental Licensure," March 2011;

      (e) "Application for Specialty Licensure", July 2010;

      (f) "Application for Renewal of Dental Licensure", May 2014;

      (g) "Retirement of License Form", July 2010;

      (h) "Application to Reinstate a Dental License", July 2010;

      (i) "Verification of Licensure or Registration Form", July 2010;

      (j) "Duplicate License or Registration Request Form", July 2010; and

      (k) "American Heart Association CPR Guidelines", 2010.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at <http://dentistry.ky.gov>. (37 Ky.R. 3022; 38 Ky.R. 501, eff. 9-13-2011; 39 Ky.R. 514; 1378; eff. 2-1-2013; 40 Ky.R. 2328; 2680; eff. 6-18-2014.)

**201 KAR 8:540. Dental practices and prescription writing.**

      RELATES TO: KRS 218A.205(3), 313.060, 313.085, 422.317, 42 U.S.C. 300ee-2 note

      STATUTORY AUTHORITY: KRS 218A.205(3), 313.060(1)

      NECESSITY, FUNCTION, AND CONFORMITY: 42 U.S.C. 300ee-2 note requires each state to institute the guidelines issued by the United States Centers for Disease Control and Prevention or guidelines that are equivalent to those promulgated by the Centers for Disease Control and Prevention concerning recommendations for preventing the transmission of the human immunodeficiency virus and the hepatitis B virus during exposure-prone invasive procedures. KRS 313.060(1) requires the board to promulgate administrative regulations relating to dental practices that shall include minimal requirements for documentation and Centers for Disease Control and Prevention compliance. This administrative regulation establishes requirements for preventing the transmission of the human immunodeficiency virus and the hepatitis B virus during exposure-prone invasive procedures and includes minimal requirements for documentation and Centers for Disease Control and Prevention compliance.

      Section 1. Definitions. (1) "Invasive procedure" means a procedure that penetrates hard or soft tissue.

      (2) "Oral surgery" means any manipulation or cutting of hard or soft tissues of the oral or maxillofacial area and associated procedures, by any means, as defined by the American Dental Association, utilized by a dentist licensed by 201 KAR Chapter 8 and within the dentist's scope of training and practice.

      Section 2. Minimum Documentation Standards for all Dental Patients. (1) Each patient’s dental records shall be kept by the dentist for a minimum of:

      (a) Seven (7) years from the date of the patient’s last treatment;

      (b) Seven (7) years after the patient’s eighteenth (18) birthday, if the patient was seen as a minor; or

      (c) Two (2) years following the patient’s death.

      (2) Each dentist shall comply with KRS 422.317 regarding the release of patient records.

      (3) The dentist shall keep accurate, readily accessible, and complete records which include:

      (a) The patient’s name;

      (b) The patient’s date of birth;

      (c) The patient’s medical history and documentation of the physical exam of the oral and perioral tissues;

      (d) The date of treatment;

      (e) The tooth number, surfaces, or areas to be treated;

      (f) The material used in treatment;

      (g) Local or general anesthetic used, the type, and the amount;

      (h) Sleep or sedation dentistry medications used, the type, and the amount;

      (i) Diagnostic, therapeutic, and laboratory results, if any;

      (j) The findings and recommendations of the dentist and a description of each evaluation or consultation, if any;

      (k) Treatment objectives;

      (l) All medications, including date, type, dosage, and quantity prescribed or dispensed; and

      (m) Any post treatment instructions.

      Section 3. Prescription Writing Privileges. (1) In accordance with KRS 313.035, a dentist may prescribe any drug necessary within the scope of the dentist's practice if the dentist:

      (a) Is licensed pursuant to 201 KAR 8:532;

      (b) Has obtained a license from the Drug Enforcement Administration; and

      (c) Has enrolled with and utilizes the Kentucky All Schedule Prescription Electronic Reporting System as required by KRS 218A.202.

      (2) A dentist shall not compound any scheduled drugs or dispense any Schedule I, Schedule II, or Schedule III controlled substances containing Hydrocodone for use by the patient outside the office setting.

      Section 4. Prescribing of Controlled Substances by Dentist. (1) Prior to the initial prescribing of any controlled substance, each dentist shall:

      (a) Except as provided in subsection (2) of this section, and review a KASPER report for all available data on the patient;

      (b) Document relevant information in the patient’s record;

      (c) Consider the available information to determine if it is medically appropriate and safe to prescribe a controlled substance;

      (d) Obtain a complete medical history and conduct a physical examination of the oral or maxillofacial area of the patient and document the information in the patient's medical record;

      (e) Make a written treatment plan stating the objectives of the treatment and further diagnostic examinations required;

      (f) Discuss the risks and benefits of the use of controlled substances with the patient, the patient's parent if the patient is an unemancipated minor child, or the patient's legal guardian or health care surrogate, including the risk of tolerance and drug dependence; and

      (g) Obtain written consent for the treatment.

      (2) A dentist shall not be required to obtain and review a KASPER report if:

      (a)1. The dentist prescribes a Schedule III controlled substance or one (1) of the Schedule IV controlled substances listed in subsection (3) of this section after the performance of oral surgery; and

      2. No more than a seventy-two (72) hour supply of the controlled substance is prescribed;

      (b) The dentist prescribes or dispenses a Schedule IV or V controlled substance not listed in subsection (3) of this section; or

      (c)1. The dentist prescribes pre-appointment medication for the treatment of procedure anxiety; and

      2. The prescription is limited to a two (2) day supply and has no refills.

      (3) A dentist shall obtain and review a KASPER report before initially prescribing any of the following Schedule IV controlled substances:

      (a) Ambien;

      (b) Anorexics;

      (c) Ativan;

      (d) Klonopin;

      (e) Librium;

      (f) Nubain;

      (g) Oxazepam;

      (h) Phentermine;

      (i) Soma;

      (j) Stadol;

      (k) Stadol NS;

      (l) Tramadol;

      (m) Versed; and

      (n) Xanax.

      (4) A dentist may provide one (1) refill within thirty (30) days of the initial prescription for the same controlled substance for the same amount or less or prescribe a lower schedule drug for the same amount without a clinical reevaluation of the patient by the dentist.

      (5) A patient who requires additional prescriptions for a controlled substance shall be clinically reevaluated by the dentist and the provisions of this section, shall be followed.

      Section 5. Penalties and Investigations. (1) A licensee convicted of a felony offense related to prescribing and dispensing of a controlled substance shall, at a minimum be permanently banned from prescribing or dispensing a controlled substance.

      (2) A licensee convicted of a misdemeanor offense relating to the prescribing of a controlled substance shall, at a minimum, have a five (5) year ban from prescribing or dispensing a controlled substance.

      (3) A licensee disciplined by a licensing board of another state relating to the improper, inappropriate, or illegal prescribing or dispensing of controlled substances shall, at a minimum, have the same disciplinary action imposed by this state or the disciplinary action prescribed in subsection (1) or (2) of this section, whichever is greater.

      (4)A licensee who is disciplined in another state or territory who holds a Kentucky license and fails to notify the board in writing of the disciplinary action within thirty (30) days of the finalization of the action shall be subject to a fine of $1,000 for each failure to report.

      (5) A licensee who fails to register for an account with the Kentucky All schedule Prescription Electronic Reporting System or who fails to meet the requirements of Section 4 of this administrative regulation shall receive a private admonishment from the board and be given no more than thirty (30) days to become compliant after which time the dentist shall be fined a minimum of $500 to a maximum of $10,000.

      (6) The Law Enforcement Committee of the Board shall produce a charging decision on the complaint within 120 days of the receipt of the complaint, unless an extension for a definite period of time is requested by a law enforcement agency due to an ongoing criminal investigation.

      Section 6. Infection Control Compliance. (1) Each licensed dentist in the Commonwealth of Kentucky shall:

      (a) Adhere to the standard precautions outlined in the Guidelines for Infection Control in Dental Health-Care Settings published by the Centers for Disease Control and Prevention; and

      (b) Ensure that any person under the direction, control, supervision, or employment of a licensee whose activities involve contact with patients, teeth, blood, body fluids, saliva, instruments, equipment, appliances, or intra-oral devices adheres with those same standard precautions.

      (2) The board or its designee shall perform an infection control inspection of a dental practice utilizing the Infection Control Inspection Checklist.

