24.31.01 - RULES OF THE IDAHO STATE BOARD OF DENTISTRY

001. The rule therapist		PE. titute the minimum requirements for licensure and regulation of dentists, dental hygienists, a	nd den	tal)
	t to Se	DRPORATION BY REFERENCE. Section 67-5229, Idaho Code, this chapter incorporates by reference the <u>following most release</u> available on the Board's website:	scent a (nd)
	01.	Professional Standards.	()
	a.	AAOMS, Office Anesthesia Evaluation Manual, 8th Edition, 2012.	()
	b.	CDC, Guidelines for Infection Control in Dental Health-Care Settings, 2003.	()
	e.	ADA, Guidelines for Use of Sedation and General Anesthesia by Dentists.		
	d.	ADA, Principles of Ethics, Code of Professional Conduct and Advisory Opinions, Januar	y 2009. (.)
	e.	ADHA Hygienists' Association, Standards for Clinical Dental Hygiene Practice, 2016.	()
003.	ABB	REVIATIONS.		
	01.	ADA. American Dental Association.	()
	02.	ADHA. American Dental Hygienists Association.	()
	03.	AAOMS. American Association of Oral and Maxillofacial Surgeons.	()
	04.	BLS. Basic Life Support.	()
	05.	CDC. Centers for Disease Control and Prevention.	()
	06.	CODA. Commission on Dental Accreditation.	()
	07.	INBDE. Integrated National Board Dental Examination		
	08.	NBDHE. National Board Dental Hygiene Examination.	()

01. REQUIREMENTS FOR LICENSURE.

a. Applicants for licensure must furnish proof of graduation from a program in dentistry, dental hygiene, or dental therapy accredited by CODA at the time of applicant's graduation.

b. must maintain cu	Applicants for initial licensure will provide proof of current BLS certification. Practicing licensurrent BLS certification.	sees
02.	EXAMINATIONS FOR LICENSURE.	
a. INBDE or NBD	Written Examination . Applicants for dentistry and dental hygiene are required to pass HE. Dental therapists must successfully complete a board-approved written examination. (the
dental hygiene examination res	Clinical Examination. Applicants for general dentistry, dental hygiene or dental therapy a Board-approved clinical examination upon such subjects as specified by the Board. Applicants and dental therapy must pass a board-approved clinical local anesthesia examination. Clinults will be valid for licensure by examination for a period of (5) five years from the data letion of the examination.	s for nical
03. The Board may §	DENTAL HYGIENISTS – LICENSE ENDORSEMENTS. grant license endorsements to qualified dental hygienists as follows: ()
of a dentist. Per restoration into occlusion of the	Restorative Endorsement . Notwithstanding any other provision of these rules, a qualified deg a restorative endorsement may perform specified restorative functions under the direct supervisormissible restorative functions under this endorsement are limited to the placement of a dia a tooth prepared by a dentist and the carving, contouring and adjustment of the contacts restoration. Upon application, the Board may grant a restorative endorsement to a person holding ve status dental hygienist's license issued by the Board who provides satisfactory proof that ements are met:	sion irect and g an
i. and	The person has successfully completed a clinical restorative examination approved by the Bo	ard;
ii.	The person has not been disciplined by the Board or another licensing authority. ()
immediately exp	Renewal . A person meeting all other requirements for renewal of a license to practice described to renewal of a license endorsement for the effective period of the license. An endorsement size and is cancelled at such time as a person no longer holds an unrestricted active status described by the Board.	nent
04.	LICENSURE OF DENTAL SPECIALISTS.	
	Requirements for Specialty Licensure. Each applicant for specialty licensure must he a CODA accredited dental school and successfully completed a CODA accredited postdoct education program of at least two full-time academic years.	
b. licensure as a spe	Examination . Examination requirements for applicants who have met the requirements ecialist:	for)
i.	Passed a general licensure examination acceptable to the Board or, ()
ii. examination or,	If passed a general licensure examination not acceptable to the Board, passed a speci-	alty
iii. specialty licensu	Be certified by the American Board of that particular specialty as of the date of application re.	for
05	MODED ATE CEDATION CENEDAL ANECTHECIA AND DEED CEDATION	

