1	ENROLLED
2	COMMITTEE SUBSTITUTE
3	FOR
4	Senate Bill No. 580
5	(SENATOR STOLLINGS, original sponsor)
6	
7	[Passed April 13, 2013; in effect ninety days from passage.]
8	
9	
10	AN ACT to repeal §30-4-8a, §30-4-10a, §30-4-25, §30-4-26, §30-4-27,
11	\$30-4-28 and $$30-4-29$ of the Code of West Virginia, 1931, as
12	amended; to repeal §30-4A-6a, §30-4A-6b, §30-4A-6c, §30-4A-6d
13	and §30-4A-18 of said code; to repeal §30-4B-5, §30-4B-6,
14	\$30-4B-7 and $$30-4B-8$ of said code; to amend and reenact
15	\$30-4-1, \$30-4-2, \$30-4-3, \$30-4-4, \$30-4-5, \$30-4-6, \$30-4-7,
16	\$30-4-8, \$30-4-9, \$30-4-10, \$30-4-11, \$30-4-12, \$30-4-13,
17	\$30-4-14, \$30-4-15, \$30-4-16, \$30-4-17, \$30-4-18, \$30-4-19,
18	\$30-4-20, \$30-4-21, \$30-4-22, \$30-4-23 and \$30-4-24 of said
19	code; to amend and reenact §30-4A-1, §30-4A-2, §30-4A-3,
20	\$30-4A-4, \$30-4A-5, \$30-4A-6, \$30-4A-7, \$30-4A-8, \$30-4A-9,
21	\$30-4A-10, \$30-4A-11, \$30-4A-12, \$30-4A-13, \$30-4A-14,
22	30-4A-15, $30-4A-16$ and $30-4A-17$ of said code; and to amend
23	and reenact $\$30-4B-1$ , $\$30-4B-2$ , $\$30-4B-3$ and $\$30-4B-4$ of said
24	code, all relating to the practice of dentistry; prohibiting

1 the practice of dentistry without a license; providing other 2 applicable sections; providing definitions; providing for 3 board composition; setting forth the powers and duties of the board; clarifying rule-making authority; continuing a special 4 5 revenue account; establishing license, certification and 6 permit requirements; continuing a scope of practice; creating 7 temporary permits; establishing renewal requirements; 8 providing for exemptions from licensure; providing 9 requirements for the display of a board authorization; permitting the board to file an injunction; setting forth 10 11 grounds for disciplinary actions; allowing for specific 12 disciplinary actions; providing procedures for investigation 13 of complaints; providing for judicial review and appeals of 14 decisions; setting forth hearing and notice requirements; providing for civil causes of action; providing criminal 15 16 penalties; updating the requirements concerning the use of 17 anesthesia; updating the requirements of dental laboratory 18 services and updating references.

19 Be it enacted by the Legislature of West Virginia:

20 That §30-4-8a, §30-4-10a, §30-4-25, §30-4-26, §30-4-27, 21 §30-4-28 and §30-4-29 of the Code of West Virginia, 1931, as 22 amended, be repealed; that §30-4A-6a, §30-4A-6b, §30-4A-6c, 23 §30-4A-6d and §30-4A-18 of said code be repealed; that §30-4B-5, 24 §30-4B-6, §30-4B-7 and §30-4B-8 of said code be repealed; that

1 \$30-4-1, \$30-4-2, \$30-4-3, \$30-4-4, \$30-4-5, \$30-4-6, \$30-4-7, 2 \$30-4-8, \$30-4-9, \$30-4-10, \$30-4-11, \$30-4-12, \$30-4-13, \$30-4-14, 3 \$30-4-15, \$30-4-16, \$30-4-17, \$30-4-18, \$30-4-19, \$30-4-20, 4 \$30-4-21, \$30-4-22, \$30-4-23 and \$30-4-24 of said code be amended 5 and reenacted; that \$30-4A-1, \$30-4A-2, \$30-4A-3, \$30-4A-4, 6 \$30-4A-5, \$30-4A-6, \$30-4A-7, \$30-4A-8, \$30-4A-9, \$30-4A-10, 7 \$30-4A-5, \$30-4A-6, \$30-4A-7, \$30-4A-8, \$30-4A-9, \$30-4A-10, 7 \$30-4A-11, \$30-4A-12, \$30-4A-13, \$30-4A-14, \$30-4A-15, \$30-4A-16 8 and \$30-4A-17 of said code be amended and reenacted; and that 9 \$30-4B-1, \$30-4B-2, \$30-4B-3 and \$30-4B-4 of said code be amended 10 and reenacted; all to read as follows:

## 11 ARTICLE 4. WEST VIRGINIA DENTAL PRACTICE ACT.

## 12 §30-4-1. Unlawful acts.

13 (a) It is unlawful for any person to practice or offer to 14 practice dentistry or dental hygiene in this state without a 15 license, issued under the provisions of this article, or advertise 16 or use any title or description tending to convey or give the 17 impression that they are a dentist or dental hygienist, unless the 18 person is licensed under the provisions of this article.

(b) A business entity may not render any service or engage in 20 any activity which, if rendered or engaged in by an individual, 21 would constitute the practice of dentistry, except through a 22 licensee.

