As the curtain closes on my 5-year commitment as a Board Member, I am grateful and honored to serve as President of the Board of Dental Examiners of Alabama.

First, I would like to thank Almighty God who makes all things possible. I also want to thank my loving Family, who allowed me the time away from them to provide this service to my Profession and State, Alabama Dental Society, Alabama Dental Association, Board Members both past and present, Board Staff, and Licensed Professionals for all their support, input and dedication to the Board of Dental Examiners of Alabama.

As I close out my tenure on the Board, I must admit that being a Board Member has been very time consuming and taxing in every aspect of my life, but I will continue to make myself available to the Board and all those involved with the great profession of Dentistry in the State of Alabama.

I hope and pray we continue to foster the Spirit of Cooperation between all those who Love and Care about the future of Organized Dentistry in the State of Alabama, so the Board can continue to protect the public and better serve our practicing colleagues.

In closing, I challenge the Members of the Dental Profession to consider serving. As my friend and fellow Board Member, Dr. Bill Chesser, said "The Board needs Licensees to serve with Integrity and Common Sense."
As we finish the annual license renewal cycle here at the Dental Board office, I want to remind everyone that all dental licenses for the State of Alabama expire at midnight on New Year’s Eve. If you do not have, in hand, your 2015 Certificate, you cannot practice dentistry or dental hygiene on or after January 1st.

All licensees were mailed renewal paperwork the last week in August and renewals were due to be received by the Board no later than October 1st. Between October 1st and December 31st, the Board staff works diligently to process and issue all renewals. The renewing of a license and permits requires meticulous time-consuming work by the Board staff. So, if you have not already sent in your renewal, please do so as soon as possible to assure your ability to practice on January 1, 2015.

Every year, licensees come to the Board Office on December 31st to renew their license so they may see patients on January 2nd. Please note that the Board staff is unable to same-day-turn-around a renewal as we must first comply with all state policies and procedures before issuing a certificate.

As we are all aware, there is a serious prescription drug abuse problem in our country and, particularly, in our state. To combat this problem, law enforcement and public health agencies are working diligently to prevent diversion and abuse of prescription drugs while providing resources for prevention and treatment. Unfortunately, healthcare providers are not immune to addiction or the abuse of prescriptions. Dentists who are permitted by the DEA and the Board to prescribe controlled substances must be vigilant to assure that their prescribing authority is not being abused. In the last year, we have heard from dentists who have discovered that office personnel have procured prescription drugs by calling in and/or forging prescriptions. As you know, Alabama does not license or certify dental assistants. Unfortunately, a number of office staff calling in unauthorized prescriptions for themselves are former hygienists who, having lost their license for drug or alcohol issues, are now working as dental assistants. If you employ an assistant who “used to be a hygienist”, I urge you to contact the Board and request a license verification. This will give you accurate information regarding the individual’s date of initial licensure and the current state of any license they may hold or have held in the past. You may also request public documents related to the individual’s license. License verifications may be requested at any time by any person and provide both the employing dentist and the employee hygienist and assistant the assurance that everyone is properly licensed and any issues have been disclosed.

Concurrent with this newsletter, we are bidding farewell to two Board Members. The Board staff all wish our immediate past President, Dr. Bobby Wells, and Dr. Tom Willis (President, 2010-11) the best and thank them for their support and service during their tenures on the Board. They will both be greatly missed.

If you have any questions or need information related to your license, the Alabama Dental Practice Act, or the Board Rules, please contact us at the Board Office. We are here to help,
Code of Alabama (1975), § 34-9-18(13) has to do with dentists’ prescribing of medications. A practitioner may be subject to disciplinary action for prescribing, administering, or dispensing any controlled substance from Schedules I-V, in the Alabama Controlled Substances Act, or any drug not prescribed for dentally or facially-related conditions or necessary medication in the regular practice of his/her profession.

Basically, this means that a dentist may not prescribe any medication that does not have a direct application to the treatment of the patient for which the medication is intended.

Be sure to document all drugs prescribed in the patient’s record. Even if the prescription is done by phone, after hours, you need to list the type drug, dosage, and directions to the pharmacist in said record. If there is infection present, identify it; if there is pain, give the reason for the pain medication, (i.e.: extraction, abscess, TMJ, etc.).