05. MODERATE SEDATION, GENERAL ANESTHESIA AND DEEP SEDATION.

Dentists licensed in the state of Idaho may administer moderate sedation, general anesthesia, or deep sedation following the ADA guidelines incorporated by reference pursuant to these rules once they have obtained a permit from the Board. A dentist may not administer moderate sedation to children under sixteen (16) years of age and one

hundred (100) pounds unless they have qualified for and been issued a moderate parenteral sedation permit. A moderate enteral sedation permit authorizes dentists to administer sedation by either enteral or combination inhalation-enteral routes of administration. A moderate parenteral, general anesthesia, or deep sedation permit authorizes a dentist to administer sedation by any route of administration. The qualified dentist is responsible for the sedative management, adequacy of the facility and staff, diagnosis and treatment of emergencies related to the administration of moderate sedation, general anesthesia, or deep sedation and providing the equipment, drugs and protocol for patient rescue.

- **a. Training Requirements.** For Moderate Sedation Permits, completion of training in the administration of moderate sedation to a level consistent with requirements established by the Board within the five (5) year period immediately prior to the date of application. For General Anesthesia and Deep Sedation Permits, completion of an advanced education program accredited by CODA that affords comprehensive training necessary to administer and manage deep sedation or general anesthesia within the five (5) year period immediately preceding the date of application. The five (5) year requirement is not applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the application date. Qualifying training courses must be sponsored by or affiliated with a dental school accredited by CODA, or be approved by the Board.
- b. Permit Renewal. Before the expiration date of a permit, the board will provide notice of renewal to the licensee. Failure to timely submit a renewal application and permit fee shall result in expiration of the permit and termination of the licensee's right to administer sedation. Failure to submit a complete renewal application and permit fee within thirty (30) days of expiration of the permit shall result in cancellation of the permit. Renewal of the permit will be required every five (5) years. Proof of a minimum of twenty-five (25) continuing education credit hours in sedation which may include training in medical/office emergencies will be required to renew a permit.

c. Reinstatement. A dentist may apply for reinstatement of a canceled or surrendered permit issued by the Board within five (5) years of the date of the permit's cancellation or surrender. Applicants for reinstatement of a sedation permit must satisfy the facility and personnel requirements and verify they have obtained an average of five (5) continuing education credit hours in sedation for each year subsequent to the date upon which the permit was canceled or surrendered. A fee for reinstatement will be assessed.

06. CONTINUING EDUCATION REQUIREMENTS.

A licensee renewing an active status license shall report 30 oral health/health-related continuing education hour credits to the Board of verifiable CE or volunteer practice.

101. -- 199. (RESERVED)

200. PRACTICE STANDARDS

01. DENTAL HYGIENISTS – PRACTICE.

Dental hygienists are authorized under the supervision of a licensed dentist, at the supervision level set by the dentist, to perform dental hygiene services for which they are educated and trained unless prohibited by these rules.

02. DENTAL HYGIENISTS – PROHIBITED PRACTICE.

- **a. Diagnosis and Treatment.** Definitive diagnosis and dental treatment planning. ()
- **b. Operative Preparation**. The operative preparation of teeth for the placement of restorative materials.
- **c. Intraoral Placement or Carving**. The intraoral placement or carving of restorative materials unless authorized by issuance of an extended access-restorative endorsement.
 - **d.** Anesthesia. Administration of any general anesthesia or moderate sedation. (

