

South Dakota State Board of Dentistry

Board Meeting Agenda

10:00 a.m. Central Friday January 13, 2023

Drifters Event Center -- 325 E. Hustan Avenue Ft. Pierre SD 57532

- 1) **Call to Order**
- 2) **Open Forum:** 5 minutes for the public to address the Board
- 3) **Approval of Minutes:** October 21, 2022
- 4) **Adoption of Agenda**
- 5) **Financial Report**
- 6) **Office Update**
- 7) **Organization and Program Updates**
 - a. Central Regional Dental Testing Services (CRDTS)
 - b. SD Dental Association, Dental Wellness Program, Oral Health Coalition
 - c. SD Dental Hygienists' Association
- 8) **Executive Session - SDCL 1-25-2(3) and (4)**
- 9) **License Applications**
- 10) **Compliance/Legal**
- 11) **New Business:**
 - a. FY 2024 Board Operations
 - b. Retirement/Clinical Practice Template Agreement
 - c. Draft Administrative Rules
 - d. Speaker Honorarium Application
 - e. Meeting Date(s)
- 12) **Announcements:** Next Meetings – June 2, 2023, October 20, 2023.
- 13) **Adjourn**

SD State Board of Dentistry
Board Meeting
Drifters Event Center – Ft. Pierre, SD
Friday October 21, 2022 10:00am Central

President Renemans called the meeting to order at 10:03am Central.

Board Members Present: Dr. Nick Renemans, Dr. Scott Van Dam, Dr. Harold Doerr, Dr. Brian Prouty and Zona Hornstra.

Board Members Present via Video/Audio Conferencing: Molly Fulton.

Board Staff Present: Brittany Novotny, Shelly Munson, Nolan Welker and Lisa Harsma.

Presenters attending via Video/Audio Conferencing: Marsha Jensen (Southeast Technical College), Chanin Hartnett (Western Dakota Tech), Dr. Mark Edwards (CRDTS), Dr. Mark Muncy (SRTA), Kimber Cobb (CDCA-WREB-CITA), Dr. Ben Wall (CDCA-WREB-CITA) and Maria Piacentino (Midwest Health Management Services/ HPAP).

Others Present: Paul Knecht (SDDA), Dr. Denis Miller (Siouxland Oral Surgery), Dr. Ed Kusek (AAID), Tasha Wendel (SDDHA), Carolina Hernandez (AAID), Mike Mueller (DDSD) and Ann Schwartz (DDSD).

Renemans called for public testimony during the open forum. Dr. Ed Kusek, Carolina Hernandez, and Dr. Denis Miller gave testimony regarding the draft specialty advertising administrative rules.

Motion to approve the minutes by Doerr. Second by Hornstra. Motion carried.

Motion to move approve the agenda by Hornstra. Second by Van Dam. Motion carried.

Motion to approve the financial report by Fulton. Second by Doerr. Motion carried.

Novotny provided an office update.

Marcia Jensen presented an update on the Southeast Technical College Dental Assisting Program, noting that its application for accreditation was accepted by CODA and the program is now undergoing the CODA accreditation process.

Motion to approve the Southeast Technical College dental assisting program per ARSD 20:43:08:05 by Doerr. Second by Van Dam. Motion carried.

Chanin Hartnett presented an update on the Western Dakota Tech Dental Assisting Program, noting that the program is now accredited by CODA.

Kimber Cobb presented an update on the CDCA-WREB-CITA exam.

Dr. Mark Edwards presented an update on the CRDTS exam.

Dr. Marc Muncy presented an update on the SRTA exam.

Motion to approve, per ARSD 20:43:03:01(4), the components of the patient and manikin based dental clinical competency examinations administered by CRDTS, SRTA and CDCA-WREB-CITA that meet the requirements outlined in 20:43:03:02, as presented, by Doerr. Second by Hornstra. Motion carried.

Motion to approve, per ARSD 20:43:03:08(4), the components of the patient and manikin based dental hygiene clinical competency examinations administered by CRDTS, SRTA and CDCA-WREB-CITA that meet the requirements outlined in ARSD 20:43:03:09, as presented, by Hornstra. Second by Van Dam. Motion carried.

Motion to approve, per 20:43:03:04(4), the patient and manikin based dental clinical competency examinations administered by CRDTS, SRTA and CDCA-WREB-CITA, as presented, by Prouty. Second by Doerr. Motion carried.

Motion to approve, per 20:43:03:10(4), the patient and manikin based dental hygiene clinical competency examinations administered by CRDTS, SRTA and CDCA-WREB-CITA, as presented, by Hornstra. Second by Van Dan. Motion carried.

Tasha Wendel presented an update on the South Dakota Dental Hygienists' Association and University of South Dakota Department of Dental Hygiene.

Paul Knecht presented an update on the South Dakota Dental Association, the Dental Wellness Program, and the Oral Health Coalition.

Maria Piacentino presented an updated on the Health Professionals Assistance Program.

Motion to move into Executive Session pursuant to SDCL 1-25-2 (3) and (4) by Hornstra. Second by Van Dam. Motion carried. The Board went into Executive Session at 11:45am.

Motion to move out of Executive Session by Hornstra. Second by Van Dam. Motion carried. The board moved out of Executive Session at 2:04pm.

Motion to approve the dentist applications of MD Rezaul Islam Sarker, Joie Fan and Michael Paul Tewes by Doerr. Second by Van Dam. Motion carried.

Motion to approve the dental hygienist applications of Shelby Lyn Arman, Thuc Dan Nguyen Bui, Autumn Elizabeth Gomez, Kirstin Marie Gortmaker, Megan Lynne Haggard, Regina Faith Kisely, Maria Carol Lipe, Denisa Mujic, Rozlynn Irene Murrow, and Haley Marie den Hoed by Hornstra. Second by Doerr. Motion carried.

Motion to approve the dentist credential verification applications of Bianka Bidovska-Miller, Anthony David DelCorral, and Shaun Taylor O'Neill by Doerr. Second by Van Dam. Motion carried.

Motion to approve the dental hygienist credential verification applications of Catherine Elaine Morgan and Sarah Ann Varney by Hornstra. Second by Prouty. Motion carried.

Motion to approve the dental entity application of Joshua Brower DDS Prof. LLC by Doerr. Second by Van Dam. Motion carried.

Motion to approve the CODA accredited General Practice Residency completed by Dr. Amrita Patel at Nassau University Medical Center as equivalent to a clinical competency examination per SDCL 36-

6A-47 by Doerr. Second by Hornstra. Motion carried.

The Board and general counsel reviewed the draft specialty advertising administrative rules and stakeholder feedback that was received. The Board directed that additional feedback be solicited on the current draft administrative rules for review at the January 2023 board meeting. The stakeholder feedback portal and the draft administrative rules will be available on the Board's website in advance of the January 2023 board meeting.

The Board reviewed the draft speaker honorarium application. Motion to approve the 2023 speaker honorarium application, as presented, by Hornstra. Second by Doerr. Motion carried.