While on the subject of patient records, Rule 270-x-2.22 concerns our patient records:

A dentist shall maintain complete treatment records on all patients...treatment records may include such information as the dentist deems appropriate, but shall as a minimum include:

☞ Patient’s first and last name, address, and contact information
☞ Current health history
☞ Date of treatment, type of treatment, reason for treatment, and name or initials of dentist or hygienist
☞ Records of financial transactions
☞ Applicable radiographs
☞ Correspondence between dentist and any other dentist, physician, or specialist, with applicable recommendations.
☞ Any pathology reports
☞ When appropriate, records may also include treatment plans and informed consent.

Anything you deem important should also be included. Patient dismissals, problems which may have arisen, or patient satisfaction or dissatisfaction may be noted. One cannot be too vigilant with his/her record-keeping. The information you record may one day be your best defense.
Beware — Pharmacists are Reporting Dentists
By Dr. Donna Dixon

Dentists of Alabama, please be aware that pharmacists and health insurance companies have begun reporting prescribing of drugs for non-dentally or facially related conditions to the Dental Board. When such reports occur, a Board investigation is opened, per protocol, and a Board member is assigned to supervise the investigative process. Of note, five such cases have been opened recently.

Several years ago the Dental Practice Act was modified by the Alabama Legislature to make prescribing any drug (not only controlled substances) for a non-dentally or facially related condition a violation of state law. Please see Code of Alabama (1975), § 34-9-18(a)(13) for the exact statutory language related to this situation.

Investigations regarding these types of reporting by either pharmacists or health insurance companies often necessitate an analysis of generated Prescription Drug Monitoring Program (PDMP) data and/or issuance of subpoenas for dental records. Please don’t allow yourself to become part of such an investigation. Remain cognizant of the law as it relates to your prescription writing.

Fees You May Charge for Copying Records
By Dr. Donna Dixon

Did you know that the law dictates how much you can charge for copying patient records/x-rays, etc.? Code of Alabama (1975), § 12-21-6.1 specifically states the fees and costs that you may charge to your patients for such a service.

In summary: you may not charge more than $1.00 for each page of the first 25 pages of a record copied, and not more than $0.50 for each page copied in excess of 25 pages; you may charge a search fee of $5.00 for copying the record; if the records are mailed to the person making the request, you may charge the actual charge of mailing; in addition, you may charge the actual cost of reproducing x-rays and other “special records”.

Please understand that you may not refuse to give a patient a hard copy of their records in they request them. According to Code of Alabama (1975), § 34-9-15.1, release of patient records shall not be made contingent upon the patient paying any charges or fees owed by them to you.
As dental professionals, we always strive to provide our patients with the best possible care. No matter how hard we try to provide quality care, we all know we will not "please" everyone. It is at that point when a patient, staff member, or another colleague may file a complaint with the State Dental Board.

It is not a welcoming experience to receive a letter from the Board of Dental Examiners of Alabama (BDEA) explaining that a complaint has been filed against you.

Once the complaint is received at the BDEA office, it is assigned a case number and a team leader, who is an active Dental Board member. All parties involved in the complaint are kept anonymous. At this point, the complaint goes through a full investigative process in which a letter of explanation, patient records, etc. are requested. Many times witnesses and experts are consulted to gather information about the complaint. After the leader reviews the complaint and the dental professional's response, the team leader will present the case to all the Board Members along with his/her recommendations. The BDEA will vote to either close the case or notice it for a hearing.

When a case has been noticed for a hearing, the team leader will give the attorney settlement authority parameters. The settlement parameters are used for a consent order if the dental professional would like to settle the case without a hearing. After receiving notice for a hearing, the dental professionals have several options for action:

1. Retain the services of an attorney. This is not mandatory, however, most licensees do so and, in many case, your malpractice insurance carrier will provide legal representation for you; and/or
2. Contact the Board Office with questions about the administrative hearing process.

This is a brief overview of the BDEA complaint process. If you have any questions you can call the BDEA office at 205.985.7267 or speak with a Dental Board Member.
Alabama dentistry holds a unique position of being the only state in the U.S. that educates future hygienists by a two-year university degree as well as an in-office, training program. Since 1950, the Alabama Dental Hygiene Program (ADHP) has provided Alabama dentists with a well-trained, oral care provider, the hygienist. A qualified high school graduate/GED, after two years of chairside dental assisting, and with a sponsoring dentist/instructor, may apply to attend a rigorous academic and clinical program to become a hygienist. The one year program, offered by the Board and taught at the UAB School of Dentistry (SOD), consists of nine weekend sessions over the period of a year while the student works fulltime as a student dental hygienist. Students are taught the didactic and clinical skills required by the Dental Practice Act. Upon successful completion of the course, passing the State Board Examination, which consists of a written examination and a clinical demonstration of their clinical knowledge and skills, and passing an examination on Alabama Law, applicants can apply for a dental hygiene license to provide hygiene care to patients in Alabama.