	e.	Final Placement . Final placement of any fixed or removable appliances.	()
	f.	Final Removal. Final removal of any fixed appliance.	()
of the to	g. ooth, or cu	Cutting Procedures . Cutting procedures utilized in the preparation of the coronal or rootting procedures involving the supportive structures of the tooth.	t porti	on)
	h.	Root Canal. Placement of the final root canal filling.	()
restorati	i. ion, whetl	Occlusal Equilibration Procedures. Occlusal equilibration procedures for any parer fixed or removable.	rosthe	tic)
	j.	Other Final Placement. Final placement of prefabricated or cast restorations or crowns.	()
rules. D	ental assi	DENTAL ASSISTANTS – PRACTICE. are authorized to perform dental services for which they are trained unless prohibited stants must be directly supervised by a dentist when performing intraoral procedures exceve care as directed by the supervising dentist.		
	a.	Prohibited Duties . A dental assistant is prohibited from performing the following duties:	()
	i.	The intraoral placement or carving of permanent restorative materials.	()
	ii.	Any irreversible procedure.	()
	iii.	The administration of any sedation or local injectable anesthetic.	()
	iv.	Removal of calculus.	()
	v.	Use of an air polisher.	()
cement	vi. or resin.	Any intra-oral procedure using a high-speed handpiece, except for the removal of ort	hodon (tic)
	vii.	Any dental hygiene prohibited duty.	()
	setting in	DENTAL THERAPISTS – PRACTICE. are authorized to perform activities specified by the supervising dentist who practices in a conformity with a written collaborative practice agreement at the supervision levels set		
	05.	DENTAL THERAPISTS – PROHIBITED PRACTICE.		
otherwi	a. se allowe	Sedation . Administration of minimal, moderate or deep sedation or general anesthesia ed by these rules;	xcept	as)
both the	b. soft and	Cutting Procedures . Cutting procedures involving the supportive structures of the tooth i hard tissues.	ncludi (ng)
calculus	c. 5.	Periodontal Therapy. Periodontal scaling and root planing, including the removal of sub	ogingiv (val)
	d.	All Extractions with Exception. All extractions except:	()
	i.	Under direct supervision.	()

ii.	Non-surgical extractions.	()
e.	Under general supervision or as specified in Section 035 rule 200.04.	()
i.	Removal of periodontally diseased teeth with class III mobility.	()
ii.	Removal of coronal remnants of deciduous teeth.	()
f.	Root Canal Therapy.	()
g.	All Fixed and Removable Prosthodontics (except stainless steel crowns).	()
h.	Orthodontics.	()

06. Limitation of Practice. No dentist may announce or otherwise hold himself out to the public as a specialist unless he has been issued a specialty license. Any individual granted a specialty license must limit his practice to the specialty(s) in which he is licensed.

07. SPECIALTY ADVERTISING.

The specialty advertising rules are intended to allow the public to be informed about dental specialties and to require appropriate disclosures to avoid misperceptions on the part of the public. An advertisement may not state that a licensee is a specialist unless the licensee has been granted a license in that specialty area of dental practice by the Board. A licensee who has not been granted a specialty license by the Board may advertise as being qualified in a recognized specialty area of dental practice so long as each such advertisement, regardless of form, contains a prominent, clearly worded disclaimer that the licensee is "licensed as a general dentist". A licensee may not advertise as being a specialist in or as specializing in any area of dental practice which is not a Board recognized and licensed specialty area unless the advertisement, regardless of form, contains a prominent, clearly worded disclaimer that the advertised area of dental practice is not recognized as a specialty area of dental practice by the Idaho Board of Dentistry. Any disclaimer in a written advertisement shall be in the same font style and size as that in the listing of the specialty area.

08. PATIENT RECORDS.

A record must be maintained for each person receiving dental services, regardless of whether any fee is charged. Records must be in the form of an acronym such as "PARQ" (Procedure, Alternatives, Risks and Questions) or "SOAP" (Subjective Objective Assessment Plan) or their equivalent. Patient records must be maintained for no less than seven (7) years from the date of last entry unless: the patient requests the records be transferred to another dentist who will maintain the records, the dentist gives the records to the patient, or the dentist transfers the dentist's practice to another dentist who will maintain the records.

09. INFECTION CONTROL.

Licensees and dental assistants must comply with current CDC infection control guidelines related to personal protective equipment, instrument sterilization, sterilizing device testing, disinfection of non-critical and clinical contact surfaces, and contaminated waste disposal. Heat sterilizing devices must be tested each calendar week in which patients are treated. Testing results must be retained by the licensee for the current calendar year and the two preceding calendar years.

10. EMERGENCY MEDICATIONS OR DRUGS.

The following emergency medications or drugs are required in all sites where anesthetic agents of any kind are administered: anti-anaphylactic agent, antihistaminic, aspirin, bronchodilator, coronary artery vasodilator, and glucose.