      (3)(a) Any dentist who is found deficient upon an initial infection control inspection shall have thirty (30) days to be in compliance with the guidelines and submit a written plan of correction to the board.

      (b) The dentist may receive a second inspection after the thirty (30) days have passed.

      (c) If the dentist fails the second inspection, he or she shall be immediately temporarily suspended pursuant to KRS 313.085 until proof of compliance is provided to the board and the dentist pays the fine as prescribed in 201 KAR 8:520.

      (4) Any licensed dentist, licensed dental hygienist, registered dental assistant, or dental assistant in training for registration who performs invasive procedures may seek counsel from the board if he or she tests seropositive for the human immunodeficiency virus or the hepatitis B virus.

      (5) Upon the request of a licensee or registrant, the executive director of the board or designee shall convene a confidential expert review panel to offer counsel regarding under what circumstances, if any, the individual may continue to perform invasive procedures.

      Section 7. Termination of a Patient-Doctor Relationship. In order for a licensed dentist to terminate the patient-doctor relationship, the dentist shall:

      (1) Provide written notice to the patient of the termination;

      (2) Provide emergency treatment for the patient for thirty (30) days from the date of termination; and

      (3) Retain a copy of the letter of termination in the patient records.

      Section 8. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Guidelines for Infection Control in Dental Health-Care Settings", December 2003; and

      (b) "Infection Control Inspection Checklist", July 2010.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at http://dentistry.ky.gov. (37 Ky.R. 624, Am. 1629; eff. 2-4-2011; 39 Ky.R. 519; 1381; eff. 2-1-2013.)

**201 KAR 8:550. Anesthesia and sedation.**

      RELATES TO: KRS 313.035

      STATUTORY AUTHORITY: KRS 313.035(1)

      NECESSITY, FUNCTION AND CONFORMITY: KRS 313.035(1) requires the board to promulgate administrative regulations related to conscious anesthesia and sedation permits. This administrative regulation establishes requirements for permits to perform conscious sedation or anesthesia.

      Section 1. Definitions. (1) "Advanced Cardiac Life Support" or "ACLS" means a certification that an individual has successfully completed an advanced cardiac life support course that meets or exceeds the standards established by the American Heart Association and incorporated by reference in 201 KAR 8:532.

      (2) "Anesthesia" means an artificially induced insensibility to pain usually achieved by the administration of gases or drugs.

      (3) "Anesthesia and sedation" means:

      (a) Minimal sedation;

      (b) Moderate sedation;

      (c) Deep sedation; and

      (d) General anesthesia.

      (4) "Board" means the Kentucky Board of Dentistry.

      (5) "Certified registered nurse anesthetist" means a registered nurse who is currently certified to practice nurse anesthesia in Kentucky.

      (6) "Conscious sedation permit" means a permit that was issued by the board prior to February 1, 2011, that authorized the dentist to whom the permit was issued to administer parenteral sedation for the practice of dentistry.

      (7) "Deep sedation" means a drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Cardiovascular function is usually maintained.

      (8) "Enteral" means a technique of administration in which the agent is absorbed through the gastrointestinal (GI) tract or oral mucosa (oral, rectal, or sublingual).

      (9) "Facility" means a location in which anesthesia or sedation is administered for the practice of dentistry.

      (10) "Facility inspection" means an on-site inspection by the board or its designee to determine if a facility where the applicant proposes to provide anesthesia and sedation is adequately supplied, equipped, staffed, and maintained in a condition to support the provision of anesthesia and sedation services in a manner that meets the requirements of this administrative regulation.

      (11) "General anesthesia" means a drug-induced loss of consciousness during which patients are not arousable even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation, drug-induced depression, or changes in neuromuscular function. Cardiovascular function may be impaired.

      (12) "General anesthesia permit" means a permit that was issued by the board prior to February 1, 2011, that authorized the dentist to whom the permit was issued to administer general anesthesia for the practice of dentistry.

      (13) "Incident" means dental treatment performed on a patient under minimal sedation, moderate sedation, deep sedation, or general anesthesia with unforeseen complications.

      (14) "Incremental dosing" means administration of multiple doses of a drug until a desired effect is reached.

      (15) "Minimal sedation" means a drug-induced state, with or without nitrous oxide to decrease anxiety, in which patients respond normally to tactile stimulation and verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are maintained and do not require assistance.

      (16) "Moderate enteral sedation" means a drug-induced depression of consciousness through the gastrointestinal tract or oral mucosa during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

      (17) "Moderate parenteral sedation" means a drug-induced depression of consciousness that bypasses the gastrointestinal tract or oral mucosa during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

      (18) "Moderate sedation" means a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

      (19) "Nitrous oxide sedation" means a technique of inhalation sedation with nitrous oxide and oxygen.

      (20) "Parenteral" means a technique of administration in which the drug bypasses the gastrointestinal tract, that is, through an intramuscular, intravenous, intranasal, submucosal, subcutaneous, or intraosseous technique.

      (21) "Pediatric Advanced Life Support" or "PALS" means a certification that an individual has successfully completed a pediatric advanced life support course that meets or exceeds the standards established by the American Heart Association and incorporated by reference in 201 KAR 8:532.

      (22) "Sedation" means the reduction of stress or excitement by the administration of a drug that has a soothing, calming, or tranquilizing effect.

      Section 2. Nitrous Oxide Sedation. (1) Nitrous oxide sedation may be used by a Kentucky-licensed dentist without a specific sedation permit or by a Kentucky-licensed dental hygienist certified to administer block and infiltration anesthesia and nitrous oxide analgesia.

      (2) Equipment used in the administration of nitrous oxide sedation shall have functional safeguard measures that:

      (a) Limit the minimum oxygen concentration to thirty (30) percent; and

      (b) Provide for scavenger elimination of nitrous oxide gas.

      (3) The dentist shall:

      (a) Insure that a patient receiving nitrous oxide is constantly monitored; and

      (b) Be present in the office while nitrous oxide is being used.

      (4) A dental assistant may only deliver nitrous oxide at a rate specified by direct orders of a dentist.

      Section 3. Minimal Sedation Without a Permit. (1) A permit shall not be required for a dentist to administer minimal enteral sedation for patients age thirteen (13) and older.

      (2) A dentist who intends to administer minimal sedation shall indicate the intent to administer minimal sedation in the patient’s record.

      (3) Medication used to produce minimal sedation shall not exceed the manufacturer’s recommended dose (MRD) for unmonitored use by the individual. Additional dosing shall be within the MRD limits.

      (4) A dentist who administers minimal sedation shall maintain a margin of safety and a level of consciousness that does not approach moderate sedation and other deeper states of sedation and general anesthesia.

      (5) Nitrous oxide may be combined with an oral medication. If nitrous oxide is combined with an oral medication, the level of sedation shall be maintained at the level of minimal sedation.

      Section 4. Permit and Location Certificate Required. (1) A dentist shall not administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry unless:

      (a) The dentist holds an appropriate Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit issued by the board; or

      (b) The dentist holds a conscious sedation or general anesthesia permit that shall be converted to a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit at the next license renewal.

      (2) A dentist shall not administer an anesthetic technique under a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit issued by the board at a facility unless:

      (a) The facility has a current Anesthesia and Sedation Facility Certificate issued by the board; or

      (b) The facility passed an inspection by the board for the purpose of issuing a conscious sedation or general anesthesia permit.

      (3) A treating dentist who does not hold an anesthesia and sedation permit shall not allow a physician anesthesiologist, another dentist who holds an anesthesia and sedation permit, or a certified registered nurse anesthetist to administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry at a facility owned or operated by the treating dentist unless:

      (a) The facility has a current Anesthesia and Sedation Facility Certificate issued by the board; or

      (b) The facility passed an inspection by the board for the purpose of issuing a conscious sedation or general anesthesia permit.