The Board reviewed the Advisory Opinions. Motion to rescind the January 2017 Advisory Opinion regarding Continued Competency, the June 2017 Advisory Opinion regarding Dental Hygienists and Radiographs, and the October 2017 Advisory Opinion regarding Silver Diamine Fluoride by Doerr. Second by Van Dam. Motion carried.

Motion to authorize collaborative supervision agreements to include the preventative application of Silver Diamine Fluoride and Nanosilver Fluoride by Hornstra. Second by Van Dam. Motion carried.

Novotny provided an update on the draft Dental and Dental Hygiene Interstate Compact from the Council of State Governments.

The Board announced meeting dates of January 13, 2023; June 2, 2023; and October 20, 2023.

Motion to adjourn by Fulton. Second by Hornstra. Motion carried.

There being no further business, the meeting was adjourned at 2:45 pm.

Zona Hornstra, Secretary

Remaining Authority by Object/Subobject

Expenditures current through 12/03/2022 01:20:43 PM

HEALTH -- Summary

FY 2023 Version -- AS -- Budgeted and Informational

FY Remaining: 57.5%

09202 Subobject	Board of Dentistry - Info	Operating	Expenditures	Encumbrances	Commitments	Remaining	PCT AVL
EMPLOYEE SALARIES							
5101030	Board & Comm Mbrs Fees	10,086	300	0	0	9,786	97.0
Subtotal		10,086	300	0	0	9,786	97.0
EMPLOYEE BENEFITS							
5102010	Oasi-employer's Share	931	23	0	0	908	97.5
Subtotal		931	23	0	0	908	97.5
51 Personal Services							
Subtotal		11,017	323	0	0	10,694	97.1
TRAVEL							
5203030	Auto-priv (in-st.) H/rte	1,500	0	0	0	1,500	100.0
5203070	Air-charter-in State	22,000	12,312	0	0	9,688	44.0
5203100	Lodging/in-state	1,266	0	0	0	1,266	100.0
5203130	Non-employ. Travel-in St.	2,500	0	0	0	2,500	100.0
5203140	Meals/taxable/in-state	305	0	0	0	305	100.0
5203150	Non-taxable Meals/in-st	200	0	0	0	200	100.0
5203260	Air-comm-out-of-state	1,000	0	0	0	1,000	100.0
5203330	Non-employ Travel-out-st.	3,000	0	0	0	3,000	100.0
Subtotal		31,771	12,312	0	0	19,459	61.2
CONTRACTUAL SERVICES							
5204010	Subscriptions	300	0	0	0	300	100.0
5204020	Dues & Membership Fees	5,000	0	0	0	5,000	100.0
5204050	Computer Consultant	34,400	23,056	11,944	0	-600	0.0
5204060	Ed & Training Consultant	3,307	0	0	0	3,307	100.0
5204080	Legal Consultant	28,616	4,433	0	0	24,183	84.5
5204090	Management Consultant	276,040	122,855	153,390	0	-205	0.0
5204100	Medical Consultant	40,000	5,639	144,361	0	-110,000	0.0
5204130	Other Consulting	7,000	871	93,935	0	-87,806	0.0
5204160	Workshop Registration Fee	2,000	1,120	0	0	880	44.0
5204181	Computer Services-state	316	0	0	0	316	100.0
5204190	Computer Services-private	500	514	0	0	-14	0.0
5204200	Central Services	3,323	2,328	0	0	995	29.9
5204203	Central Services	203	0	0	0	203	100.0
5204204	Central Services	1,211	706	0	0	505	41.7
5204207	Central Services	1,016	0	0	0	1,016	100.0
5204360	Advertising-newspaper	400	0	0	0	400	100.0

Remaining Authority by Object/Subobject

Expenditures current through 12/03/2022 01:20:43 PM

HEALTH -- Summary

FY 2023 Version -- AS -- Budgeted and Informational

FY Remaining: 57.5%

09202 Board of Dentistry - Info							PCT
Subobject	Operating	Expenditures	Encumbrances	Commitments	Remaining	AVL	
5204480 Microfilm & Photography	500	0	0	0	500	100.0	
5204510 Rents-other	725	500	0	0	225	31.0	
5204530 Telecommunications Srvc	4,000	0	0	0	4,000	100.0	
5204550 Garbage & Sewer	0	20	0	0	-20	0.0	
5204590 Ins Premiums & Surety Bds	1,500	0	0	0	1,500	100.0	
5204960 Other Contractual Service	12,000	150	0	0	11,850	98.8	
Subtotal	422,357	162,192	403,630	0	-143,465	0.0	
SUPPLIES & MATERIALS							
5205020 Office Supplies	1,100	141	0	0	959	87.2	
5205310 Printing-state	1,000	0	0	0	1,000	100.0	
5205320 Printing-commercial	1,600	0	0	0	1,600	100.0	
5205350 Postage	4,500	2,241	0	0	2,259	50.2	
5205390 Food Stuffs	500	155	0	0	345	69.0	
Subtotal	8,700	2,537	0	0	6,163	70.8	
GRANTS AND SUBSIDIES							
5206070 Grants To Non-profit Org	7,500	0	0	0	7,500	100.0	
Subtotal	7,500	0	0	0	7,500	100.0	
OTHER							
5208010 Other	500	0	0	0	500	100.0	
Subtotal	500	0	0	0	500	100.0	
52 Operating Subtotal	470,828	177,041	403,630	0	-109,843	0.0	
Total	481,845	177,364	403,630	0	-99,149	0.0	

STATE OF SOUTH DAKOTA
 REVENUE SUMMARY BY BUDGET UNIT
 FOR PERIOD ENDING: 11/30/2022

AGENCY 09 HEALTH
 BUDGET UNIT 09202 BOARD OF DENTISTRY - INFO

CENTER	COMP	ACCOUNT	DESCRIPTION	CURRENT MONTH	YEAR-TO-DATE	
COMPANY NO 6503						
COMPANY NAME		PROFESSIONAL & LICENSING BOARDS				
092020061807	6503	4293005	DENTIST CREDENTIAL	1,500.00	3,500.00	
092020061807	6503	4293015	HYGIENIST CREDENTIAL	400.00	1,400.00	
092020061807	6503	4293105	DENTIST NEW LICENSE	.00	300.00	
092020061807	6503	4293115	DENTIST JP EXAM	675.00	2,250.00	
092020061807	6503	4293135	DENTIST NITROUS OXIDE	80.00	280.00	
092020061807	6503	4293137	DENTIST NITROUS RENEW	.00	80.00	
092020061807	6503	4293140	DENTIST MODERATE SEDATION	50.00	100.00	
092020061807	6503	4293147	DENTIST MOD SED AD RENEW	.00	100.00	
092020061807	6503	4293152	DENTIST GA/DEEP SED RENEW	.00	50.00	
092020061807	6503	4293205	HYGIENIST NEW LICENSE	200.00	800.00	
092020061807	6503	4293215	HYGIENIST JP EXAM	460.00	1,725.00	
092020061807	6503	4293222	HYGIENIST ANESTHESIA	120.00	520.00	
092020061807	6503	4293235	HYGIENIST NITRIOUS OXIDE	.00	240.00	
092020061807	6503	4293305	RADIOLOGY NEW	1,120.00	3,680.00	
092020061807	6503	4293307	RADIOLOGY RENEWAL	.00	20.00	
092020061807	6503	4293405	ADA EXPANDED FUNCTION NEW	480.00	2,280.00	
092020061807	6503	4293420	ADA EXPAND FUNC ADMIN NIT	680.00	1,360.00	
092020061807	6503	4293505	CORPORATE NEW LICENSE	100.00	600.00	
092020061807	6503	4293600	TEMP LICENSE	150.00	1,300.00	
092020061807	6503	4293850	COLLABORATIVE SUPERVISION	.00	60.00	
ACCT:	4293	BUSINESS & OCCUP LICENSING (NON-GOVERNMENTAL)		6,015.00	20,645.00	*
ACCT:	42	LICENSES, PERMITS & FEES		6,015.00	20,645.00	**
092020061807	6503	4595000	VERIFICATION LETTERS	200.00	550.00	
092020061807	6503	4595800	LIST OF PRACTITIONERS	1,050.00	4,500.00	