#### 23 §30-4-2. Applicable law.

24 The practices authorized under the provisions of this article

1 and the Board of Dentistry are subject to article one of this
2 chapter, the provisions of this article and any rules promulgated
3 hereunder.

## 4 §30-4-3. Definitions.

5 As used in articles four, four-a and four-b, the following 6 words and terms have the following meanings:

7 (1) "AAOMS" means the American Association of Oral and 8 Maxillofacial Surgeons;

9 (2) "AAPD" means the American Academy of Pediatric Dentistry;

10 (3) "ACLS" means Advanced Cardiac Life Support;

11 (4) "ADA" means the American Dental Association;

12 (5) "AMA" means the American Medical Association;

13 (6) "ASA" means American Society of Anesthesiologists;

(7) "Anxiolysis/minimal sedation" means removing, eliminating 15 or decreasing anxiety by the use of a single anxiety or analgesia 16 medication that is administered in an amount consistent with the 17 manufacturer's current recommended dosage for the unsupervised 18 treatment of anxiety, insomnia or pain, in conjunction with nitrous 19 oxide and oxygen. This does not include multiple dosing or 20 exceeding current normal dosage limits set by the manufacturer for 21 unsupervised use by the patient at home for the treatment of 22 anxiety;

(8) "Approved dental hygiene program" means a program that is24 approved by the board and is accredited or its educational

1 standards are deemed by the board to be substantially equivalent to 2 those required by the Commission on Dental Accreditation of the 3 American Dental Association;

(9) "Approved dental school, college or dental department of
a university" means a dental school, college or dental department
of a university that is approved by the board and is accredited or
its educational standards are deemed by the board to be
substantially equivalent to those required by the Commission on
9 Dental Accreditation of the American Dental Association;

10 (10) "Authorize" means that the dentist is giving permission 11 or approval to dental auxiliary personnel to perform delegated 12 procedures in accordance with the dentist's diagnosis and treatment 13 plan;

14 (11) "BLS" means Basic Life Support;

15 (12) "Board" means the West Virginia Board of Dentistry;

16 (13) "Business entity" means any firm, partnership, 17 association, company, corporation, limited partnership, limited 18 liability company or other entity;

(14) "Central Nervous System Anesthesia" means an induced, controlled state of unconsciousness or depressed consciousness produced by a pharmacologic method;

22 (15) "Certificate of qualification" means a certificate 23 authorizing a dentist to practice a specialty;

24 (16) "CPR" means Cardiopulmonary Resuscitation;

1 (17) "Conscious sedation/Moderate sedation" means an induced, 2 controlled state of depressed consciousness, produced through the 3 administration of nitrous oxide and oxygen and/or the 4 administration of other agents whether enteral or parenteral, in 5 which the patient retains the ability to independently and 6 continuously maintain an airway and to respond purposefully to 7 physical stimulation and to verbal command;

8 (18) "CRNA" means Certified Registered Nurse Anesthetist; 9 (19) "Defibrillator" means a device used to sustain asthmetic 10 heartbeat in an emergency and includes an automatic electronic 11 defibrillator (AED);

12 (20) "Delegated procedures" means those procedures specified 13 by law or by rule of the board and performed by dental auxiliary 14 personnel under the supervision of a licensed dentist;

15 (21) "Dentist Anesthesiologist" means a dentist who is trained 16 in the practice of anesthesiology and has completed an additional 17 approved anesthesia education course;

18 (22) "Dental assistant" means a person qualified by education, 19 training or experience who aids or assists a dentist in the 20 delivery of patient care in accordance with delegated procedures as 21 specified by the board by rule or who may perform nonclinical 22 duties in the dental office;

(23) "Dental auxiliary personnel" or "auxiliary" means dental24 hygienists and dental assistants who assist the dentist in the

1 practice of dentistry;

2 (24) "Dental Hygiene" means the performance of educational,
3 preventive or therapeutic dental services and as further provided
4 in section eleven and legislative rule;

5 (25) "Dental hygienist" means a person licensed by the board 6 to practice and who provides dental hygiene and other services as 7 specified by the board by rule to patients in the dental office and 8 in a public health setting;

9 (26) "Dental laboratory" means a business performing dental 10 laboratory services;

11 (27) "Dental laboratory services" means the fabricating, 12 repairing or altering of a dental prosthesis;

13 (28) "Dental laboratory technician" means a person qualified 14 by education, training or experience who has completed a dental 15 laboratory technology education program and who fabricates, repairs 16 or alters a dental prosthesis in accordance with a dentist's work 17 authorization;

18 (29) "Dental office" means the place where the licensed 19 dentist and dental auxiliary personnel are practicing dentistry; 20 (30) "Dental prosthesis" means an artificial appliance 21 fabricated to replace one or more teeth or other oral or peri-oral 22 structure in order to restore or alter function or aesthetics; 23 (31) "Dentist" means an individual licensed by the board to 24 practice dentistry;

1 (32) "Dentistry" means the evaluation, diagnosis, prevention 2 and treatment of diseases, disorders and conditions of the oral 3 cavity, maxillofacial area and the adjacent and associated 4 structures provided by a dentist;

5 (33) "Direct supervision" means supervision of dental 6 auxiliary personnel provided by a licensed dentist who is 7 physically present in the dental office or treatment facility when 8 procedures are being performed;

9 (34) "Facility Permit" means a permit for a facility where 10 sedation procedures are used that correspond with the level of 11 anesthesia provided;

12 (35) "General anesthesia" means an induced, controlled state 13 of unconsciousness in which the patient experiences complete loss 14 of protective reflexes, as evidenced by the inability to 15 independently maintain an airway, the inability to respond 16 purposefully to physical stimulation or the inability to respond 17 purposefully to verbal command.