      Section 5. Classifications of Anesthesia and Sedation Permits. The following permits shall be issued by the board to a qualified licensed dentist:

      (1) Minimal Pediatric Sedation permit that authorizes a dentist to use minimal enteral sedation for patients age five (5) to twelve (12) Medication or medications used to produce minimal sedation shall not exceed the manufacturer’s recommended dose (MRD) for unmonitored use by the individual. Incremental dosing shall be prohibited. All dosing shall be administered in the dental office. A dentist who administers minimal sedation shall maintain a margin of safety and a level of consciousness that does not approach moderate sedation and other deeper states of sedation and general anesthesia. Nitrous oxide may be combined with an oral medication. If nitrous oxide is combined with an oral medication, the level of sedation shall be maintained at the level of minimal sedation;

      (2) Moderate Enteral Sedation permit that authorizes a dentist to use moderate enteral sedation for patients age thirteen (13) and older;

      (3) Moderate Parenteral Sedation permit that authorizes a dentist to use moderate parenteral sedation for patients age thirteen (13) and older;

      (4) Moderate Pediatric Sedation permit that authorizes a dentist to use moderate sedation by any route of administration for patients age twelve (12) and under; and

      (5) Deep Sedation or General Anesthesia permit that authorizes a dentist to use:

      (a) General anesthesia; or

      (b) Deep sedation.

      Section 6. Qualifications for Obtaining a Minimal Pediatric Sedation Permit. To qualify for a Minimal Pediatric Sedation permit, an applicant shall:

      (1) Submit an Application for Sedation or Anesthesia Permit;

      (2) Pay the fee required by 201 KAR 8:520;

      (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and

      (4) Provide proof of successful completion of:

      (a) a Commission on Dental Accreditation (CODA) accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage minimal sedation; or

      (b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of twenty-four (24) hours of didactic instruction on pediatric minimal sedation by the enteral route or the combination enteral and nitrous oxide route.

      Section 7. Qualifications for Obtaining a Moderate Enteral Sedation Permit. To qualify for a Moderate Enteral Sedation permit, an applicant shall:

      (1) Submit an Application for Sedation or Anesthesia Permit;

      (2) Pay the fee required by 201 KAR 8:520;

      (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and

      (4) Provide proof of successful completion of:

      (a) A Commission on Dental Accreditation (CODA) accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate sedation; or

      (b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of twenty-four (24) hours of didactic instruction plus management of at least ten (10) adult case experiences by the enteral route or the combination enteral and nitrous oxide route. These ten (10) cases shall include at least three (3) live (on sight) clinical dental experiences managed by participants in groups that shall not exceed five (5) individuals. These three (3) live (on-sight) experiences may be obtained by observing a permit level dentist in his or her office, and the remaining cases may include simulations and video presentations and shall include at least one (1) experience in returning a patient from deep to moderate sedation.

      Section 8. Qualifications for Obtaining a Moderate Parenteral Sedation Permit. To qualify for a Moderate Parenteral Sedation permit, an applicant shall:

      (1) Submit an Application for Sedation or Anesthesia Permit;

      (2) Pay the fee required by 201 KAR 8:520;

      (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and

      (4) Provide proof of successful completion of:

      (a) A CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate parenteral sedation; or

      (b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of sixty (60) hours of didactic instruction plus management of at least twenty (20) patients per course participant in moderate parenteral sedation techniques.

      Section 9. Qualifications for Obtaining a Moderate Pediatric Sedation Permit. To qualify for a Moderate Pediatric Sedation permit, an applicant shall:

      (1) Submit an Application for Sedation or Anesthesia Permit;

      (2) Pay the fee required by administrative regulation;

      (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and

      (4) Provide proof of successful completion of a CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate sedation for patients age twelve (12) and under.

      Section 10. Qualifications for Obtaining a Deep Sedation or General Anesthesia Permit. To qualify for a Deep Sedation or General Anesthesia permit, an applicant shall:

      (1) Submit an Application for Sedation or Anesthesia Permit;

      (2) Pay the fee required by administrative regulation;

      (3) Hold current certification in either ACLS or PALS; and

      (4) Provide proof of successful completion of:

      (a) A board-approved Accreditation Council for Graduate Medical Education (ACGME) accredited post doctoral training program in anesthesiology which affords comprehensive and appropriate training necessary to administer deep sedation and general anesthesia;

      (b) A board-approved nurse anesthesia program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs that affords comprehensive and appropriate training necessary to administer deep sedation and general anesthesia;

      (c) Successful completion of a minimum of two (2) years advanced clinical training in anesthesiology from a Joint Commission on Accreditation of Healthcare Organization (JCAHO) accredited institution that meets the objectives set forth in part two (2) of the American Dental Association’s Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry; or

      (d) Provide proof of successful completion of a CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage deep sedation and general anesthesia.

      Section 11. Multiple Application Levels Permitted. Dentists with education and training for more than one (1) level of sedation may mark their levels of qualification on the Application for Sedation or Anesthesia Permit, based on the requirements of Sections 6 through 10 of this administrative regulation.

      Section 12. Location Requirement. A dentist holding a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit shall advise the board of the name and address of each facility where the dentist intends to or has ceased to administer anesthesia and sedation by submitting the Anesthesia and Sedation Permit Location Notification Form within ten (10) business days of the change.

      Section 13. Anesthesia and Sedation Facility Certificates. (1) The owner or operator of a facility shall obtain an Anesthesia and Sedation Facility Certificate from the board for any location at which:

      (a) A dentist holding a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit may administer anesthesia and sedation under the permit; or

      (b) The treating dentist may allow a physician anesthesiologist, another dentist who holds an anesthesia and sedation permit, or a certified registered nurse anesthetist to administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry.

      (2) A facility owner or operator desiring to obtain an Anesthesia and Sedation Facility Certificate shall:

      (a) Submit an Application for an Anesthesia and Sedation Facility Certificate;

      (b) Pay the fee required by 201 KAR 8:520; and

      (c) Successfully pass a facility inspection as outlined in Section 14 of this administration.

      (3) A dentist currently in an advanced training course for sedation may request the Board of Dentistry complete a Sedation Facility Inspection prior to completion of the course.

      (4) The owner or operator of a facility shall not allow an individual to administer anesthesia or sedation unless the individual is permitted to do so under this administrative regulation.

      (5) The owner or operator of a facility shall maintain for five (5) years for inspection by the board the name and license number of each dentist, physician anesthesiologist, or certified registered nurse anesthetist who has administered anesthesia or sedation at that location.

      (6) The owner or operator of a facility shall ensure that the facility:

      (a) Remains properly equipped in accordance with Section 14 of this administrative regulation; and

      (b) Remains properly staffed in accordance with Section 15 of this administrative regulation.

      (7) In addition to the requirements contained in subsection (6) of this section, the owner or operator of a facility shall ensure that the facility has appropriate nonexpired emergency and sedation medications.

      Section 14. Facility Inspection Criteria. (1) To qualify for an Anesthesia and Sedation Facility Certificate, the facility shall pass an evaluation of facility equipment, medications, and clinical records.

      (a) The following shall be provided by the facility to qualify:

      1. Oxygen and gas delivery system, backup system fail-safe;

      2. Gas storage facility;

      3. Safety indexed gas system;

      4. Suction and backup system;

      5. Auxiliary lighting system;

      6. Suitability of operating room to include:

      a. Size, which shall be at a minimum ten (10) feet by eight (8) feet or eighty (80) square feet;

      b. Operating primary light source and secondary portable back-up source, unless back-up generator is available; and

      c. Accessibility by emergency medical staff;

      7. Recovery area, including oxygen, suction, and visual and electronic monitoring, which may include the operating room;

      8. Preoperative medical history and physical evaluation form; and

      9. Anesthesia and monitoring equipment checked to insure proper working order.

      (b) The following shall be provided by the facility or by an individual listed in Section 22 of this administrative regulation:

      1. Appropriate drugs for each procedure, all of which shall be unexpired, including reversal agents and emergency medications;

      2. Appropriate devices to maintain an airway with positive pressure ventilation;

      3. Anesthesia records, including monitoring and discharge records and a check sheet.

      a. The check sheet shall be signed by the provider and the dentist and placed in each record.

      b. If the dentist is the provider, only the dentist's signature shall be required;

      4. Monitoring equipment, including pulse oximeter and blood pressure monitoring;

      5. Electrocardiogram (EKG):

      a. May be present for use by Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, and Moderate Pediatric Sedation permit holders for patients with significant cardiac history; and

      b. Shall be present for use by Deep Sedation or General Anesthesia permit holders;

      6. Defibrillator or automated external defibrillator (AED) for moderate and Deep Sedation or General Anesthesia permits; and

      7. For deep sedation or general anesthesia in pediatric patients:

      a. A precordial stethoscope; or

      b. A pretracheal stethoscope.