STATE OF SOUTH DAKOTA
 REVENUE SUMMARY BY BUDGET UNIT
 FOR PERIOD ENDING: 11/30/2022

AGENCY 09 HEALTH
 BUDGET UNIT 09202 BOARD OF DENTISTRY - INFO

CENTER	COMP	ACCOUNT	DESCRIPTION	CURRENT MONTH	YEAR-TO-DATE	
ACCT:	4595			1,250.00	5,050.00	*
ACCT:	45		CHARGES FOR SALES & SERVICES	1,250.00	5,050.00	**
092020061807	6503	4920045	NONOPERATING REVENUES	.00	4,426.50	
ACCT:	4920		NONOPERATING REVENUE	.00	4,426.50	*
ACCT:	49		OTHER REVENUE	.00	4,426.50	**
CNTR:	092020061807			7,265.00	30,121.50	***
CNTR:	092020061			7,265.00	30,121.50	****
CNTR:	0920200			7,265.00	30,121.50	*****
COMP:	6503			7,265.00	30,121.50	*****
B UNIT:	09202			7,265.00	30,121.50	*****

BA1409R1

STATE OF SOUTH DAKOTA
CASH CENTER BALANCES
AS OF: 11/30/2022

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AGENCY: 09 HEALTH
BUDGET UNIT: 09202 BOARD OF DENTISTRY - INFO

COMPANY	CENTER	ACCOUNT	BALANCE	DR/CR	CENTER DESCRIPTION
6503	092000061807	1140000	447,526.44	DR	BOARD OF DENTISTRY
COMPANY/SOURCE TOTAL 6503 618			447,526.44	DR *	
COMP/BUDG UNIT TOTAL 6503 09202			447,526.44	DR **	
BUDGET UNIT TOTAL 09202			447,526.44	DR ***	

Dentist Credential

First Name	Middle Name	Last Name
William	Harold	Blauer
Paul	Lee	Hung
Todd	Clark	Martin

Hygienist Credential

First Name	Middle Name	Last Name
Katelyn	Joy	Friedt
Rhonda	Jo	Griffith
Karmen	Lynn	Massey
Brittany	Ann	Williams

Hygienist New

First Name	Middle Name	Last Name
Tessa	Lee	Adams
Kaylee	Ann	Beaver
Linda	J	Hollibaugh

SOUTH DAKOTA DEPARTMENT OF HEALTH
BOARD OF DENTISTRY

IN THE MATTER OF)	
)	AGREEMENT AND ORDER
Dr. XXXXX)	
)	
)	
)	

Dr. XXXX, is an individual who holds a license in good standing to practice dentistry in the state of South Dakota, XXXX (license number). SDCL 36-6A-52 requires annual renewal of a license by July 1, including the licensee’s provision of information as required by the South Dakota State Board of Dentistry (Board).

Dr. XXX has requested to relinquish his/her clinical privileges due to retirement. Dr. XXX hereby agrees to voluntarily refrain from the clinical practice of dentistry in the state of South Dakota. In recognition of Dr. XXX completing his/her dental career in good standing and retiring from the clinical practice of dentistry, the parties are entering into this Agreement and Order (Agreement).

Dr. XX agrees to the following terms:

1. Dr. XX is eligible for this agreement one time during his or her career.
2. This Agreement will be in effect from the date of execution until July 1, XXXX (3 years) or upon non-renewal of the license, whichever occurs earlier.
3. Dr. XX will not engage in the clinical practice of dentistry or provide direct patient clinical care in South Dakota during the term of this Agreement.
4. Dr. XX will relinquish all permits that fall under the jurisdiction of the Board effective the date this Agreement is executed.

5. During the term of this Agreement, Dr. XX is exempt from continuing education and maintenance of cardiopulmonary resuscitation requirements, but must annually renew his/her license, pay all required fees, and comply with all other requirements for the maintenance and renewal of his/her license as required by law.
6. If Dr. XX would like to resume clinical practice in South Dakota during the term of this Agreement, he/she must submit written notification to the Board and must, before resuming clinical practice, obtain approval by the Board. The Board may require completion of continuing education, clinical and/or didactic testing, or other conditions before authorizing Dr. XXX to resume clinical practice. Dr. XX is responsible for all costs associated with any such requirements.
7. The license of Dr. XX will not be renewed after July 1, XXXX and will automatically suspend. If Dr. XXX would like to obtain a license after that date, he/she will need to apply for a license and complete all requirements for licensure as required by law.

For purposes of this Agreement, Dr. XX is not prohibited from practicing non-clinical dentistry, as recognized by the American Dental Association.

Dr. XX has been given an opportunity to discuss this Agreement with an attorney and is aware of his/her right to notice, hearing, and appeal in any contested case matter. Dr. XX hereby voluntarily waives all such rights to counsel, notice, hearing, and appeal which may exist in this matter, as provided in SDCL ch. 1-26 and SDCL ch. 36-6A.

This Agreement constitutes informal disposition pursuant to SDCL 1-26-20 and is a public record of the Board and state of South Dakota. This Agreement is not a disciplinary action and will not be reported to the National Practitioner Databank. This Agreement does not preclude the Board from taking disciplinary action if Dr. XX fails to satisfactorily meet the conditions set forth in this

Agreement or engages in unprofessional conduct as defined in the Dental Practice Act (SDCL ch. 36-6A).

In the event the Board does not approve this Agreement and Order, any argument is waived that the Board members considering this Agreement should be disqualified from later rendering a decision in any subsequent contested case hearing regarding this pending action.

ACKNOWLEDGEMENT

Dr. XXX, by his/her signature acknowledges that he/she has had an opportunity to consult with legal counsel of his/her choice, and he/she states that he/she understands the terms of this Agreement, and knowingly, intelligently, and voluntarily enters into the same.

Dated this _____ day of _____, XXX.