The ADHP provides the basic skills and techniques for treating patients; but the core of this program is the in-office experience where these skills and techniques are refined and enhanced. The doctor is both instructor and evaluator of the performance of the student. The program’s success relies on the student being provided sufficient patients during the year for hygiene training and receiving quality guidance of his/her performance. If the student is not critiqued and evaluated he/she may not be successful when tested for clinical evaluation of knowledge and skills.

Both the dentist and the candidate will have invested time and money to participate in the ADHP. It is in the best interest of the dentist, the student, and the citizens of Alabama that the student be adequately trained. The continued success of this program rests with the dentist/sponsor, who must provide guidance and support for his/her student. The Dentists and Instructors are responsible for the skill level of future Alabama hygienists.

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When the ADHP is tested and evaluated against two-year college programs it demonstrates that the ADHP produces a highly trained clinician. If Alabama only licensed graduates of a two-year college program the supply of hygienists would decrease and the cost for hygiene care would increase. The ADHP is a program that has been successful for over forty years. If a dentist sponsors a candidate, it is his/her responsibility to help this candidate be successful.

Additional information about the ADHP can be obtained from the Board of Dental Examiners of Alabama website [www.dentalboard.org](http://www.dentalboard.org), by calling (205) 985-7267, ext. 226, or by emailing Hilda@dentalboard.org.

**Did you know?**

*Some things do change!*

Those yellow or green or blue “directories” that you have are not current. The Alabama Dental Practice Act and Board Rules may no longer be as you remember.

Check out the Alabama Dental Practice Act and Board Rules at the top of our home page [www.dentalboard.org](http://www.dentalboard.org).
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s I come to the end of my first year on the Alabama Board of Dental Examiners, I find that many of the dentists in our state are not aware of many parts of the Dental Practice Act. One of the basic mistakes comes from failure to notify the board and the DEA about a change of address. Code of Alabama states:

§ 34-9-14. Change of address generally. Every licensed dentist, dental hygienist, and expanded duty dental assistant upon changing his or her place of practice, whether from one building, city, street address, or county to another, shall within 30 days thereafter furnish the secretary/treasurer of the board with the new address. The secretary-treasurer shall acknowledge receipt of change of address within 30 days.

The Federal Drug Enforcement Administration (DEA) should also be notified of any changes in your contact information. One of the biggest oversights occurs when it is time to renew your DEA license. DEA’s mailed renewal notices are not forwarded, therefore it is necessary to notify the DEA of your change of address and to be aware of the expiration date of your DEA license. Another area of misunderstanding is in not knowing the procedures when one has been noticed for a violation of the Dental Practice Act. Much frustration can often be avoided by calling the Board office to get answers to your questions. Do not hesitate to contact the Board office to discuss any questions or misunderstanding about the Dental Practice Act.

A third area of misunderstanding is the improper prescribing of medication. The Dental Practice Act states that a dentist may be disciplined if the following occurs:

§ 34-9-18 (a)13 Grounds for disciplinary actions. Pertaining to licensed dentists only, the prescribing, administering or dispensing of any controlled substances enumerated in Schedules I through V contained in the Alabama Uniform Controlled Substances Act, Chapter 2 of Title 20, or any amendment or successor thereto, or any drug not prescribed for any dentally or facially related condition, and/or for any necessary medication during the course of treatment rendered directly by the dentist, for any person not under his or her treatment in the regular practice of his or her profession.

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It is important that you keep accurate records of the prescriptions you write. It is also prudent to be aware of any prescribing which might be called in by staff members because you are responsible for any misuse in your office.

The Board is available to assist you if you will call with any areas of misunderstanding. You need to keep up with any changes in the Practice Act. Information is available online at [http://www.dentalboard.org](http://www.dentalboard.org).

Through the Alabama Dental Professionals Wellness Committee, the Board of Dental Examiners of Alabama helps dozens of dentists and dental hygienists each year. We are proud of the Board’s continuing support of its program and its oversight.