      (2) During a facility inspection, inspectors shall:

      (a) Examine the facility’s equipment to determine if it is in proper working order;

      (b) Determine if appropriate emergency drugs are present; and

      (c) Determine if emergency drugs are nonexpired.

      Section 15. Inducing a Level of Sedation for a Patient. (1) Administration of minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia to a patient requires at least the following appropriately trained individuals:

      (a) The treating dentist;

      (b) An individual trained and competent in basic life support (BLS) or its equivalent to assist the treating dentist; and

      (c) Another individual trained and competent in BLS or its equivalent in close proximity to assist if needed.

      (2) A dentist administering minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia to a patient shall not leave the site until the patient:

      (a) Is conscious;

      (b) Is spontaneously breathing;

      (c) Has stable vital signs;

      (d) Is ambulatory with assistance; and

      (e) Is under the care of a responsible adult.

      (3) A treating dentist who allows a physician, another dentist, or certified registered nurse anesthetist to administer minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia under Section 22 of this administrative regulation shall ensure that the physician, dentist, or certified registered nurse anesthetist shall not leave the site until the patient:

      (a) Is conscious;

      (b) Is spontaneously breathing;

      (c) Has stable vital signs;

      (d) Is ambulatory with assistance; and

      (e) Is under the care of a responsible adult.

      Section 16. Conscious Sedation Permits and General Anesthesia permits. (1) A dentist who holds a current general anesthesia permit may continue to administer anesthesia and sedation consistent with a Deep Sedation or General Anesthesia permit until the expiration date of the permit.

      (2) A dentist who holds a current conscious sedation permit and meets the requirements of Section 9(4) of this administrative regulation may continue to administer anesthesia and sedation consistent with a Moderate Pediatric Sedation permit until the expiration date of the permit.

      (3) A dentist who holds a current conscious sedation permit and meets the requirements of Section 8 of this administrative regulation may continue to administer anesthesia and sedation consistent with a Moderate Parenteral Sedation permit until the expiration date of the permit.

      (4) During the license renewal process, current general anesthesia permit holders shall convert the permit to a Deep Sedation or General Anesthesia permit.

      (5) During the license renewal process, current conscious sedation permit holders shall convert the permit to a minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, or moderate pediatric sedation permit.

      (6) A dentist who currently practices enteral sedation without a permit may continue without a permit until January 1, 2012 and shall receive a Moderate Enteral Sedation permit by the submission of:

      (a) Twenty-four (24) hours of didactic education plus twenty (20) sedation records documenting their experience; and

      (b) Satisfactory completion of an on-site inspection as outlined in Section 14 of this administrative regulation.

      Section 17. Issuance and Expiration of Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permits.

      (1) Once an applicant has met the qualifications for obtaining a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit the board shall issue a permit in sequential numerical order.

      (2) Each permit issued under this administrative regulation shall expire on the same date as the permit holder’s license to practice dentistry.

      Section 18. Renewal of Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, and Deep Sedation or General Anesthesia Permits. An individual desiring renewal of an active Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, and Deep Sedation or General Anesthesia permits shall:

      (1) Submit a completed and signed Application for Renewal of Sedation or Anesthesia Permit;

      (2) Pay the fee required by 201 KAR 8:520; and

      (3) Provide evidence to the board that the applicant meets the continuing education requirements outlined in Section 19 of this administrative regulation.

      Section 19. Continuing Education Requirements for Renewal of a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia Permit. (1) An individual desiring renewal of an active Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, or Moderate Pediatric Sedation permit shall:

      (a) Complete at least six (6) hours of clinical continuing education related to sedation or anesthesia in a classroom setting that includes hands-on airway management during the two (2) year term of the permit; or

      (b) Maintain ACLS or PALS certification.

      (2) An individual desiring renewal of an active Deep Sedation or General Anesthesia permit shall:

      (a) Complete not less than four (4) hours of on-sight clinical continuing education related to sedation or anesthesia during the two (2) year term of the permit; and

      (b) Maintain ACLS or PALS certification.

      (3) Continuing education required by this administrative regulation shall:

      (a) Not be used to satisfy other continuing education requirements; and

      (b) Be in addition to other continuing education requirements of 201 KAR 8:532.

      Section 20. Facilities Inspected Prior to February 1, 2011. A facility owner or operator desiring to obtain an Anesthesia and Sedation Facility Certificate for a facility which passed an inspection by the board prior to February 1, 2011 shall provide proof to the board of having passed a facility inspection for the purpose of issuing a conscious sedation or general anesthesia.

      Section 21. Issuance of an Anesthesia and Sedation Facility Certificate. Once an applicant has met the qualifications for obtaining an Anesthesia and Sedation Facility Certificate the board shall issue a certificate in sequential numerical order.

      Section 22. Administration by a Physician Anesthesiologist, Dentist, or Certified Registered Nurse Anesthetist at the Facility of a Treating Dentist. (1) A treating dentist may allow at his or her dental facility, administration of sedation or anesthesia by a:

      (a) Kentucky-licensed physician anesthesiologist or a Kentucky-licensed Certified Registered Nurse Anesthetist; or

      (b) Dentist who holds an anesthesia and sedation permit.

      (2) Administration by an individual listed in subsection (1)(a) of this section shall:

      (a) Comply with this administrative regulation; and

      (b) Not require board review.

      (3) Nothing in this section shall preclude a dentist from working with a Kentucky-licensed physician anesthesiologist or a Kentucky-licensed Certified Registered Nurse Anesthetist in an ambulatory care center or hospital.

      Section 23. Morbidity and Mortality Incident Reports. (1) A dentist shall report to the board, in writing, any death caused by or resulting from the dentist's administration of minimal sedation, moderate sedation, deep sedation, or general anesthesia within seven (7) days after its occurrence.

      (2) A dentist shall report to the board, in writing, any incident that resulted in hospital in-patient admission caused by or resulting from the dentist's administration of minimal sedation, moderate sedation, deep sedation, or general anesthesia within thirty (30) days after its occurrence.

      (3) The written report to the board required in subsections (1) and (2) of this section shall include:

      (a) The date of the incident;

      (b) The name, age, and address of the patient;

      (c) The patient's original complete dental records;

      (d) The name and license number of the licensee and the name and address of all other persons present during the incident;

      (e) The address where the incident took place;

      (f) The preoperative physical condition of the patient;

      (g) The type of anesthesia and dosages of drugs administered to the patient;

      (h) The techniques used in administering the drugs;

      (i) Any adverse occurrence including:

      1. The patient's signs and symptoms;

      2. The treatment instituted in response to adverse occurrences;

      3. The patient's response to the treatment; and

      4. The patient's condition on termination of any procedures undertaken; and

      (j) A narrative description of the incident including approximate times and evolution of symptoms.

      (4) The duties outlined in this section shall apply to every dentist who administers any type of sedation or anesthesia.

      Section 24. Registered Dental Assistant Duties permitted when working with Sedation Permit holders: (1) A registered dental assistant working with Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia permit holders may, under direct supervision:

      (a) Apply noninvasive monitors;

      (b) Perform continuous observation of patients and noninvasive monitors appropriate to the level of sedation, during the pre-operative, intra-operative and post-operative (recovery) phases of treatment;

      (c) Report monitoring parameters to the operating dentist on a periodic basis and when changes in monitored parameters occur;

      (d) Record vital sign measurements in the sedation record; and

      (e) Remove IV lines (Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders only).

      (2) A registered dental assistant working with Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders, may under direct supervision assist in the management of emergencies.

      (3) A registered dental assistant working with Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders may, under direct supervision:

      (a) Administer medications into an existing IV line upon the verbal order and direct supervision of a dentist with a Moderate Parenteral Sedation, Moderate Pediatric or Deep Sedation or General Anesthesia permit; and

      (b) Establish an IV line under direct supervision if they have completed a course approved by the Board of Dentistry in intravenous access.

      Section 25. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Application for Sedation or Anesthesia Permit", February 2011;

      (b) "Application for Sedation or Anesthesia Facility Certificate", February 2011; and

      (c) "Sedation of Anesthesia Permit Location Notification Form", February 2011.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at [http://dentistry.ky.gov](http://dentistry.ky.gov/). (37 Ky.R. 2308; 2876; eff. 8-5-2011; 40 Ky.R. 2596; 41 Ky.R. 56; eff. 9-5-2014.)