Dr. XXXXX
Licensee

ORDER

NOW THEREFORE, the South Dakota Board of Dentistry having been provided with the above Agreement regarding Dr. XXX, and the Board of Dentistry finding good cause for accepting the above Agreement; it is

ORDERED, that the Board of Dentistry accepts the Agreement and therefore the foregoing Agreement is entered into, and shall be effective from the date signed below by the President of the South Dakota State Board of Dentistry.

Dated this ____ day of _____, ____.

SOUTH DAKOTA BOARD OF DENTISTRY

By: _____
Dr. XXXX, President

1 **ADVERTISING**

2 CHAPTER 20:43:04

3 AUTHORIZED PRACTICE

4 20:43:04:01 ~~Recognized Representation of specialty practice and advertising—~~
5 ~~Qualifications.~~

6 20:43:04:02 Repealed.

7 20:43:04:03 Inspections for safety and sanitation.

8 20:43:04:04 Dental hygienist -- Practice -- Supervision.

9 20:43:04:05 Transferred.

10 20:43:04:05.01 Transferred.

11 20:43:04:06 Additional duties of dental hygienist.

12 20:43:04:07 Mobile office or unit--Authority to operate.

13 20:43:04:08 Transferred.

14 20:43:04:09 Transferred.

15 20:43:04:10 Transferred.

16 20:43:04:11 Transferred

17 20:43:04:12 Transferred.

18 **20:43:04:01. Recognized Representation of specialty practice and advertising -**
19 **~~—Qualifications.~~**

20 ~~(1) Dentists A dentist may advertise services in recognized specialty areas or advertise~~
21 ~~specialty practices if they have advertise or represent oneself as a “specialist” or use the terms~~
22 ~~“specializes,” “specializing,” or another variation of the term, for any specialty in which the dentist~~
23 ~~has completed a post-doctoral program consisting of at least two full-time years and the post-~~

1 doctoral program is accredited by an accreditation agency recognized by the United States
2 Department of Education or the post-doctoral program is administered by a dental school
3 accredited by an organization recognized by the United State Department of Education. A dentist
4 who advertises or represents oneself as a “specialist” or uses the terms “specializes,”
5 “specializing,” or another variation of the term must devote a sufficient portion of his or her
6 practice to the announced specialty to maintain expertise in that specialty;~~postdoctoral training~~
7 ~~which is recognized and approved by the American Dental Association Commission on Dental~~
8 ~~Accreditation. Only the following specialties are recognized by the Board of Dentistry:~~

- 9 ~~—— (1) Dental public health;~~
- 10 ~~—— (2) Endodontics;~~
- 11 ~~—— (3) Oral and maxillofacial pathology;~~
- 12 ~~—— (4) Oral and maxillofacial radiology~~
- 13 ~~—— (5) Oral and maxillofacial surgery;~~
- 14 ~~—— (6) Orthodontics and dentofacial orthopedies;~~
- 15 ~~—— (7) Pediatric dentistry;~~
- 16 ~~—— (8) Periodontics; and~~
- 17 ~~—— (9) Prosthodontics.~~

18 ~~—— Dentists that meet the qualifications of this section must disclose in all advertisements the~~
19 ~~specialty area in which they practice. Dentists that do not meet the qualifications of this section~~
20 ~~must disclose in all advertisements that they are a general dentist. This disclaimer shall be clearly~~
21 ~~legible with print equal to or larger than the print advertising the service or clearly audible with~~
22 ~~speech volume and pace equal to the advertisement.~~

1 ~~—— This section does not apply to those dentists who began limiting their practices to a~~
2 ~~recognized specialty prior to April 20, 1972. Declaration to the public of a specialty practice or the~~
3 ~~inference of specialty status in any other area is a violation of SDCL 36-6A-29 and this section.~~

4 (2) A dentist who advertises or represents oneself as a “specialist” or uses another
5 variation of the term, such as “specializes” or “specializing,” must avoid any implication that
6 another dentist associated with the same practice or entity is a specialist, unless that dentist also
7 meets the requirements of this section;

8 (3) Declaration to the public of a specialty practice or the inference of specialty status
9 outside of this section is unprofessional conduct as defined in § 36-6A-59.1(13);

10 (4) Any dentist may announce an “emphasis” in any area of dental practice without
11 violating this section;

12 (5) The Board may require a dentist to substantiate the truthfulness of any assertion or
13 representation of material fact set forth in an advertisement. At the time an advertisement is placed,
14 the dentist must possess and rely upon information which, when produced, would substantiate the
15 truthfulness of any assertion, omission, or representation of material fact set forth in the
16 advertisement. The failure to possess and rely upon the information required at the time the
17 advertisement is placed is unprofessional conduct as defined in § 36-6A-59.1(13). The failure or
18 refusal to provide to the Board the factual substantiation to support a representation or assertion
19 when requested by the Board is unprofessional conduct as defined in § 36-6A-59.1(13) and
20 grounds for disciplinary action as defined in § 36-1C-3;

21 (6) Each dentist who is a director, manager, partner, shareholder, contracted employee
22 or licensed professional employee, acting as an agent of the entity identified in an advertisement,

1 is jointly and severally responsible for the form and content of any advertisement offering services
2 or materials; and

3 (7) A recording of every advertisement communicated by electronic media and a copy
4 of every advertisement communicated by print media indicating the date and place of the
5 advertisement must be retained by the dentist for a period of one year and be made available for
6 review upon request by the board or its designee.

7 **Source:** SL 1975, ch 16, § 1; 6 SDR 87, effective March 2, 1980; 11 SDR 73, effective
8 November 27, 1984; 12 SDR 151, 12 SDR 155, effective July 1, 1986; 18 SDR 132, effective
9 February 17, 1992; 37 SDR 131, effective January 6, 2011.

10 **General Authority:** SDCL 36-6A-14(1)(20), 36-6A-28, 37-6A-29.

11 **Law Implemented:** SDCL 36-6A-14(1)(22), 36-6A-59.1(13).

12 **CLINICAL EXAMINATION - SIMULATION**

13 **20:43:03:01. Application for license to practice as a dentist -- Requirements.** An
14 applicant for a license to practice as a dentist shall submit to the board the following:

15 (1) A completed application form and a fee of \$150;

16 (2) Certified transcripts or, when approved, a certified letter from a dental school official
17 verifying that the applicant has graduated from a United States dental school accredited by the
18 American Dental Association Commission on Dental Accreditation, having obtained a doctor of
19 dental medicine or a doctor of dental surgery degree;

20 (3) Verification of passage of the National Board Dental Examination Parts I and II or the
21 Integrated National Board Dental Examination administered by the Joint Commission on National
22 Dental Examinations;

1 (4) Verification of passage of a board approved patient-based or an equivalent simulation
2 or manikin-based clinical competency psychomotor examination that meets the criteria outlined in
3 § 20:43:03:02 within the five years preceding application ~~or, if the clinical competency~~
4 ~~examination was passed prior to July 1, 2018, and within the five years preceding application,~~
5 ~~verification of passage of the Central Regional Dental Testing Service examination or Western~~
6 ~~Regional Examining Board examination.~~ An applicant who fails any combination of board
7 approved clinical competency examinations three times is not eligible for licensure in this state;

8 (5) ~~A certified letter verifying~~ Verification of the license number and status of the license
9 from the board of dentistry in each state in which the applicant is or has been licensed, if applicable;

10 (6) A copy of the applicant's birth certificate or equivalent documentation;

11 (7) A recent photograph;

12 (8) A copy of the applicant's current cardiopulmonary resuscitation card. The board accepts
13 only the American Heart Association for the Healthcare Provider, the American Red Cross for the
14 Professional Rescuer, or an equivalent program approved by the board; and

15 (9) Completed fingerprint cards necessary to conduct a state and federal criminal
16 background check.