18 (36) "Deep conscious sedation/general anesthesia" includes 19 partial loss of protective reflexes and the patient retains the 20 ability to independently and continuously maintain an airway;

(37) "General supervision" means a dentist is not required to 22 be in the office or treatment facility when procedures are being 23 performed by the auxiliary dental personnel, but has personally 24 diagnosed the condition to be treated, has personally authorized

1 the procedures and will evaluate the treatment provided by the 2 dental auxiliary personnel;

3 (38) "Good moral character" means a lack of history of 4 dishonesty;

5 (39) "Health Care Provider BLS/CPR" means Health Care Provider6 Basic Life Support/Cardiopulmonary Resuscitation;

7 (40) "License" means a license to practice dentistry or dental 8 hygiene;

9 (41) "Licensee" means a person holding a license;

10 (42) "Mobile Dental Facility" any self-contained facility in 11 which dentistry or dental hygiene will be practiced which may be 12 moved, towed or transported from one location to another;

13 (43) "Portable dental unit" means any nonfacility in which 14 dental equipment, utilized in the practice of dentistry, is 15 transported to and utilized on a temporary basis an out-of-office 16 location, including but not limited to, patients' homes, schools, 17 nursing homes or other institutions;

18 (44) "Other dental practitioner" means those persons excluded 19 from the definition of the practice of dentistry under the 20 provisions of subdivisions (3), (4) and (5), section twenty-four, 21 article four of this chapter and also those persons who hold 22 teaching permits which have been issued to them under the 23 provisions of section fourteen, article four of this chapter;

24 (45) "PALS" means Pediatric Advanced Life Support;

1 (46) "Pediatric patient" means infants and children;

2 (47) "Physician anesthesiologist" means a physician, medical 3 doctor or doctor of osteopathy, who is specialized in the practice 4 of anesthesiology;

5 (48) "Public health practice" means treatment or procedures in 6 a public health setting which shall be designated by a rule 7 promulgated by the board to require direct, general or no 8 supervision of a dental hygienist by a dentist;

9 (49)"Public health setting" means hospitals, schools, 10 correctional facilities, jails, community clinics, long-term care 11 facilities, nursing homes, home health agencies, group homes, state 12 institutions under the West Virginia Department of Health and Human 13 Resources, public health facilities, homebound settings, accredited 14 dental hygiene education programs and any other place designated by 15 the board by rule;

16 (50) "Qualified monitor" means an individual who by virtue of 17 credentialing and/or training is qualified to check closely and 18 document the status of a patient undergoing anesthesia and observe 19 utilized equipment;

(51) "Relative analgesia /minimal sedation" means an induced, controlled state of minimally depressed consciousness, produced solely by the inhalation of a combination of nitrous oxide and oxygen or single oral premedication without the addition of nitrous and oxygen in which the patient retains the ability to

1 independently and continuously maintain an airway and to respond 2 purposefully to physical stimulation and to verbal command.

3 (52) "Specialty" means the practice of a certain branch of 4 dentistry;

5 (53) "Subcommittee" means West Virginia Board of Dentistry 6 Subcommittee on Anesthesia; and

7 (54) "Work authorization" means a written order for dental 8 laboratory services which has been issued by a licensed dentist or 9 other dental practitioner.

#### 10 §30-4-4. Board of Dental Examiners.

(a) The West Virginia Board of Dental Examiners is continued and on July 1, 2013, the board shall be renamed the West Virginia Board of Dentistry. The members of the board in office on the date this section takes effect shall, unless sooner removed, continue to serve until their respective terms expire and until their successors have been appointed and qualified.

17 (b) The Governor, by and with the advice and consent of the 18 Senate, shall appoint:

19 (1) Six licensed dentists;

20 (2) One licensed dental hygienist;

(3) One nationally certified dental assistant or currently practicing dental assistant with a minimum of ten years experience; and

24 (4) One citizen member who is not licensed under the

1 provisions of this article and does not perform any services 2 related to the practice of dentistry.

3 (c) The West Virginia Dental Association may submit 4 recommendations to the Governor for the appointment of the licensed 5 dentists board members, the West Virginia Association of Dental 6 Hygienists may submit recommendations to the Governor for the 7 appointment of a Dental Hygienist board member and the West 8 Virginia Dental Assistant Association may submit recommendations to 9 the Governor for the appointment of a dental assistant board 10 member.

11 (d) A person connected with a commercial entity that may 12 derive financial gain from the profession of dentistry and a person 13 employed as full-time faculty with a dental college, school or 14 dental department of a university are not eligible for appointment 15 to the board.

(e) After the initial appointment term, the appointment term 17 is five years. A member may not serve more than two consecutive 18 terms. A member who has served two consecutive full terms may not 19 be reappointed for at least one year after completion of his or her 20 second full term. A member may continue to serve until his or her 21 successor has been appointed and qualified.