**201 KAR 8:562. Licensure of dental hygienists.**

      RELATES TO: KRS 214.615, 304.40 - 075, 313.030, 313.040, 313.060, 313.080, 313.130, 313.254

      STATUTORY AUTHORITY: KRS 214.615(2), 313.021(1)(a) - (c), 313.040(1), (2), (7), 313.254

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.040 requires the board to promulgate administrative regulations relating to requirements and procedures for the licensure of dental hygienists. This administrative regulation establishes requirements and procedures for the licensure of dental hygienists.

      Section 1. General Licensure Requirements. An applicant desiring licensure in the Commonwealth shall at a minimum:

      (1) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;

      (2) Submit a completed, signed, and notarized Application for Dental Hygiene Licensure with an email contact address and an attached applicant photo taken within the past six (6) months;

      (3) Pay the fee required by 201 KAR 8:520;

      (4) Not be currently subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

      (5) Provide proof of completion of the requirements of KRS 214.615(1);

      (6) Complete and pass the board’s jurisprudence exam;

      (7) Provide proof of having current certification in cardiopulmonary resuscitation (CPR) that meets or exceeds the guidelines established by the American Heart Association, incorporated by reference in 201 KAR 8:532;

      (8) Submit to a criminal background check from the Administrative Office of the Courts in Kentucky, from the state or states of residence for the last five (5) years, or by fingerprint;

      (9) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dental hygiene held previously or currently in any state or jurisdiction;

      (10) Provide proof that the applicant is a graduate of a Commission on Dental Accreditation (CODA) accredited dental hygiene school or college or dental hygiene department of a university;

      (11) Provide proof that the applicant has successfully completed the National Board Dental Hygiene Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations; and

      (12) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      Section 2. Requirements for Licensure by Examination. (1) Each individual desiring initial licensure as a dental hygienist by examination shall complete all of the requirements established in Section 1 of this administrative regulation.

      (2) Each individual desiring initial licensure as a dental hygienist by examination shall successfully complete a clinical examination within the five (5) years preceding the filing of his or her Application for Dental Hygiene Licensure. The board shall accept the following regional clinical examinations:

      (a) The examination of the Council of Interstate Testing Agencies (CITA);

      (b) The examination of the Central Regional Dental Testing Service (CRDTS);

      (c) The examination of the North East Regional Board of Dental Examiners (NERB);

      (d) The examination of the Southern Regional Testing Agency (SRTA); or

      (e) The examination of the Western Regional Examining Board (WREB).

      (3) An individual desiring initial licensure as a dental hygienist by examination more than two (2) years after fulfilling all of the requirements of his CODA accredited dental hygiene education shall:

      (a) Hold a license to practice dental hygiene in good standing in another state or territory of the United States or the District of Columbia; or

      (b) If the applicant does not hold a license to practice dental hygiene in good standing, complete a board-approved refresher course prior to receiving a license to practice dental hygiene in the Commonwealth of Kentucky.

      (4) An applicant who has taken a clinical examination three (3) times and failed to achieve a passing score shall not be allowed to sit for the examination again until the applicant has completed and passed a remediation plan prescribed by the board based on the applicant's deficiencies.

      Section 3. Requirements for Licensure by Credentials. Each individual desiring initial licensure as a dental hygienist by credentials shall:

      (1) Complete all of the requirements established in Section 1 of this administrative regulation;

      (2) Provide proof of having passed a state, regional, or national clinical examination used to determine clinical competency in a state or territory of the United States or the District of Columbia; and

      (3) Provide proof that, for five (5) of the six (6) years immediately preceding the filing of the application, the applicant has been engaged in the active practice of dental hygiene while he or she was legally authorized to practice dental hygiene in a state or territory of the United States or the District of Columbia if the qualifications for the authorization were equal to or higher than those of the Commonwealth of Kentucky.

      Section 4. Requirements for Charitable Limited Licensure. (1) Each individual desiring a charitable limited license shall:

      (a) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;

      (b) Submit a completed, signed, and notarized Application for Charitable Dental Hygiene Licensure with an attached applicant photo taken within the past six (6) month;

      (c) Not be subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

      (d) Have a license to practice dental hygiene in good standing in another state; and

      (e) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      (2) An individual licensed pursuant to this section shall:

      (a) Work only with charitable entities registered with the Cabinet for Health and Family Services that have met requirements of KRS 313.254 and 201 KAR 8:580;

      (b) Only perform procedures allowed by KRS 313.254, which shall be completed within the duration of the charitable event;

      (c) Be eligible for the provisions of medical malpractice insurance procured pursuant to KRS 304.40-075;

      (d) Perform these duties without expectation of compensation or charge to the individual and without payment or reimbursement by any governmental agency or insurer;

      (e) Have a charitable limited license that shall be good for two (2) years and expire during the regular dental hygiene renewal cycle; and

      (f) Comply with reciprocity requirements if applicable.

      1. A state that extends a reciprocal agreement shall comply with this section.

      2. An individual shall notify the sponsor of a charitable clinic and the board of the intent to conduct or participate in the clinic.

      3. An individual conducting or participate in a charitable clinic shall have a license to practice dental hygiene in the state in which the dental hygienist practices.

      Section 5. Minimum Continuing Education Requirements. (1) Each individual desiring renewal of an active dental hygiene license shall complete thirty (30) hours of continuing education that relates to or advances the practice of dental hygiene and would be useful to the licensee in his practice.

      (2) Acceptable continuing education hours shall include course content designed to increase:

      (a) Competency in treating patients who are medically compromised or who experience medical emergencies during the course of dental hygiene treatment;

      (b) Knowledge of pharmaceutical products and the protocol of the proper use of medications;

      (c) Awareness of currently accepted methods of infection control;

      (d) Knowledge of basic medical and scientific subjects including, biology, physiology, pathology, biochemistry, pharmacology, epidemiology, and public health;

      (e) Knowledge of clinical and technological subjects;

      (f) Knowledge of subjects pertinent to patient management, safety, and oral healthcare;

      (g) Competency in assisting in mass casualty or mass immunization situations;

      (h) Clinical skills through the volunteer of clinical charitable dental hygiene that meets the requirements of KRS 313.254;

      (i) Knowledge of office business operations and best practices; or

      (j) Participation in dental or dental hygiene association or society business meetings.

      (3) A minimum of ten (10) hours shall be taken in a live interactive presentation format.

      (4) A maximum of ten (10) hours total may be taken that meet the requirements of subsection (2)(h) - (j) of this section.

      (5) All continuing education hours shall be verified by the receipt of a certificate of completion or certificate of attendance bearing:

      (a) The signature of the provider;

      (b) The name of the licensee in attendance;

      (c) The title of the course or meeting attended or completed;

      (d) The date of attendance or completion;

      (e) The number of hours earned; and

      (f) Evidence of the method of delivery if the course was taken in a live interactive presentation format.

      (6) It shall be the sole responsibility of the individual dental hygienist to obtain documentation from the provider or sponsoring organization verifying participation as established in subsection (5) of this section and to retain the documentation for a minimum of five (5) years.

      (7) At license renewal, each licensee shall attest to the fact that he or she has complied with the requirements of this section.

      (8) Each licensee shall be subject to audit of proof of continuing education compliance by the board.

      Section 6. Requirements for Renewal of a Dental Hygiene License. (1) Each individual desiring renewal of an active dental hygiene license shall:

      (a) Submit a completed, signed Application for Renewal of Dental Hygiene Licensure with an email contact address;

      (b) Pay the fee required by 201 KAR 8:520;

      (c) Maintain with no more than a thirty (30) day lapse, CPR certification that meets or exceeds the guidelines established by the American Heart Association, incorporated by reference in 201 KAR 8:530, unless a hardship waiver is submitted to and subsequently approved by the board;

      (d) Meet the requirements of KRS 214.615(1); and

      (e) Meet the continuing education requirements as established in Section 5 of this administrative regulation except in the following cases:

      1. If a hardship waiver has been submitted to and is subsequently approved by the board;

      2. If the licensee graduated in the first year of the renewal biennium, in which case the licensee shall complete one-half (1/2) of the hours as established in Section 5 of this administrative regulation; and

      3. If the licensee graduated in the second year of the renewal biennium, in which case the licensee shall not be required to complete the continuing education requirements established in Section 5 of this administrative regulation.