17 An applicant for a license to practice as a dentist shall pass a written examination
18 administered by the board on the relevant administrative rules and statutes. A cut score of 70
19 percent is considered passing.

20 To be considered, a complete application and all supporting documentation must be received
21 at least 30 days before the board meeting. If requested, an applicant shall appear for a personal
22 interview conducted by the board on a date set by the board.

1 **Source:** SL 1975, ch 16, § 1; 6 SDR 87, effective March 2, 1980; 12 SDR 151, 12 SDR 155,
2 effective July 1, 1986; 18 SDR 132, effective February 17, 1992; 20 SDR 166, effective April 11,
3 1994; 26 SDR 37, effective September 20, 1999; 27 SDR 57, effective December 12, 2000; 38
4 SDR 172, effective April 25, 2012; 45 SDR 35, effective September 19, 2018; 46 SDR 75,
5 effective December 4, 2019; 47 SDR 11, effective August 12, 2020.

6 **General Authority:** SDCL 36-6A-14(20).

7 **Law Implemented:** SDCL 36-6A-14(3), 36-6A-44.

8 **20:43:03:02. Application for license to practice as a dentist -- Clinical competency**
9 **examination.** The board may approve a patient-based or an equivalent simulation or manikin-
10 based clinical competency psychomotor examination pursuant to subdivision 20:43:03:01(4) that
11 demonstrates evidence of psychometric soundness, including documentation of validity,
12 reliability, fidelity and fairness, allows direct observation by a board designee, and includes, at a
13 minimum, the following components:

- 14 (1) A patient-based or an equivalent simulation or manikin-based periodontal component;
- 15 (2) A patient-based or an equivalent simulation or manikin-based restorative component;
- 16 (3) A simulation or manikin-based prosthodontic component;
- 17 (4) A simulation or manikin-based endodontic component; and
- 18 (5) A remediation policy to address candidate deficiencies.

19 ~~During and within 180 days following a declared state of emergency pursuant to SDCL 34-~~
20 ~~48A-5 that hinders the operations of and access to approved clinical competency examinations,~~
21 ~~the board may approve verification of clinical competency from a dental school accredited by the~~
22 ~~American Dental Association Commission on Dental Accreditation or other board approved entity~~
23 ~~in lieu of the component required in subdivision (1).~~

1 **Source:** 45 SDR 35, effective September 19, 2018; 46 SDR 75, effective December 4, 2019;
2 47 SDR 11, effective August 12, 2020.

3 **General Authority:** SDCL 36-6A-14(20).

4 **Law Implemented:** SDCL 36-6A-14(3), 36-6A-44(4).

5 **20:43:03:04. Application for license to practice as a dentist -- Credential verification.**

6 An applicant for a license to practice as a dentist by credential verification shall submit the
7 following:

8 (1) A completed application form and fee of \$500;

9 (2) A statement from a licensed doctor of medicine, doctor of osteopathic medicine,
10 physician assistant, or certified nurse practitioner attesting to the applicant's physical and mental
11 condition;

12 (3) Verification of passage of the National Board Dental Examination Parts I and II or the
13 Integrated National Board Dental Examination administered by the Joint Commission on National
14 Dental Examinations;

15 (4) Verification of passage of a patient-based or an equivalent simulation or manikin-based
16 clinical competency psychomotor examination that has been approved by the board or passage of
17 a state examination or examinations that the board considers equivalent;

18 (5) ~~A certified letter verifying~~ Verification of the license number and status of the license
19 from the board of dentistry in each state in which the applicant is or has been licensed;

20 (6) Certified transcripts or, when approved, a certified letter from a dental school official
21 verifying that the applicant has graduated from a United States dental school accredited by the
22 American Dental Association Commission on Dental Accreditation, having obtained a doctor of
23 dental medicine or a doctor of dental surgery degree;

- 1 (7) A copy of the applicant's birth certificate or equivalent documentation;
- 2 (8) A copy of the applicant's current cardiopulmonary resuscitation (CPR) card. The board
- 3 accepts only the American Heart Association for the Healthcare Provider, the American Red Cross
- 4 for the Professional Rescuer, or an equivalent program approved by the board;
- 5 (9) A recent photograph; and
- 6 (10) Completed fingerprint cards necessary to conduct a state and federal criminal
- 7 background check.

8 An applicant for a license to practice as a dentist shall pass a written examination

9 administered by the board on the relevant administrative rules and statutes. A cut score of 70

10 percent is considered passing.

11 To be considered, a complete application and all supporting documentation must be received

12 at least 30 days before the board meeting. If requested, an applicant for licensure by credential

13 verification shall appear for a personal interview conducted by the board on a date set by the board.

14 **Source:** SL 1975, ch 16, § 1; 6 SDR 87, effective March 2, 1980; 8 SDR 95, effective

15 February 15, 1982; 12 SDR 151, 12 SDR 155, effective July 1, 1986; 19 SDR 32, effective

16 September 6, 1992; 26 SDR 37, effective September 20, 1999; 38 SDR 172, effective April 25,

17 2012; 45 SDR 35, effective September 19, 2018; 47 SDR 11, effective August 12, 2020.

18 **General Authority:** SDCL 36-6A-14(20), 36-6A-47, 36-6A-50(18).

19 **Law Implemented:** SDCL 36-6A-14(3), 36-6A-47, 36-6A-50(18).

20 **20:43:03:08. Application for license to practice as a dental hygienist -- Requirements.** An

21 applicant for a license to practice as a dental hygienist shall submit the following:

- 22 (1) A completed application form and a fee of \$100;

1 (2) Certified transcripts or, when approved, a certified letter from a dental hygiene school
2 official verifying that the applicant has graduated from a United States dental hygiene program
3 accredited by the American Dental Association Commission on Dental Accreditation, having
4 obtained a dental hygiene degree;

5 (3) Verification of passage of the National Board Dental Hygiene Examination;

6 (4) Verification of passage of a board approved patient-based or an equivalent simulation
7 or manikin-based clinical competency psychomotor examination that meets the criteria outlined in
8 § 20:43:03:09 within the five years preceding application ~~or, if the clinical competency~~
9 ~~examination was passed prior to July 1, 2018, and within the five years preceding application,~~
10 ~~verification of passage of the Central Regional Dental Testing Service examination or Western~~
11 ~~Regional Examining Board examination.~~ An applicant who fails any combination of board
12 approved clinical competency examinations three times is not eligible for licensure in South
13 Dakota;

14 (5) ~~A certified letter verifying~~ Verification of the license number and status of the license
15 from the board of dentistry in each state in which the applicant is or has been licensed, if applicable;

16 (6) A copy of the applicant's birth certificate or equivalent documentation;

17 (7) A recent photograph; and

18 (8) A copy of the applicant's current cardiopulmonary resuscitation (CPR) card. The board
19 accepts only the American Heart Association for the Healthcare Provider, the American Red Cross
20 for the Professional Rescuer, or an equivalent program approved by the board.