An important “subset” of the Board’s Wellness Committee is the Deferral Program. Through this program, if a dental health professional identifies himself/herself as needing our help, and are willing to enter this program, they are not publicly reported in any way! Of note, no reporting is made to third party carriers (insurance companies), the National Practitioner Data Bank, or any other institutions/entities. If the self-reporting dental professional successfully completes the program, his/her public record does not reflect any completed treatment or any notations that might adversely affect the individual’s practice.

As you might imagine, there are huge favorable implications involved here, and this program has become very popular in recent years. The Board has extended every courtesy toward these individuals, and its reward is watching the steady progression of the licensee from impairment to recovery.

As always, I urge each of you to self-report your problems. The consequences are far less severe when you reach out for help! If I can help in any way, you may call the Dental Hotline (800) 818-3880 or you may always reach me at my office (251)866-5585.

Remember, peers helping peers: That is the way it has always worked.
Greetings Alabama Dental Hygienists! As I reflect on my four years as your dental hygiene representative on the Board of Dental Examiners of Alabama, I am reminded that in October 2015 my five-year term will end. It is time for you, as a hygienist, to start thinking about serving in this capacity.

You should declare your candidacy in early 2015 and campaign throughout the state to introduce yourself to the hygienists of the state. Visit the revised Alabama Dental Practice Act on our website www.dentalboard.org and start learning how the Statutes and Rules relate to you and your practice of Dental Hygiene. You have until July 1, 2015 to get your paperwork in order sent to the Board of Dental Examiners. More information can be found in the Practice Act in the Statutes section of 39-9-40 (b) 2. Serving as a Board Member is an intense and time consuming obligation that has many rewards. You will meet and work with professionals in the testing and regulatory areas of this position as well as in the Alabama Dental Hygiene Program.

Regrettably, this past year has been filled with the suspension or revocation of many hygienists’ licenses due to drug and alcohol impairment. Please do not let yourself get into this predicament; it is a costly and devastating situation. Our most disturbing case was a hygienist who had actually been practicing dentistry in the homes of senior citizens, administering anesthesia, performing extraction of teeth, delivering dentures, and offering oral hygiene procedures at much reduced fees for cash. What were they thinking – the hygienist as well as the patients that they had deceived!?

If you are an established dental hygienist licensed before 2012, you are beginning your second year of your biannual CE cycle of October 1, 2013 through September 30, 2015. You will have to affirm that you have obtained 24 hours of CE credits when you renew next year in 2015.

The Dental Hygiene Board Examination administered in June was very disappointing. Over 50% of the ADHP and other licensing candidates failed the examination administered by CITA. The Board was certainly concerned, and after much checking

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and reviewing of grades and graders as well as other factors, accepted the results. The retake examination in August was much better with only 5 failures of the CITA Examination.

The sum of these failures, however, was a wakeup call for the BDEA. We have taken a close look at our Alabama Dental Hygiene Program and discussed many things. You will be seeing some changes in the future. The Board has appointed a committee to review the program and make recommendations. Hopefully, some of these will be implemented for the 2015-2016 class.

**Frequently Asked Questions**

- Dentists are allowed to use Botox and Dermal fillers in any area of the face to treat maxillofacial trauma, and for the treatment of diagnosed dental and orofacial problems/pain and conditions and for cosmetic purposes following proper continuing education and certification. Found in July 2010 minutes.

- The Board does not accredit Continuing Education courses. This is done by the Academy of General Dentistry or American Dental Association, the Board will accept their accreditation for Continuing Education courses. The individuals taking and/or giving any Continuing Education courses are each responsible for insuring that the course meets the requirements of Alabama Dental Practice Act 270-X-4.04.

- The Alabama Dental Practice Act does not address the length of time that you must maintain patient records, however, retention of lab prescriptions is found in Code of Alabama (1975), §34-9-21 wherein it states the length of retention for lab prescriptions is 2 years. Considering forensic value and need for defending a patient complaint, also please check with your malpractice insurance carrier and/or ADA for more guidance with this issue.

- The Board is no longer reviewing individual advertisements. To insure that your advertisement complies with the Alabama Dental Practice Act please review 270-X-4.08.

- For any address and/or phone number changes please submit your changes in writing and include your name and license number and indicate which address should be public and should have all correspondence from the Board mailed to.

- The Board opines that it is outside the scope of practice for a dentist to order a sleep study or prescribe a CPAP as a result of interpreting a sleep study. After a positive diagnosis of sleep apnea by a physician a dentist may prescribe an intra oral sleep disorder appliance. It is within the scope of practice for a dentist to fabricate an anti-snoring appliance. Found in July, 2011 minutes.