      (2) If a licensee has not actively practiced dental hygiene in the two (2) consecutive years preceding the filing of the renewal application, he or she shall complete and pass a board-approved refresher course prior to resuming the active practice of dental hygiene.

      Section 7. Retirement of a License. (1) Each individual desiring retirement of a dental hygiene license shall submit a completed and signed Retirement of License Form.

      (2) Upon receipt of Retirement of License Form, the board shall send written confirmation of retirement to the last known address of the licensee.

      (3) A licensee shall not retire a license that has pending disciplinary action against it.

      (4) Each retirement shall be effective upon the processing of the completed and signed Retirement of License Form by the board.

      Section 8. Reinstatement of a License. (1) Each individual desiring reinstatement of a properly retired dental hygiene license shall:

      (a) Submit a completed, signed, and notarized Application for Dental Hygiene Licensure with an email contact address and an attached applicant photo taken within the past six (6) months;

      (b) Pay the fee required by 201 KAR 8:520;

      (c) Show proof of having current certification in CPR that meets or exceeds the guidelines established by the American Heart Association, incorporated by reference in 201 KAR 8:532;

      (d) Provide verification within three (3) months of the date the Application for Dental Hygiene Licensure is received at the office of the board of any license to practice dental hygiene held previously or currently in any state or jurisdiction;

      (e) Submit to a criminal background check from the Administrative Office of the Courts in Kentucky, from the state or states of residence for the last five (5) years, or by fingerprint; and

      (f) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

      (2) If an individual is reinstating a license that was retired within the two (2) consecutive years immediately preceding the filing of the reinstatement application, the individual shall provide proof of having met the continuing education requirements as established in Section 5 of this administrative regulation within those two (2) years.

      (3) If the applicant has not actively practiced dental hygiene in the two (2) consecutive years immediately preceding the filing of the Application to Reinstate a Dental Hygiene License, the applicant shall complete and pass a refresher course approved by the board.

      (4) If a license is reinstated in the first year of a renewal biennium, the licensee shall complete all of the continuing education requirements as established in Section 5 of this administrative regulation prior to the renewal of his license.

      (5) If a license is reinstated in the second year of a renewal biennium, the licensee shall complete one-half (1/2) of the hours as established in Section 5 of this administrative regulation prior to the renewal of his license.

      Section 9. Requirements for Verification of Licensure. Each individual desiring verification of a dental hygiene license shall:

      (1) Submit a signed and completed Verification of Licensure or Registration Form; and

      (2) Pay the fee required by 201 KAR 8:520.

      Section 10. Requesting a Duplicate License. Each individual desiring a duplicate dental hygiene license shall:

      (1) Submit a signed and completed Duplicate License or Registration Request Form; and

      (2) Pay the fee required by 201 KAR 8:520.

      Section 11. Requirements for Local Anesthesia Registration. (1) An individual who has completed a course of study in dental hygiene at a board-approved CODA accredited institution on or after July 15, 2010, which meets or exceeds the education requirements as established in KRS 313.060(10) shall be granted the authority to practice local anesthesia upon the issuance by the board of a dental hygiene license.

      (2) An individual licensed as a hygienist in Kentucky and not subject to disciplinary action who desires to administer local anesthesia and does not qualify to do so pursuant to Section 12(1) of this administrative regulation shall complete a training and education course as described in KRS 313.060(10).

      (3) The training and education course shall be offered by at least one (1) of the following institutions in Kentucky:

      (a) University of Louisville School of Dentistry;

      (b) University of Kentucky College of Dentistry;

      (c) Western Kentucky University Dental Hygiene Program; and

      (d) Kentucky Community Technical College System Dental Hygiene Programs.

      (4) Training received outside of Kentucky shall be from a CODA accredited dental or dental hygiene school and shall meet the requirements established in KRS 313.060(10).

      (5) Once the required training is complete the applicant shall:

      (a) Complete the Dental Hygiene Local Anesthesia Registration Application; and

      (b) Pay the fee required by 201 KAR 8:520.

      (6) Individuals authorized to practice pursuant to this provision shall receive a license from the board indicating registration to administer local anesthesia.

      (7) A licensed dental hygienist shall not administer local anesthesia if the licensee does not hold a local anesthesia registration issued by the board.

      (8) A licensed dental hygienist holding a local anesthesia registration from the board who has not administered block anesthesia, infiltration anesthesia, or nitrous oxide analgesia for one (1) year shall complete a board-approved refresher course prior to resuming practice of that specific technique.

      Section 12. Requirements for General Supervision Registration. (1) An individual licensed as a hygienist in Kentucky and not subject to disciplinary action who desires to practice under general supervision shall:

      (a) Complete the General Supervision Registration Application;

      (b) Meet the requirements of KRS 313.040(7)(a);

      (c) Document through payroll records, employment records, or other proof that is independently verifiable, the dates and hours of employment by a dentist in the practice of dental hygiene that demonstrate the required two (2) years and 3,000 hours of experience;

      (d) Successfully complete a live three (3) hour course approved by the board in the identification and prevention of potential medical emergencies that shall include, at a minimum, the following topics:

      1. Medical history, including American Society of Anesthesiologists (ASA) classifications of physical status;

      2. Recognition of common medical emergency situations, symptoms, and possible outcomes;

      3. Office emergency protocols; and

      4. Prevention of emergency situations during dental treatments.

      (2) An individual authorized to practice pursuant to these provisions shall receive a license from the board indicating registration to practice under general supervision.

      (3) A dentist who employs a dental hygienist who has met the standards of this administrative regulation and who allows the dental hygienist to provide dental hygiene services pursuant to KRS 313.040(7) shall complete a written order prescribing the dental service or procedure to be done to a specific patient by the dental hygienist and shall retain the original order in the patient's dental record.

      (4) The minimum requirements for the written order shall include:

      (a) Medical history update;

      (b) Radiographic records requested;

      (c) Dental hygiene procedures requested;

      (d) Name of the patient;

      (e) Date of last oral examination;

      (f) Date of the written order; and

      (g) Signature of the dentist.

      (5) The oral examination of the patient by the supervising dentist shall have been completed within the seven (7) months preceding treatment by the dental hygienist practicing under general supervision.

      (6) The supervising dentist shall evaluate and provide to the board written validation of an employed dental hygienist’s skills necessary to perform dental hygiene services established in KRS 313.040(7) as part of the General Supervision Registration Application.

      (7) The supervising dentist shall provide a written protocol addressing the medically compromised patients who may or may not be treated by the dental hygienist. The dental hygienist shall only treat patients who are in the ASA Patient Physical Status Classification of ASA I or ASA II as established in Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students, 2007 Edition, American Dental Association.

      (8) A licensed dental hygienist shall not practice under general supervision if the licensee does not hold a general supervision registration issued by the board.

      Section 13. Requirements for Starting Intravenous Access Lines. (1) An individual licensed as a dental hygienist in Kentucky and not subject to disciplinary action pursuant to KRS Chapter 313 who desires to start an intravenous (IV) access line while under the direct supervision of a dentist who holds a sedation or anesthesia permit issued by the board shall:

      (a) Submit a signed and completed Application for Intravenous Access Line Registration;

      (b) Pay the fee required by 201 KAR 8:520; and

      (c) Submit documentation proving successful completion of a board-approved course in starting IV access lines.

      (2) An individual authorized to practice pursuant to this provision shall receive a license from the board indicating registration to start IV access lines.

      (3) A licensed dental hygienist shall not start an IV access line if the licensee does not hold a board-issued registration to start IV access lines.

      Section 14. Requirements for Performing Laser Debridement. (1) An individual licensed as a dental hygienist in Kentucky and not subject to disciplinary action pursuant to KRS Chapter 313 who desires to perform laser debridement while under the direct supervision of a dentist licensed by the board shall:

      (a) Submit a signed and completed Application for Laser Debridement Registration;

      (b) Pay the fee required by 201 KAR 8:520; and

      (c) Submit documentation proving successful completion of a board-approved course in performing laser debridement.

      (2) An individual authorized to practice pursuant to this provision shall receive a license from the board indicating registration to perform laser debridement.

      (3) A licensed dental hygienist shall not perform laser debridement if the licensee does not hold a registration to do so issued by the board.