11. LOCAL ANESTHESIA.

Dental offices in which local anesthesia is administered to patients shall, at a minimum, have and maintain suction equipment capable of aspirating gastric contents from the mouth and pharynx, a portable oxygen delivery system including full face masks and a bag-valve mask combination capable of delivering positive pressure, oxygenenriched ventilation to the patient, a blood pressure cuff of appropriate size and a stethoscope.

12. NITROUS OXIDE/OXYGEN.

Persons licensed to practice and dental assistants trained in accordance with these rules may administer nitrous oxide/oxygen to patients. Dental offices where nitrous oxide/oxygen is administered to patients must have the following: a fail-safe nitrous oxide delivery system that is maintained in working order; a scavenging system; and a positive-pressure oxygen delivery system suitable for the patient being treated.

13. MINIMAL SEDATION.

Persons licensed to practice dentistry may administer minimal sedation to patients of sixteen (16) years of age or older-following the ADA guidelines as incorporated by reference pursuant to these rules. When the intent is minimal sedation, the appropriate dosing of a single enteral drug is no more than the maximum FDA-recommended dose for unmonitored home use. In cases where the patient weighs less than one hundred (100) pounds, or is under the age of sixteen (16) years, minimal sedation may be administered without a permit by use of nitrous oxide, or with a single enteral dose of a sedative agent administered in the dental office.

14. USE OF OTHER ANESTHESIA PERSONNEL.

A dentist who does not hold a sedation permit may perform dental procedures in a dental office on a patient who receives sedation induced by an anesthesiologist, a certified registered nurse anesthetist, or another dentist with a sedation permit. The qualified sedation provider who induces sedation will monitor the patient's condition until the patient is discharged. The sedation record must be maintained in the patient's dental record and is the responsibility of the dentist who is performing the dental procedures. A dentist who intends to use the services of a qualified sedation provider must notify the Board in writing of his intent. Such notification need only be submitted once every licensing period.

15. INCIDENT REPORTING.

Dentists must report to the Board, in writing, within seven (7) days after the death or transport to a hospital or emergency center for medical treatment for a period exceeding twenty-four (24) hours of any patient.

201. -- 299. (RESERVED)

300. DISCIPLINE

01. SUSPENSION, REVOCATION OR RESTRICTION OF SEDATION PERMIT.

The Board may, at any time and for just cause, institute proceedings to revoke, suspend, or otherwise restrict a sedation permit. If the Board determines that emergency action is necessary to protect the public, summary suspension may be ordered pending further proceedings. Proceedings to suspend, revoke or restrict a permit shall be subject to applicable statutes and rules governing administrative procedures before the Board.

02. UNPROFESSIONAL CONDUCT.

A licensee shall not engage in unprofessional conduct in the course of <u>their practice</u>. Unprofessional conduct by a person licensed under the provisions of Title 54, Chapter 9, Idaho Code, is defined as, but not limited to, any of the following:

- **a. Fraud**. Obtaining fees by fraud or misrepresentation, or over-treatment either directly or through an insurance carrier.
- **b.** Unlicensed Practice. Employing directly or indirectly any suspended or unlicensed individual as defined in Title 54, Chapter 9, Idaho Code.
 - c. Unlawful Practice. Aiding or abetting licensed persons to practice unlawfully.
- **d. Dividing Fees.** A dentist shall not divide a fee for dental services with another party, who is not a partner or associate with him in the their practice of dentistry, unless:
- i. The patient consents to employment of the other party after a full disclosure that a division of fees will be made;