21 An applicant for a license to practice as a dental hygienist shall pass a written examination
22 administered by the board on the relevant administrative rules and statutes. A cut score of 70
23 percent is considered passing.

1 To be considered, a complete application and all supporting documentation must be
2 received at least 30 days before the board meeting. If requested, an applicant shall appear for a
3 personal interview conducted by the board on a date set by the board.

4 **Source:** 45 SDR 35, effective September 19, 2018; 47 SDR 11, effective August 12, 2020.

5 **General Authority:** 36-6A-14(3)(20), 36-6A-44.2, 36-6A-50(14).

6 **Law Implemented:** 36-6A-14(3), 36-6A-44.2.

7 **20:43:03:10. Application for license to practice as a dental hygienist -- Credential**
8 **verification.** An applicant for a license to practice as a dental hygienist by credential verification
9 shall submit the following:

10 (1) A completed application form and fee of \$200;

11 (2) A statement from a licensed doctor of medicine, doctor of osteopathic medicine,
12 physician assistant, or certified nurse practitioner attesting to the applicant's physical and mental
13 condition;

14 (3) Verification of passage of the National Board Dental Hygiene Examination;

15 (4) Verification of passage of a patient-based or an equivalent simulation or manikin-based
16 clinical competency psychomotor examination that has been approved by the board or passage of
17 a state examination or examinations that the board considers equivalent;

18 (5) ~~A certified letter verifying~~ Verification of the license number and status of the license
19 from the board of dentistry in each state in which the applicant is or has been licensed;

20 (6) Certified transcripts or, when approved, a certified letter from a dental hygiene school
21 official verifying that the applicant has graduated from a United States dental hygiene school
22 accredited by the American Dental Association Commission on Dental Accreditation, having
23 obtained a dental hygiene degree;

- 1 (7) A copy of the applicant's birth certificate or equivalent documentation;
- 2 (8) A copy of the applicant's current cardiopulmonary resuscitation (CPR) card. The board
- 3 accepts only the American Heart Association for the Healthcare Provider, the American Red Cross
- 4 for the Professional Rescuer, or an equivalent program approved by the board; and
- 5 (9) A recent photograph.

6 An applicant for a license to practice as a dental hygienist shall pass a written examination

7 administered by the board on the relevant administrative rules and statutes. A cut score of 70

8 percent is considered passing.

9 To be considered, a complete application and all supporting documentation must be

10 received at least 30 days before the board meeting. If requested, an applicant shall appear for a

11 personal interview conducted by the board on a date set by the board.

12 **Source:** 45 SDR 35, effective September 19, 2018; 47 SDR 11, effective August 12, 2020.

13 **General Authority:** SDCL 36-6A-14(20), 36-6A-47.1, 36-6A-50(18).

14 **Law Implemented:** SDCL 36-6A-14(3), 36-6A-47.1, 36-6A-50(18).

15 **20:43:03:09. Application for license to practice as a dental hygienist -- Clinical**

16 **competency examination.** The board may approve a patient-based or an equivalent simulation or

17 manikin-based dental hygiene clinical competency psychomotor examination pursuant to

18 subdivision 20:43:03:08(4) that demonstrates evidence of psychometric soundness, including

19 documentation of validity, reliability, fidelity and fairness, allows direct observation by a board

20 designee, and includes, at a minimum, the following components:

- 21 (1) Pocket depth detection;
- 22 (2) Calculus detection and removal;
- 23 (3) An intra oral and extra oral assessment; and

1 (4) A remediation policy to address candidate deficiencies.

2 ~~During and within 180 days following a declared state of emergency pursuant to SDCL 34-~~
3 ~~48A-5 that hinders the operations of and access to approved clinical competency examinations,~~
4 ~~the board may approve verification of clinical competency from a dental hygiene school accredited~~
5 ~~by the American Dental Association Commission on Dental Accreditation or other board approved~~
6 ~~entity in lieu of an examination otherwise required in this section.~~

7 **Source:** 45 SDR 35, effective September 19, 2018; 46 SDR 75, effective December 4,
8 2019; 47 SDR 11, effective August 12, 2020.

9 **General Authority:** SDCL 36-6A-14(20), 36-6A-44.2.

10 **Law Implemented:** SDCL 36-6A-14(3), 36-6A-44.2(4).

11 **NITROUS OXIDE SEDATION AND ANALGESIA:**

12 **20:43:09:06. Nitrous oxide sedation and analgesia permit requirements -- Dental**
13 **hygienists and registered dental assistants.** The board may issue a permit to a dental hygienist
14 or a registered dental assistant to administer nitrous oxide sedation and analgesia to dental patients
15 on an outpatient basis under the ~~direct~~ supervision of a dentist if the dental hygienist or registered
16 dental assistant:

17 (1) Is certified in administering basic life support by the American Heart Association for the
18 Healthcare Provider, the American Red Cross for the Professional Rescuer, or an equivalent
19 program approved by the board; and

20 (2) Has successfully completed a board approved educational course that substantially meets
21 the objectives and content as described in Part 4 of the Guidelines for Teaching Pain Control and
22 Sedation to Dentists and Dental Students and either:

23 (A) Completed the course within 13 months before application for a permit; or

1 (B) Completed the course more than 13 months before application, has legally administered
2 nitrous oxide sedation and analgesia for a period of time during the three years preceding
3 application, and provides written documentation from a dentist that has employed or supervised
4 the applicant, attesting to the current clinical proficiency of the applicant to administer nitrous
5 oxide sedation and analgesia.

6 A dental hygienist or registered dental assistant with a permit to administer nitrous oxide
7 sedation and analgesia may administer nitrous oxide sedation and analgesia to dental patients under
8 the direct supervision of a dentist.

9 A dental hygienist with a permit to administer nitrous oxide sedation and analgesia may
10 administer nitrous oxide sedation and analgesia to dental patients 18 years and older under the
11 general supervision of a dentist if the supervising dentist has authorized such and authorization is
12 included in the patient's record. If there has been a relevant change in the patient's medical history
13 since the authorization, the dental hygienist must consult with the dentist before administering
14 nitrous oxide sedation and analgesia. The supervising dentist shall ensure a written emergency
15 response protocol is in place for patients receiving nitrous oxide sedation and analgesia by the
16 dental hygienist under general supervision.

17 A dental hygienist or registered dental assistant that administers nitrous oxide sedation and
18 analgesia must use equipment with fail-safe features, a 30-percent-minimum oxygen flow, and a
19 scavenger system.