      Section 15. Requirements for Public Health Registered Dental Hygienist Registration. (1) An individual licensed as a hygienist in Kentucky and not subject to disciplinary action who desires to practice as a public health registered dental hygienist shall:

      (a) Submit a completed Public Health Registered Dental Hygienist Application;

      (b) Meet the requirements established in KRS 313.040(8);

      (c) Document through payroll records, employment records, or other proof that is independently verifiable, the dates and hours of employment by a dentist in the practice of dental hygiene that demonstrate the required two (2) years and 3,000 hours of experience; and

      (d) During each renewal cycle, successfully complete a live three (3) hour course that has been approved by the board on the identification and prevention of potential medical emergencies that shall include, at a minimum, the following topics:

      1. Medical history, including American Society of Anesthesiologists (ASA) classifications of physical status;

      2. Recognition of common medical emergency situations, symptoms, and possible outcomes;

      3. Office emergency protocols; and

      4. Prevention of emergency situations during dental treatments.

      (2) An individual authorized to practice pursuant to subsection (1) of this section shall receive a certificate from the board indicating registration to practice as a public health registered dental hygienist.

      (3) A public health registered dental hygienist desiring to maintain certification as a public health registered dental hygienist shall be required to complete at least five (5) hours of continuing education in the area of public health or public dental health during each renewal cycle.

      (4) Pursuant to KRS 313.040(8)(c), a public health registered dental hygienist may practice in a government-created public health program at the following sites:

      (a) Local health departments;

      (b) Public or private educational institutions that provide Head Start, preschool, elementary and secondary instruction to school-aged children under the jurisdiction of the State Board of Education, and that have an affiliation agreement with the health department of jurisdiction;

      (c) Mobile and portable dental health programs under contract with a governing board of health; and

      (d) Public or private institutions under the jurisdiction of a federal, state, or local agency.

      (5) A public health registered dental hygienist shall perform dental hygiene services only under the supervision of the governing board of health, as required by KRS 313.040(3)(b), as established in KRS 313.040(8), and as identified by the Department for Public Health Practice Reference.

      (a) These services shall be limited to preventative services.

      (b) The public health registered dental hygienist shall only treat a patient who is in the ASA Patient Physical Status Classification of ASA I or ASA II as established in the current edition of Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students, American Dental Association.

      (c) The informed consent shall be required prior to preventative services and shall include:

      1. The name of the public health entity, including the name of the dentist, that assumes responsibility and control;

      2. An inquiry as to the current dentist; and

      3. A statement that services are provided by a dental hygienist without the direct supervision of a dentist.

      (d) This administrative regulation shall not preclude a Kentucky-licensed dentist from directly participating in a public health program referenced in subsection (4)(a), (b), (c), or (d) of this section.

      Section 16. Issuance of Initial Licensure. If an applicant has completed the requirements for licensure the board shall:

      (1) Issue a license in sequential numerical order; or

      (2) Deny licensure due to a violation of KRS Chapter 313 or 201 KAR Chapter 8.

      Section 17. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Application for Dental Hygiene Licensure", January 2011;

      (b) "Application for Charitable Dental Hygiene Licensure", July 2010;

      (c) "Application for Renewal of Dental Hygiene Licensure", May 2014;

      (d) "Retirement of License Form", July 2010;

      (e) "Application to Reinstate a Dental Hygiene License", July 2010;

      (f) "Verification of Licensure or Registration Form", July 2010;

      (g) "Duplicate License or Registration Request Form", July 2010;

      (h) "Dental Hygiene Local Anesthesia Registration Application", July 2010;

      (i) "General Supervision Registration Application", July 2010;

      (j) "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students", 2007 Edition;

      (k) "Application for Intravenous Access Line Registration", July 2010;

      (l) "Application for Laser Debridement Registration", July 2010; and

      (m) "Application for Public Health Registered Dental Hygienist", May 2013.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board’s Web site at [http://dentistry.ky.gov](http://dentistry.ky.gov/). (37 Ky.R. 3027; 504; eff. 9-13-2011; 38 Ky.R. 1870; 39 Ky.R. 199; eff. 8-15-2012; TAm. 5-22-2013; 40 Ky.R. 2338; 2683; eff. 6-18-2014.)

**201 KAR 8:571. Registration of dental assistants.**

      RELATES TO: KRS 214.615, 313.030, 313.045, 313.050, 313.080, 313.130

      STATUTORY AUTHORITY: KRS 214.615(2), 313.021(1)(a), (b), (c), 313.030(3), 313.045

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.045(1) requires the board to promulgate administrative regulations relating to requirements and procedures for registration, duties, training, and standards of practice for dental assistants. This administrative regulation establishes the requirements and procedures for registration, duties, training, and standards of practice for dental assistants.

      Section 1. Definitions. (1) "Coronal polishing" means a procedure that is the final stage of a dental prophylaxis on the clinical crown of the tooth after a dentist or a hygienist has verified there is no calcareous material.

      (2) "Dental assistant" mean a person who is directly involved with the care and treatment of a patient under the direct supervision of a dentist and performs reversible procedures delegated by dentist licensed in the Commonwealth.

      Section 2. General Registration Requirements and General Training Requirements. (1) A dentist licensed in the Commonwealth shall register all dental assistants in his or her practice on the Application for Renewal of Dental Licensure incorporated by reference in 201 KAR 8:530.

      (2) The dentist shall retain in the personnel file for the registered dental assistant the following:

      (a) A copy of the certificate of completion issued for the completion of the Coronal Polishing Course if the course has been taken by the dental assistant;

      (b) A copy of the certificate of completion issued for the completion of the Radiation Safety Course if the course has been taken by the dental assistant;

      (c) A copy of the certificate of completion issued for the completion of the Radiation Techniques Course if the course has been taken by the dental assistant;

      (d) A copy of the certificate of completion issued for the completion of the Starting Intravenous Access Lines if the course has been taken by the dental assistant;

      (e) A copy of proof of having current certification in cardiopulmonary resuscitation (CPR) that meets or exceeds the guidelines set forth by the American Heart Association, as incorporated by reference in 201 KAR 8:531; and

      (f) A statement of the competency of procedures delegated to the dental assistant from the delegated duties list that includes the name of the:

      1. Individual trained; and

      2. Licensee attesting to the competency of the Dental Assistant.

      Section 3. Coronal Polishing Requirements. (1) A registered dental assistant may perform coronal polishing. If coronal polishing is performed by a registered dental assistant, the assistant shall have:

      (a) Completed the training described in subsection (2) of this section; and

      (b) Obtained a certificate from the authorized institution.

      (2) The required training shall consist of an eight (8) hour course taught at an institution of dental education accredited by the Council on Dental Accreditation to include the following:

      (a) Overview of the dental team;

      (b) Dental ethics, jurisprudence, and legal understanding of procedures allowed by each dental team member;

      (c) Management of patient records, maintenance of patient privacy, and completion of proper charting;

      (d) Infection control, universal precaution, and transfer of disease;

      (e) Personal protective equipment and overview of Occupational Safety and Health Administration requirements;

      (f) Definition of plaque, types of stain, calculus, and related terminology and topics;

      (g) Dental tissues surrounding the teeth and dental anatomy and nomenclature;

      (h) Ergonomics of proper positioning of patient and dental assistant;

      (i) General principles of dental instrumentation;

      (j) Rationale for performing coronal polishing;

      (k) Abrasive agents;

      (l) Coronal polishing armamentarium;

      (m) Warnings of trauma that can be caused by improper techniques in polishing;

      (n) Clinical coronal polishing technique and demonstration;

      (o) Written comprehensive examination covering the material listed in this section, which shall be passed by a score of seventy-five (75) percent or higher;

      (p) Completion of the reading component as required by subsection (3) of this section; and

      (q) Clinical competency examination supervised by a dentist licensed in Kentucky, which shall be performed on a live patient.

      (3) A required reading component for each course shall be prepared by each institution offering coronal polishing education that shall:

      (a) Consist of the topics established in subsection (2)(a) to (n) of this section;

      (b) Be provided to the applicant prior to the course described in subsection (2) of this section; and

      (c) Be reviewed and approved by the board based on the requirements of subsection (2)(a) to (n) of this section.

      (4) The institutions of dental education approved to offer the coronal polishing course in Kentucky shall be:

      (a) University of Louisville School of Dentistry;

      (b) University of Kentucky College of Dentistry;

      (c) Western Kentucky University Dental Hygiene Program; and

      (d) Kentucky Community Technical College System Dental Hygiene or Dental Assisting Programs.