(f) Each licensed member of the board, at the time of his or her appointment, shall have held a license in this state for a period of not less than five years immediately preceding the

1 appointment.

2 (g) Each member of the board shall be a resident of this state 3 during the appointment term.

4 (h) A vacancy on the board shall be filled by appointment by 5 the Governor for the unexpired term of the member whose office is 6 vacant.

7 (i) The Governor may remove any member from the board for 8 neglect of duty, incompetency or official misconduct.

9 (j) A licensed member of the board immediately and 10 automatically forfeits membership to the board if his or her 11 license to practice is suspended or revoked in any jurisdiction.

12 (k) A member of the board immediately and automatically 13 forfeits membership to the board if he or she is convicted of a 14 felony under the laws of any jurisdiction or becomes a nonresident 15 of this state.

16 (1) The board shall elect annually one of its members as 17 president and one member as secretary who shall serve at the will 18 and pleasure of the board.

19 (m) Each member of the board is entitled to receive 20 compensation and expense reimbursement in accordance with article 21 one of this chapter.

(n) A simple majority of the membership serving on the boardat a given time is a quorum for the transaction of business.

24 (o) The board shall hold at least two meetings annually.

1 Other meetings shall be held at the call of the president or upon 2 the written request of four members, at the time and place as 3 designated in the call or request.

4 (p) Prior to commencing his or her duties as a member of the 5 board, each member shall take and subscribe to the oath required by 6 section five, article four of the Constitution of this state.

7 (q) The members of the board, when acting in good faith and 8 without malice, shall enjoy immunity from individual civil 9 liability while acting within the scope of their duties as board 10 members.

## 11 §30-4-5. Powers of the board.

12 The board has all the powers and duties set forth in this 13 article, by rule, in article one of this chapter and elsewhere in 14 law, including:

15 (1) Hold meetings;

16 (2) Establish procedures for submitting, approving and17 rejecting applications for a license, certificate and permit;

18 (3) Determine the qualifications of any applicant for a 19 license, certificate and permit;

20 (4) Establish the fees charged under the provisions of this 21 article;

(5) Issue, renew, deny, suspend, revoke or reinstate a23 license, certificate and permit;

24 (6) Prepare, conduct, administer and grade written, oral or

1 written and oral examinations for a license;

2 (7) Contract with third parties to administer the examinations3 required under the provisions of this article;

4 (8) Maintain records of the examinations the board or a third 5 party administers, including the number of persons taking the 6 examination and the pass and fail rate;

(9) Maintain an office and hire, discharge, establish the job
8 requirements and fix the compensation of employees and contract
9 with persons necessary to enforce the provisions of this article.
(10) Employ investigators, attorneys, hearing examiners,
11 consultants and other employees as may be necessary who are exempt
12 from the classified service and who serve at the will and pleasure
13 of the board.

(11) Investigate alleged violations of the provisions of this 15 article and articles four-a and four-b of this chapter and 16 legislative rules, orders and final decisions of the board;

17 (12) Conduct disciplinary hearings of persons regulated by the 18 board;

19 (13) Determine disciplinary action and issue orders;

20 (14) Institute appropriate legal action for the enforcement of 21 the provisions of this article;

22 (15) Maintain an accurate registry of names and addresses of 23 all persons regulated by the board;

24 (16) Keep accurate and complete records of its proceedings,

1 and certify the same as may be necessary and appropriate;

2 (17) Propose rules in accordance with the provisions of 3 article three, chapter twenty-nine-a of this code to implement the 4 provisions of this article;

5 (18) Sue and be sued in its official name as an agency of this 6 state; and

7 (19) Confer with the Attorney General or his or her assistant8 in connection with legal matters and questions.

#### 9 §30-4-6. Rule-making authority.

10 (a) The board shall propose rules for legislative approval, in 11 accordance with the provisions of article three, chapter 12 twenty-nine-a of this code to implement the provisions of this 13 article and articles four-a and four-b of this chapter including: 14 (1) Standards and requirements for licenses, certifications 15 and permits;

16 (2) Requirements for third parties to prepare and/or 17 administer examinations and reexaminations;

18 (3) Educational and experience requirements;

19 (4) Continuing education requirements and approval of 20 continuing education courses;

(5) Procedures for the issuance and renewal of licenses,22 certifications and permits;

23 (6) Establish a fee schedule;

24 (7) Regulate dental specialities;

1 (8) Delegate procedures to be performed by a dental hygienist; 2 (9) Delegate procedures to be performed by a dental assistant; 3 (10) Designate the services and procedures performed under 4 direct supervision, general supervision in public health practice; 5 (11) Designate additional public health settings; 6 (12) Regulate the use of firm or trade names; 7 (13) Regulate dental corporations; 8 (14) Regulate mobile dental facilities; 9 (15) Regulate portable dental units; (16) Regulate professional limited liability companies; 10 11 (17) Establish professional conduct requirements; 12 Establish the procedures for denying, suspending, (18)13 revoking, reinstating or limiting the practice of licensees, 14 certifications and permitees; (19) Establish requirements for inactive or revoked licenses, 15 16 certifications and permits; 17 (20) Regulate dental anesthesia, including: (A) Fees; 18 19 (B) Evaluations; 20 (C) Equipment; 21 (D) Emergency drugs; 22 (E) Definitions: 23 (F) Qualified monitor requirements; and 24 (G) Education;

1 (21) Any other rules necessary to implement this article.