20 **Source:** 19 SDR 32, effective September 6, 1992; 32 SDR 188, effective May 15, 2006; 37
21 SDR 131, effective January 6, 2011; 42 SDR 19, effective August 17, 2015; 42 SDR 83, effective
22 December 3, 2015; 48 SDR 62, effective December 13, 2021.

23 **General Authority:** SDCL 36-6A-14(20).

1 **Law Implemented:** SDCL 36-6A-14(1)(3)(7)(10)(13)(14)(22), 36-6A-40.

2 **Reference:** "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental
3 Students," 2016 Edition, American Dental Association. Copies may be obtained from the
4 American Dental Association at www.ada.org free of charge.

5 **LOCAL ANESTHESIA**

6 **20:43:09:06.01. Local anesthesia permit requirements -- Dental hygienists.** The board
7 may issue a permit to a dental hygienist to administer local anesthesia to dental patients on an
8 outpatient basis under the ~~direct~~ supervision of a dentist if the dental hygienist has met the
9 following requirements:

10 (1) Is certified in administering basic life support by the American Heart Association for
11 the Healthcare Provider, the American Red Cross for the Professional Rescuer, or an equivalent
12 program approved by the board; and

13 (2) Has successfully completed a board approved educational course on local anesthesia
14 from an accredited dental or dental hygiene school and either:

15 (a) Completed the course within thirteen months prior to application; or

16 (b) Completed the course more than thirteen months prior to application, has legally
17 administered local anesthesia for a period of time during the three years preceding application, and
18 provides written documentation from a dentist that has employed or supervised the applicant,
19 attesting to the current clinical proficiency of the applicant to administer local anesthesia.

20 A dental hygienist with a permit to administer local anesthesia may administer local
21 anesthesia to dental patients under the direct supervision of a dentist.

22 A dental hygienist with a permit to administer local anesthesia may administer local
23 anesthesia to dental patients 18 years and older under the general supervision of a dentist if the

1 supervising dentist has authorized such and authorization is included in the patient's record. If
2 there has been a relevant change in the patient's medical history since the authorization, the dental
3 hygienist must consult with the dentist before administering local anesthesia. The supervising
4 dentist shall ensure a written emergency response protocol is in place for patients receiving local
5 anesthesia by the dental hygienist under general supervision.

6 **Source:** 37 SDR 131, effective January 6, 2011; 42 SDR 83, effective December 3, 2015.

7 **General Authority:** SDCL 36-6A-14(1)(3)(7)(10)(13)(14).

8 **Law Implemented:** SDCL 36-6A-14(1)(3)(7)(10)(13)(14)(22), 36-6A-40.

9 **COLLABORATIVE SUPERVISION - REPORTING**

10 **CHAPTER 20:43:10**

11 **COLLABORATIVE SUPERVISION**

12 Section

13 20:43:10:01 Practice settings.

14 20:43:10:02 Qualifications.

15 20:43:10:03 Application for registration.

16 20:43:10:04 Collaborative agreement.

17 20:43:10:05 ~~Reporting requirements~~ Repealed.

18 20:43:10:06 Termination of agreement.

19 **20:43:10:05. ~~Reporting requirements.~~** ~~Each dental hygienist who has rendered services~~
20 ~~under collaborative supervision must complete a summary report and submit the information to~~
21 ~~the board at the completion of a program or, in the case of an ongoing program, annually.~~ Repealed.

22 **Source:** 38 SDR 172, effective April 25, 2012.

23 **General Authority:** ~~SDCL 36-6A-40.2.~~

1 — **Law Implemented:** SDCL 36-6A-40.2.

Stakeholder Feedback Form (Draft Advertising/Specialty Advertising and Clinical Competency Examination Administrative Rules)

Please complete the following form to submit feedback on draft revisions to the Advertising/Specialty Advertising Administrative Rules. The draft revisions can be found at <https://www.sdboardofdentistry.org>. Feedback must be submitted by 5pm Central on December 12, 2022. Following that date, the feedback will be reviewed and the draft may be modified accordingly. Thank you for your feedback and participation in this process.

Name: *

Denis Miller, DDS, MBA

If you are representing an organization, entity, or person other than yourself - please list that organization, entity, or person below:

Email: *

Telephone: *

1a. Page number(s) and Section number(s) that feedback pertains to. Please include only *
one area for feedback per question.

20:43:04:01

1b. Feedback to content of page(s) and section(s) referenced above: *

Dear South Dakota State Board of Dentistry & Board Members,

I believe the board's proposal treats all specialist training (including Implantology) equally under the equal protection clause of the 14th amendment, and it does not infringe on commercial free speech rights. The Board's proposal is also consistent with professional education to become a dentist, there is no trade organization, weekend CE, completing a test pathway to becoming a dentist. You either meet the educational standard, or you do not.

The ABOI has not been able to show how 670 weekend CE hours, potentially over 12 years, is equivalent to a 2 year (3,800hr) full-time Implantology residency. Therefore, the ABOI does not meet the standard of being an ABDS member board and is not bona fide.

Until mid-2022, AAID/ABOI advertised CERP accredited CE "maxi-courses" as valid curriculum towards obtaining a specialty certificate or degree through the ABOI. This action is specifically prohibited by CERP provider agreements and would invalidate the use of CE by any practitioner seeking specialty recognition via ABDS/ABOI/AAID. ABDS/ABOI/AAID have recently stopped advertising their use of CERP CE and instead advertise AGD/PACE certification, which does not have this restriction.

The AAID is a trade organization and not a bona fide department of education (DOE) accredited educational institution; therefore the AAID cannot grant a certificate of specialty training.

ABOI is a testing agency and not a bona fide DOE accredited educational institution, therefore the ABOI cannot grant a certificate of specialty training. Completing a residency makes you a specialist, passing a test does not.

The AAID/ABOI have created an inversion of what happens in dental school and in dental specialty education; by making a test and intermittent CE the defining feature for what it takes to become a specialist. It is opposite to the way dental specialty education is executed in all dental specialties (including Implantology): competitive vetting prior to matriculation, full-time residency with full-time faculty supervision for a minimum of 2yrs, no test is required to receive a certificate of completion of residency, able to practice as a specialist without becoming board certified within your specialty, may choose to attempt to become a board certified diplomate following completing of residency (which includes written & oral testing).

You are to be commended for your good work and remaining steadfast to the full-time residency educational standard for specialty education.