      (5) An institution of dental education from a state outside of Kentucky meeting the standards of the institutions listed in subsection (4) of this section shall be approved upon request to the Kentucky Board of Dentistry.

      Section 4. X-rays by Registered Dental Assistants. A registered dental assistant may take x-rays under the direct supervision of a dentist licensed in Kentucky. If a registered dental assistant takes x-rays under the direct supervision of a dentist licensed in Kentucky, the dental assistant shall have completed:

      (1) A six (6) hour course in dental radiography safety; and

      (2) Four (4) hours of instruction in dental radiography technique while under the employment and supervision of the dentist in the office or a four (4) hour course in radiography technique.

      Section 5. Requirements for Starting Intravenous Access Lines. (1) An individual registered as a dental assistant in Kentucky and not subject to disciplinary action under KRS Chapter 313 who desires to start intravenous (IV) access lines while under the direct supervision of a dentist who holds a sedation or anesthesia permit issued by the board shall submit documentation to the licensed dentist for whom the registered dental assistant will be providing services proving successful completion of a board-approved course in starting IV access lines based on:

      (a) Patient Safety Techniques;

      (b) Anatomy and physiology of the patient;

      (c) Techniques in starting and maintaining an IV access line; and

      (d) Appropriate methods of discontinuing an IV access line.

      (2) A registered dental assistant shall not start an IV access line if the individual has not completed a Board approved course in IV access lines.

      Section 6. A dental assistant operating under this administrative regulation shall be under the direct supervision of the dentist licensed in the Commonwealth. The dentist licensed in the Commonwealth shall accept sole responsibility for the actions of the dental assistant or dental auxiliary personnel while in the performance of duties in the dental office.

      Section 7. Incorporation by Reference. (1) "Delegated Duty List", May 2014, is incorporated by reference.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the board’s Web site at [http://dentistry.ky.gov](http://dentistry.ky.gov/). (37 Ky.R. 1929; 2377; eff. 5-6-2011; 40 Ky.R. 2343; 41 Ky.R. 257; eff. 9-5-2014.)

**201 KAR 8:581. Charity dental practices.**

      RELATES TO: KRS 313.254(8)

      STATUTORY AUTHORITY: KRS 313.021, 313.060(1), 313.254(8)

      NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.021(1) requires the board to exercise all of the administrative functions of the Commonwealth in the regulation of the profession of dentistry, KRS 313.060(1) requires the board to promulgate administrative regulations relating to dental practices, and KRS 313.254(8) requires the board to promulgate administrative regulations relating to the charitable practice of dentistry. This administrative regulation establishes requirements for charitable dental practices.

      Section 1. Minimum Documentation Standards for All Dental Patients of a Charitable Dental Practice. Each patient record for a dental patient of a charitable dental practice in the Commonwealth of Kentucky shall include at a minimum:

      (1) The patient’s name;

      (2) The patient’s date of birth;

      (3) The patient’s medical history;

      (4) The patient’s dental history;

      (5) The patient’s current medications from all healthcare providers;

      (6) The date of current treatment;

      (7) The diagnosis;

      (8) The treatment options presented to the patient;

      (9) The tooth number and surfaces to be treated, which shall be included in the progress notes;

      (10) The patient’s current blood pressure reading;

      (11) Informed consent by the patient; and

      (12) Signature or initials of the provider.

      Section 2. Documentation of Infection Control Procedures. All charitable dental practices in the Commonwealth of Kentucky shall adhere to the universal precautions outlined in the Guidelines for Infection Control in Dental Health-Care Settings published by the Centers for Disease Control and Prevention and shall retain documentation proving that:

      (1) All workers have been educated in the charitable dental practice or post-disaster clinic procedures for infection control;

      (2) All workers involved in patient treatment of have received a Hepatitis B vaccination or have signed a waiver;

      (3) A policy is in place requiring all staff involved in clinical patient care to wear a fresh set of gloves for each patient;

      (4) A policy is in place to assure all staff change gloves between patients;

      (5) A policy is in place to assure all staff wears protective clothing during patient care;

      (6) A policy is in place to assure all staff wear masks during procedures that may involve spatter;

      (7) The charitable dental practice contains the necessary supplies to comply with this administrative regulation;

      (8) All hand-pieces are sterilized following each patient treatment by one (1) of the following means:

      (a) Autoclave;

      (b) Dry heat; or

      (c) Heat or chemical vapor;

      (9) There is routine verification that sterilization methods are functioning properly;

      (10) Individual burs, hand instruments, and rotary instruments are either discarded or sterilized following each use;

      (11) A policy is in place that addresses the disinfection of all operatory equipment and surfaces between patients;

      (12) All surfaces that are difficult to disinfect shall be covered with a non-penetrable barrier;

      (13) A policy is in place requiring that all non-penetrable surfaces are changed between patients;

      (14) Disinfectant is used, including the name and type of the disinfectant;

      (15) A policy is in place that describes a separate place for the cleaning, disinfecting, and sterilization of items, with a mechanism of separation from the patient treatment area that may be:

      (a) An enclosed instrument table;

      (b) Curtains or wall separation; or

      (c) Bagging of the instruments;

      (16) A policy is in place that provides for the protection of dental records, charts, and radiographs from biohazards while those items are in the patient treatment area, or if no protection exists, charts shall be readily reproducible with limited effort; and

      (17) An agreement exists with an agency to properly dispose of all medical waste and bio-hazardous material, including sharps, instruments, and human tissue.

      Section 3. Infection Control Inspections. (1) The board or its designee may perform an infection control inspection of a charitable dental practice utilizing the Infection Control Inspection Checklist.

      (2) A charitable dental practice that is found deficient upon an initial infection control inspection shall not be allowed to continue until the clinic coordinator provides proof to the board that the charitable dental practice is in compliance.

      Section 4. General Requirements for Charitable Dental Practices. All charitable dental practices in the Commonwealth shall comply with the following requirements:

      (1) The clinic coordinator, who shall supervise and oversee all charitable dental practice functions, shall be a Kentucky licensed dentist;

      (2) There shall be a functional radiograph machine on site;

      (3) Follow-up care provisions shall be in place for each patient requiring follow-up care;

      (4) A written blood-borne pathogen exposure control plan shall be kept on site;

      (5) A sharps stick protocol shall be followed in which:

      (a) The entity that will collect specimens shall be identified prior to the start of the event; and

      (b) The laboratory that will perform blood work analysis shall be identified prior to the start of the event;

      (6) Post-operative instructions shall be delivered to the patient prior to the patient leaving;

      (7) A dentist shall not supervise more than six (6) students in a charitable dental practice or post-disaster clinic;

      (8) All procedures shall be concluded by the end date of the charitable dental practice unless a Kentucky licensed dentist has stated in writing that the licensee shall complete the procedure in a timely manner at his practice;

      (9) All charitable dental practices shall notify the board no less than thirty (30) days prior to the start of an event of the dates, locations, and host of the event;

      (10) A charitable dental practice shall provide the names and license numbers of all participating dentists and dental hygienists no later than fifteen (15) days post-event;

      (11) A prescription for a narcotic shall not be written during an event unless approved by a designated dental prescription coordinator who shall hold a full license to practice dentistry in the Commonwealth of Kentucky. The prescription shall be approved if it is medically appropriate;

      (12) A written emergency medical response plan shall be kept on site; and

      (13) All charitable dental practices larger than forty (40) chairs shall have at least one (1) Basic Life Support (BLS) ambulance on site for the duration of the event.

      Section 5. Registered Dental Assistants and Auxiliary Personnel. (1) For the purpose of a charitable dental practice an individual performing a duty in the charity event, other than a licensed dentist or licensed dental hygienist, shall be restricted to the duties of a dental auxiliary; and

      (2) A radiograph shall not be taken unless the person performing the x-ray has met the requirements of 201 KAR 8:571.

      Section 6. Incorporation by Reference. (1) The following material is incorporated by reference:

      (a) "Guidelines for Infection Control in Dental Health-Care Settings", December 2003; and

      (b) "Infection Control Inspection Checklist", July 2010.

      (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the board’s Web site at [http://dentistry.ky.gov](http://dentistry.ky.gov/). (37 Ky.R. 1931; 2378; eff. 5-6-2011.)