2 (b) All of the board's rules in effect and not in conflict 3 with these provisions shall remain in effect until they are amended 4 or rescinded.

#### 5 §30-4-7. Fees; special revenue account; administrative fines.

6 (a) All fees and other moneys, except administrative fines, 7 received by the board shall be deposited in a separate special 8 revenue fund in the State Treasury designated the Board of Dentists 9 and Dental Hygienist Special Fund, which is continued and shall be 10 known as the Board of Dentistry Special Fund. The fund is used by 11 the board for the administration of this article. Except as may be 12 provided in article one of this chapter, the board retains the 13 amount in the special revenue account from year to year. No 14 compensation or expense incurred under this article is a charge 15 against the General Revenue Fund.

16 (b) Any amounts received as administrative fines imposed 17 pursuant to this article shall be deposited into the general 18 revenue fund of the State Treasury.

## 19 §30-4-8. License to practice dentistry.

20 (a) The board shall issue a license to practice dentistry to 21 an applicant who meets the following requirements:

- 22 (1) Is at least eighteen years of age;
- 23 (2) Is of good moral character;
- 24 (3) Is a graduate of and has a diploma from a school

1 accredited by the Commission on Dental Accreditation or 2 equivalently approved dental college, school or dental department 3 of a university as determined by the board;

4 (4) Has passed the National Board examination as given by the 5 Joint Commission on National Dental Examinations and a clinical 6 examination as specified by the board by rule;

7 (5) Has not been found guilty of cheating, deception or fraud8 in the examination or any part of the application;

9 (6) Has paid the application fee specified by rule; and 10 (7) Not be an alcohol or drug abuser, as these terms are 11 defined in section eleven, article one-a, chapter twenty-seven of 12 this code: *Provided*, That an applicant in an active recovery 13 process, which may, in the discretion of the board, be evidenced by 14 participation in a twelve-step program or other similar group or 15 process, may be considered.

16 (b) A dentist may not represent to the public that he or she 17 is a specialist in any branch of dentistry or limit his or her 18 practice to any branch of dentistry unless first issued a 19 certificate of qualification in that branch of dentistry by the 20 board.

(c) A license to practice dentistry issued by the board shall for all purposes be considered a license issued under this section: *Provided*, That a person holding a license shall renew the license. Scope of practice of a dentist.

1 The practice of dentistry includes the following:

2 (1) Coordinate dental services to meet the oral health needs3 of the patient;

4 (2) Examine, evaluate and diagnose diseases, disorders and 5 conditions of the oral cavity, maxillofacial area and adjacent and 6 associated structures;

7 (3) Treat diseases, disorders and conditions of the oral 8 cavity, maxillofacial area and the adjacent and associated 9 structures;

10 (4) Provide services to prevent diseases, disorders and 11 conditions of the oral cavity, maxillofacial area and the adjacent 12 and associated structures;

13 (5) Fabricate, repair or alter a dental prosthesis;

14 (6) Administer anesthesia in accordance with the provisions of 15 article four-a of this chapter;

16 (7) Prescribe drugs necessary for the practice of dentistry;
17 (8) Execute and sign a death certificate when it is required
18 in the practice of dentistry;

19 (9) Employ and supervise dental auxiliary personnel;

20 (10) Authorize delegated procedures to be performed by dental 21 auxiliary personnel; and

(11) Perform any other work included in the curriculum of an approved dental school, college or dental department of a university.

## 1 §30-4-10. License to practice dental hygiene.

2 (a) The board shall issue a dental hygienist license to an3 applicant who meets the following requirements:

4 (1) Is at least eighteen years of age;

5 (2) Is of good moral character;

6 (3) Is a graduate with a degree in dental hygiene from an 7 approved dental hygiene program of a college, school or dental 8 department of a university;

9 (4) Has passed the national board dental hygiene examination, 10 a regional or state clinical examination and a state law 11 examination that tests the applicant's knowledge of subjects 12 specified by the board by rule;

(5) Has not been found guilty of cheating, deception or fraud14 in the examination or any part of the application;

15 (6) Has paid the application fee specified by rule; and,

16 (7) Not be an alcohol or drug abuser, as these terms are 17 defined in section eleven, article one-a, chapter twenty-seven of 18 this code: *Provided*, That an applicant in an active recovery 19 process, which may, in the discretion of the board, be evidenced by 20 participation in a twelve-step program or other similar group or 21 process, may be considered.

(b) A dental hygienist license issued by the board and in good 3 standing on the effective date of the amendments to this section 4 shall for all purposes be considered a dental hygienist license

1 issued under this section: Provided, That a person holding a dental
2 hygienist license shall renew the license.

3 §30-4-11. Scope of practice for a dental hygienist.