ii. dentist or party.	The division is made in proportion to the services performed and responsibility assumed by each	h)
drugs to himself	Prescription Drugs . Prescribing or administering prescription drugs not reasonably necessary for ope of, providing dental services for a patient. A dentist may not prescribe or administer prescription themself. A dentist shall not use controlled substances as an inducement to secure or maintain dental in the maintenance of any person's drug addiction by selling, giving or prescribing prescription (n al
primarily based	Harassment . The use of threats or harassment to delay or obstruct any person in providing possible or actual disciplinary action, or other legal action; or the discharge of an employe on the employee's attempt to comply with the provisions of Title 54, Chapter 9, Idaho Code, or the road in such compliance.	e
g. revocation or oth	Discipline in Other States . Conduct himself.themself. in such manner as results in a suspension ner disciplinary proceedings with respect to himself.themself.t	ı,)
h.	Altering Records. Alter a patient's record with intent to deceive. ()
i. practice and stan in these rules.	Office Conditions . Unsanitary or unsafe office conditions, as determined by the customary dards of the dental profession in the state of Idaho and CDC guidelines as incorporated by reference (
	Abandonment of Patients . Abandonment of patients by licensees before the completion of int, as such phase of treatment is contemplated by the customary practice and standards of the denta state of Idaho, without first advising the patient of such abandonment and of further treatment that (al
k. where the same i	Use of Intoxicants. Practicing while under the influence of an intoxicant or controlled substance impairs the licensee's ability to practice with reasonable and ordinary care.	e)
l. patients by reaso	Mental or Physical Condition. The inability to practice with reasonable skill and safety to of age, illness, or as a result of any mental or physical condition.	o)
m. capacity without	Consent . Revealing personally identifiable facts, data or information obtained in a professional prior consent of the patient, except as authorized or required by law.	ւl)
n. accepting and pe	Scope of Practice . Practicing or offering to practice beyond the scope permitted by law, or erforming professional responsibilities that the licensee knows or has reason to know that he or sh to perform.	
	Delegating Duties . Delegating professional responsibilities to a person when the license responsibilities knows, or with the exercise of reasonable care and control should know, that such alified by training or by licensure to perform them.	
p. patient or his leg	Unauthorized Treatment. Performing professional services that have not been authorized by the cal representative.	e)
q. practice only und	Supervision . Failing to exercise appropriate supervision over persons who are authorized to the supervision of a licensed professional.	o)
r. rules, and regula	Legal Compliance . Failure to comply with any provisions of federal, state or local laws, statutes tions governing or affecting the practice of dentistry, dental hygiene, or dental therapy. (3,
s. patient for the fire	Exploiting Patients. Exercising undue influence on a patient in such manner as to exploit nancial or personal gain of a practitioner or of a third party. (a)

t.	Misrepresentation . Willful misrepresentation of the benefits or effectiveness of dental se	rvices.
	Disclosure . Failure to advise patients or their representatives in understandable term rendered, alternatives, the name and professional designation of the provider rendering to reasonably anticipated fees relative to the treatment proposed.	
v. committing any l	Sexual Misconduct . Making suggestive, sexual or improper advances toward any pewd or lascivious act upon or with any person in the course of dental practice.	person o
w. but not limited to	Patient Management . Use of unreasonable and/or damaging force to manage patients, a hitting, slapping or physical restraints.	includin (
x. the practice of de	Compliance Professional Standards . Failure to comply with professional standards appentistry, dental hygiene, or dental therapy as incorporated by reference in this chapter.	licable t (
guardian may no dental services	Failure to Provide Records to a Patient or Patient's Legal Guardian. Refusal or a tor patient's legal guardian with records within five (5) business days. A patient or patient be denied a copy of his records for any reason, regardless of whether the person has patrendered. A person may be charged for the actual cost of providing the records be ay a person be charged an additional processing or handling fee or any charge in additional processing or	ent's lega id for thout in n
failure to provide	Failure to Cooperate with Authorities . Failure to cooperate with authorities in the invented interfering with a Board investigation by willful misrepresentation of fact the information upon request of the Board, or the use of threats or harassment against any part them from providing evidence.	s, willfu
aa. verification.	Advertising. Advertise in a way that is false, deceptive, misleading or not readily s	ubject t (

301. – 399. (RESERVED)

400. FEES

01. APPLICATION AND LICENSE FEES.

Fees are as follows:

License/Permit Type	Application Fee	License/Permit Fee
Dentist/Dental Specialist	\$300	Active Status: \$375 Inactive Status: \$160
Dental Hygienist	\$150	Active Status: \$175 Inactive Status: \$85
Dental Therapist	\$200	Active Status: \$250 Inactive Status: \$125
Sedation Permit	\$300	\$300

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401. -- 999. (RESERVED)