Sincerely,

Denis Miller, DDS, MBA,

Louis George, DMD

Jason Leet, DDS



December 12, 2022

Dear South Dakota Board of Dentistry,

Pediatric Dentists:
 Brent J. Bradley DDS*
 Kelli J. Jobman DDS*
 Karli M. Williams DDS*
 Stephany P. Liu DDS
 (*Owner)
General Dentist:
 Carla L. Heino DDS

As board certified specialists in South Dakota, we continue to have concerns with the SD Board of Dentistry's proposed rules changes regarding "Representation of Specialty practice and advertising". While we understand the difficult situation the SD Board is in with trying to prevent a lawsuit by dentists proposing to advertise as Implantologists, our hope is that a balance can be found to protect the public. We already have patients' families confused by misleading advertising on the distinction of a specialist vs non-specialist and our hope is that we don't further erode that distinction. While a patient should be able to see any provider they choose, it is imperative that the language we as providers advertise with is clear and not misleading. Our concerns are the following:

Advertising to the Public:

- General dentists should have to identify themselves as such to the public if they are practicing in a specialty practice.
- The word "emphasis" is confusing to the public. The average patient would not understand the difference between a general dentist practicing with an "emphasis" in pediatric dentistry or orthodontics and a specialist with 2-4 additional years of training and experience.

While we appreciate the additional language surrounding specialists and having a two year full-time post-doctoral program, we still feel the rules are diluting the meaning of specialists and places an undue burden on the patient to confirm actual specialists. We ask that you consider strengthening language in the previous areas to better help protect the public and allow them the opportunity to choose a specialty provider without confusion.

Sincerely,

Dr. Brent J Bradley

Dr. Kelli J. Jobman

Dr. Karli M. Williams

700 Sheridan Lake Road
 Rapid City, SD 57702-2407
 Phone: (605) 341-3068
 Fax: (605) 341-5757
 Email: info@bhpdsc.com
 Website:
 bhpediatricdentistry.com



South Dakota State Board of Dentistry
P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079
Ph: 605-224-1282 Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com www.sdboardofdentistry.org

Application for Continuing Education Course Honorarium

Background

It is the policy of the Board to allocate resources, when available, to fund continuing education courses that further the mission of the Board.

Procedure

- Application Deadline: December 13, 2022.
Applications received after this deadline will not be considered.
- Submit Applications to: South Dakota State Board of Dentistry
PO Box 1079
Pierre, SD 57501
Or electronically to contactus@sdboardofdentistry.com
- Fund Amount: The Board will fund up to \$7,500 in total during this request cycle.

Criteria for Consideration

- ✓ The sponsor organization must meet the applicable state contractor requirements.
- ✓ The course must further the mission of the Board.
- ✓ Preference will be given to courses that impact a large number of licensees or registrants and courses provided in partnership with other professional associations.
- ✓ Any funded course must be open to all dental professionals free of charge.

If an application is approved:

- ✓ The sponsor organization must be prepared to complete the state contract process.
- ✓ The sponsor organization must note in its promotional materials the following: *“The honorarium for this speaker is being funded by the South Dakota State Board of Dentistry. This course is open to all dental professionals free of charge. The content and opinions expressed during this course do not necessarily reflect the views of nor are they endorsed by the South Dakota State Board of Dentistry.”*
- ✓ Following the course date, the sponsor organization must submit a brief report, including how many South Dakota licensees and/or registrants attended.

Course Information

Title of Course: *Detailed course outline must be attached:*

(1) Periodontal Debridement: How to get predictable results and work smarter. (2) Choregraphing the perfect maintenance visit

Speaker(s): *Curriculum Vitae or Resume must be attached:*

Timothy G. Donley, DDS MSD

Date(s) of Course: Friday, May 19, 2023

Course Location: Primier Center, Sioux Falls, SD

Honorarium Amount requested: \$ 7500.00

Applicant Information

Sponsor Organization Name:

South Dakota Dental Association

Sponsor Organization Contact:

Name: Melissa Afdahl, Event Manager

Address: 804 N. Euclid Ave. Ste. 103, Pierre, SD 57501

Phone: 605-609-1152

Email: melissa@sddental.org

Partner Organization Name (if applicable):

Application Questions

Please type or print clearly; use additional paper if necessary.

1. Does the sponsor organization meet the requirements to serve as a state contractor?

Yes

No

2. Please list the course objectives:

Periodontal Debridement: Learn approach and how to incorporate it into your existing routines. Which pt.'s, which sites, what to use, how to use it properly, how to tell if it worked and what to do next if it did not. All will be covered in a way that will make it as easy as possible for you to work smarter the next day back in the office.

Choreographing the perfect visit: will leave this course with step by step exam protocol, learn the new goal of dental care and how to communicate it effectively to every pt. Learn a routine that allows you to indentify all pt. needs and to motivate pt.'s to follow through. Leave with a clear understanding of what to look for, what to say, ask, and to do to make the recall visit more productive.

3. What is the target population?

Periodontal Debridement: Dentists and Hygienists

Choreographing the perfect visit: the whole staff team

4. What is the anticipated number of *South Dakota* licensees and/or registrants that will attend this course?

- a. Dentists: 150
b. Dental Hygienists: 100
c. Registered Dental Assistants: 100
d. Radiographers: _____
e. Other Dental Office Staff: 50

5. List other possible sources of financial support for this course:

N/A

Doctor and hygienist are strongly encouraged to attend together

Choreographing the perfect maintenance visit.

Course Description

Almost all of dentistry is bought and sold during the hygiene visit. Yet too many of us get caught up in the typical outdated recall mindset. There are now important reasons to help patients do more than just keep their teeth. The new goal of dentistry gives doctor and hygienist new opportunities to identify dental needs in patients and then motivate them to follow through. Doctor and hygienist will leave this course with a step-by-step exam protocol which makes it as easy as possible for both to reach their practice goals. You will learn the new goal of dental care and learn how to communicate it effectively to every patient. You will learn a routine that allows you to identify all patient needs and to motivate those patients to follow through. You will leave with a clear understanding of what to look for, what to say, what to ask and what to do to make the recall visit more productive for everyone. This is a great chance to get everyone in the office on the same page.

BIO:

Timothy Donley DDS MSD is currently in the private practice of Periodontics and Implantology in Bowling Green, KY. Dr. Donley is a sought-after speaker whose courses are always highly rated. His forte lies in taking the latest research and packaging it in a way that makes sense. Dentistry Today recently listed him among its Leaders in Continuing Education. Dr. Donley co-authored the first-ever comprehensive textbook on ultrasonic debridement. He lectures and publishes frequently on topics of interest to clinical dentists and hygienists.

Periodontal Debridement: How to get predictable results & work smarter

Course Description

The old ways do not work. We are in the age of serious dental medicine. Cleaning up patients the best you can using what you “deeply believe in” no longer cuts it! Consistently adequate debridement is really important for certain patients. We now know which approach maximizes the chance that your debridement will work. You will learn that approach and how to incorporate it into your existing routines. Which patients, which sites, what to use, how to use it properly, how to tell if it worked and what to do next if it did not: all of this will be covered in a way that will make it as easy as possible for you to work smarter the next day back in the office.

Timothy Donley DDS MSD is currently in the private practice of Periodontics and Implantology in Bowling Green, KY. Dr. Donley is a sought-after international speaker whose courses are always highly rated. His forte lies in taking the latest research and packaging it in a way that makes sense. Dentistry Today recently listed him among its Leaders in Continuing Education. Dr. Donley co-authored the first-ever comprehensive textbook on ultrasonic debridement. He lectures and publishes frequently on topics of interest to clinical dentists and hygienists.