4 The practice of dental hygiene includes the following:

5 (1) Perform a complete prophylaxis, including the removal of 6 any deposit, accretion or stain from supra and subgingival, the 7 surface of a tooth or a restoration;

8 (2) Apply a medicinal agent to a tooth for a prophylactic 9 purpose;

10 (3) Take a radiograph for interpretation by a dentist;

11 (4) Instruct a patient on proper oral hygiene practice;

12 (5) Place sealants on a patient's teeth without a prior 13 examination by a licensed dentist: *Provided*, That for this 14 subdivision, the dental hygienist has a public health practice 15 permit issued by the board, and subject to a collaborative 16 agreement with a supervising dentist and the patient is referred 17 for a dental examination within six months of sealant application; 18 (6) Perform all delegated procedures of a dental hygienist 19 specified by rule by the board; and

20 (7) Performing all delegated procedures of a dental assistant21 specified by rule by the board.

22 §30-4-12. License renewal.

(a) All persons regulated by this article shall annually or24 biannually, renew his or her board authorization by completing a

1 form prescribed by the board and submitting any other information
2 required by the board.

3 (b) The board shall charge a fee for each renewal of a board 4 authorization and shall charge a late fee for any renewal not paid 5 by the due date.

6 (c) The board shall require as a condition of renewal that 7 each licensee, certificate holder or permittee complete continuing 8 education.

9 (d) The board may deny an application for renewal for any 10 reason which would justify the denial of an original application.

# 11 §30-4-13. Board authorizations shall be displayed.

(a) The board shall prescribe the form for a board
13 authorization, and may issue a duplicate upon payment of a fee.
(b) Any person regulated by the article shall conspicuously
15 display his or her board authorization at his or her principal
16 business location.

## 17 §30-4-14. Dental intern, resident, or teaching permit.

(a) The board may issue a dental intern or dental resident permit to an applicant who has been accepted as a dental intern or dental resident by a licensed hospital or dental school in this state which maintains an established dental department under the supervision of a licensed dentist and meets the following gualifications:

24 (1) Has graduated from a Commission on Dental Accreditation or

1 equivalent approved dental college, school or dental department of 2 a university with a degree in dentistry;

3 (2) Has paid the application fee specified by rule; and
4 (3) Meets the other qualifications specified by rule.

5 (b) The dental intern or dental resident permit may be renewed 6 and expires on the earlier of:

7 (1) The date the permit holder ceases to be a dental intern or 8 dental resident; or

9 (2) One year after the date of issue.

10 (c) The board may issue a teaching permit to an applicant who 11 is not otherwise licensed to practice dentistry in this state and 12 who meets the following conditions:

(1) Is authorized or is eligible, as determined by the board, for a authorization to practice dentistry in another jurisdiction; (2) Has met or been approved under the credentialing standards of a dental school or an academic medical center with which the person is to be affiliated: *Provided*, That the dental school or academic medical center is accredited by the Commission on Dental Accreditation or Joint Commission on Accreditation of Health Care Organizations;

(3) The permittee may teach and practice dentistry in or on 22 behalf of a dental school or college offering a doctoral degree in 23 dentistry operated and conducted in this state, in connection with 24 an academic medical center or at any teaching hospital adjacent to

1 a dental school or an academic medical center;

2 (4) Shall successfully complete the West Virginia Dental Law3 Examination;

4 (5) Shall pay annual renewal fees to the board;

5 (6) Shall comply with continuing education requirements; and
6 (7) Has had no disciplinary actions taken or pending against
7 him or her by any other jurisdiction.

8 (d) A teaching permit may be renewed annually with a written 9 recommendation from the dental school dean.

10 (e) While in effect, a permittee is subject to the 11 restrictions and requirements imposed by this article to the same 12 extent as a licensee. In addition, a permittee may not receive any 13 fee for service other than a salary paid by the hospital or dental 14 school

# 15 §30-4-15. Special volunteer dentist or dental hygienist license;

#### 16 civil immunity for voluntary services rendered to indigents.

17 (a) There is continued a special volunteer dentist and dental 18 hygienist license for dentist and dental hygienists retired or 19 retiring from the active practice of dentistry and dental hygiene 20 who wish to donate their expertise for the care and treatment of 21 indigent and needy patients in the clinic setting of clinics 22 organized, in whole or in part, for the delivery of health care 23 services without charge. The special volunteer dentist or dental 24 hygienist license shall be issued by the board to dentist or dental

1 hygienists licensed or otherwise eligible for licensure under this 2 article and the legislative rules promulgated hereunder without the 3 payment of an application fee, license fee or renewal fee, shall be 4 issued for the remainder of the licensing period and renewed 5 consistent with the boards other licensing requirements. The board 6 shall develop application forms for the special license provided in 7 this subsection which shall contain the dental hygienist's 8 acknowledgment that:

9 (1) The dentist or dental hygienist's practice under the 10 special volunteer dentist or dental hygienist license will be 11 exclusively devoted to providing dentistry or dental hygiene care 12 to needy and indigent persons in West Virginia;

13 (2) The dentist or dental hygienist will not receive any 14 payment or compensation, either direct or indirect, or have the 15 expectation of any payment or compensation, for any dentistry or 16 dental hygiene services rendered under the special volunteer 17 dentist or dental hygienist license;

18 (3) The dentist or dental hygienist will supply any supporting19 documentation that the board may reasonably require; and

20 (4) The dentist or dental hygienist agrees to continue to 21 participate in continuing professional education as required by the 22 board for the special volunteer dentist or dental hygienist.

(b) Any dentist or dental hygienist who renders any dentistry24 or dental hygiene service to indigent and needy patients of a

1 clinic organized, in whole or in part, for the delivery of health 2 care services without charge under a special volunteer dentist or 3 dental hygienist license authorized under subsection (a) of this 4 section without payment or compensation or the expectation or 5 promise of payment or compensation is immune from liability for any 6 civil action arising out of any act or omission resulting from the 7 rendering of the dental hygiene service at the clinic unless the 8 act or omission was the result of the dentist's or dental 9 hygienist's gross negligence or willful misconduct. In order for 10 the immunity under this subsection to apply, there shall be a 11 written agreement between the dentist or dental hygienist and the 12 clinic pursuant to which the dentist or dental hygienist will 13 provide voluntary uncompensated dental hygiene services under the 14 control of the clinic to patients of the clinic before the 15 rendering of any services by the dentist or dental hygienist at the 16 clinic: Provided, That any clinic entering into such written 17 agreement is required to maintain liability coverage of not less 18 than one million dollars per occurrence.

19 (c) Notwithstanding the provisions of subsection (b) of this 20 section, a clinic organized, in whole or in part, for the delivery 21 of health care services without charge is not relieved from imputed 22 liability for the negligent acts of a dentist or dental hygienist 23 rendering voluntary dental hygiene services at or for the clinic 24 under a special volunteer dentist or dental hygienist license

1 authorized under subsection (a) of this section.

2 (d) For purposes of this section, "otherwise eligible for 3 licensure" means the satisfaction of all the requirements for 4 licensure as listed in section eight of this article and in the 5 legislative rules promulgated thereunder, except the fee 6 requirements of subdivision (6) of said section and of the 7 legislative rules promulgated by the board relating to fees.

8 (e) Nothing in this section may be construed as requiring the 9 board to issue a special volunteer dentist or dental hygienist 10 license to any dental hygienist whose license is or has been 11 subject to any disciplinary action or to any dentist or dental 12 hygienist who has surrendered a license or caused such license to 13 lapse, expire and become invalid in lieu of having a complaint 14 initiated or other action taken against his or her dentist or 15 dental hygienist license, or who has elected to place a dentist or 16 dental hygienist license in inactive status in lieu of having a 17 complaint initiated or other action taken against his or her 18 license, or who has been denied a dentist or dental hygienist 19 license.

(f) Any policy or contract of liability insurance providing coverage for liability sold, issued or delivered in this state to any dentist or dental hygienist covered under the provisions of this article shall be read so as to contain a provision or endorsement whereby the company issuing such policy waives or

1 agrees not to assert as a defense on behalf of the policyholder or 2 any beneficiary thereof, to any claim covered by the terms of such 3 policy within the policy limits, the immunity from liability of the 4 insured by reason of the care and treatment of needy and indigent 5 patients by a dentist or dental hygienist who holds a special 6 volunteer dentist or dental hygienist license.

#### 7 §30-4-16. Dental corporations.

8 (a) Dental corporations are continued.

9 (b) One or more dentists may organize and become a shareholder 10 or shareholders of a dental corporation domiciled within this state 11 under the terms and conditions and subject to the limitations and 12 restrictions specified by rule.

13 (c) No corporation may practice dentistry, or any of its 14 branches, or hold itself out as being capable of doing so without 15 a certificate of authorization from the board.

16 (d) When the Secretary of State receives a certificate of 17 authorization to act as a dental corporation from the board, he or 18 she shall attach the authorization to the corporation application 19 and, upon compliance with the applicable provisions of chapter 20 thirty-one of this code, the Secretary of State shall issue to the 21 incorporators a certificate of incorporation for the dental 22 corporation.

(e) A corporation holding a certificate of authorization shallrenew annually, on or before June 30, on a form prescribed by the

1 board and pay an annual fee in an amount specified by rule.

2 (f) A dental corporation may practice dentistry only through 3 an individual dentist or dentists licensed to practice dentistry in 4 this state, but the dentist or dentists may be employees rather 5 than shareholders of the corporation.

dental corporation holding a certificate 6 (q) А of 7 authorization shall cease to engage in the practice of dentistry 8 upon being notified by the board that any of its shareholders is no 9 longer a licensed dentist or when any shares of the corporation 10 have been sold or disposed of to a person who is not a licensed 11 dentist: Provided, That the personal representative of a deceased 12 shareholder has a period, not to exceed twenty-four months from the 13 date of the shareholder's death, to dispose of the shares; but 14 nothing contained herein may be construed as affecting the 15 existence of the corporation or its right to continue to operate 16 for all lawful purposes other than the practice of dentistry.

# 17 §30-4-17. Reinstatement.

(a) A licensee against whom disciplinary action has been taken
under the provisions of this article shall be afforded an
opportunity to demonstrate the qualifications to resume practice.
The application for reinstatement shall be in writing and subject
to the procedures specified by the board by rule.

(b) A licensee who does not complete annual renewal, as24 specified by the board by rule, and whose license has lapsed for

1 one year or longer, shall make application for reinstatement as
2 specified by the board by rule.

3 (c) The board, at its discretion and for cause, may require an 4 applicant for reinstatement to undergo a physical and/or mental 5 evaluation to determine a licensee is competent to practice or if 6 the licensee is impaired by drugs or alcohol.

## 7 §30-4-18. Actions to enjoin violations.

8 (a) If the board obtains information that any person has 9 engaged in, is engaging in or is about to engage in any act which 10 constitutes or will constitute a violation of the provisions of 11 this article, the rules promulgated pursuant to this article or a 12 final order or decision of the board, it may issue a notice to the 13 person to cease and desist in engaging in the act and/or apply to 14 the circuit court in the county of the alleged violation for an 15 order enjoining the act.

(b) The circuit court may issue a temporary injunction pending a decision on the merits and may issue a permanent injunction based and its findings in the case.

19 (c) The judgment of the circuit court on an application 20 permitted by the provisions of this section is final unless 21 reversed, vacated or modified on appeal to the West Virginia 22 Supreme Court of Appeals.

23 §30-4-19. Complaints; investigations; due process procedure;
 grounds for disciplinary action.

1 (a) The board may initiate a complaint upon receipt of 2 credible information and shall, upon the receipt of a written 3 complaint of any person, cause an investigation to be made to 4 determine whether grounds exist for disciplinary action under this 5 article or the legislative rules promulgated pursuant to this 6 article.

7 (b) After reviewing any information obtained through an 8 investigation, the board shall determine if probable cause exists 9 that the licensee, certificate holder or permittee has violated 10 subsection (g) of this section or rules promulgated pursuant to 11 this article.

12 (c) Upon a finding of probable cause to go forward with a 13 complaint, the board shall provide a copy of the complaint to the 14 licensee, certificate holder or permittee.

(d) Upon a finding that probable cause exists that the licensee, certificate holder or permittee has violated subsection (g) of this section or rules promulgated pursuant to this article, the board may enter into a consent decree or hold a hearing for glisciplinary action against the licensee, certificate holder or permittee. Any hearing shall be held in accordance with the provisions of this article and shall require a violation to be proven by a preponderance of the evidence.

(e) A member of the complaint committee or the executive24 director of the board may issue subpoenas and subpoenas duces tecum

1 to obtain testimony and documents to aid in the investigation of 2 allegations against any person regulated by the article.

3 (f) Any member of the board or its executive director may sign4 a consent decree or other legal document on behalf of the board.

5 (g) The board may, after notice and opportunity for hearing, 6 deny or refuse to renew, suspend, restrict or revoke the license, 7 certificate or permit of, or impose probationary conditions upon or 8 take disciplinary action against, any licensee, certificate holder 9 or permittee for any of the following reasons:

10 (1) Obtaining a board authorization by fraud, 11 misrepresentation or concealment of material facts;

12 (2) Being convicted of a felony or a misdemeanor crime of 13 moral turpitude;

14 (3) Being guilty of unprofessional conduct which placed the15 public at risk, as defined by legislative rule of the board;

16 (4) Intentional violation of a lawful order or legislative 17 rule of the board;

18 (5) Having had a board authorization revoked or suspended, 19 other disciplinary action taken, or an application for a board 20 authorization denied by the proper authorities of another 21 jurisdiction;

22 (6) Aiding or abetting unlicensed practice;

(7) Engaging in an act while acting in a professional capacitywhich has endangered or is likely to endanger the health, welfare

1 or safety of the public;

2 (8) Having an incapacity that prevents a licensee from 3 engaging in the practice of dentistry or dental hygiene, with 4 reasonable skill, competence and safety to the public;

5 (9) Committing fraud in connection with the practice of 6 dentistry or dental hygiene;

7 (10) Failing to report to the board one's surrender of a 8 license or authorization to practice dentistry or dental hygiene in 9 another jurisdiction while under disciplinary investigation by any 10 of those authorities or bodies for conduct that would constitute 11 grounds for action as defined in this section;

12 (11) Failing to report to the board any adverse judgment, 13 settlement or award arising from a malpractice claim arising 14 related to conduct that would constitute grounds for action as 15 defined in this section;

16 (12) Being guilty of unprofessional conduct as contained in 17 the American Dental Association principles of ethics and code of 18 professional conduct. The following acts are conclusively presumed 19 to be unprofessional conduct:

20 (A) Being guilty of any fraud or deception;

(B) Committing a criminal operation or being convicted of acrime involving moral turpitude;

23 (C) Abusing alcohol or drugs;

24 (D) Violating any professional confidence or disclosing any

1 professional secret;

2 (E) Being grossly immoral;

3 (F) Harassing, abusing, intimidating, insulting, degrading or 4 humiliating a patient physically, verbally or through another form 5 of communication;

6 (G) Obtaining any fee by fraud or misrepresentation;

7 (H) Employing directly or indirectly, or directing or 8 permitting any suspended or unlicensed person so employed, to 9 perform operations of any kind or to treat lesions of the human 10 teeth or jaws or correct malimposed formations thereof;

(I) Practicing, or offering or undertaking to practice l2 dentistry under any firm name or trade name not approved by the l3 board;

(J) Having a professional connection or association with, or lending his or her name to another, for the illegal practice of dentistry, or professional connection or association with any person, firm or corporation holding himself or herself, themselves l or itself out in any manner contrary to this article;

19 (K) Making use of any advertising relating to the use of any 20 drug or medicine of unknown formula;

(L) Advertising to practice dentistry or perform any operation22 thereunder without causing pain;

(M) Advertising professional superiority or the performance ofprofessional services in a superior manner;

1 (N) Advertising to guarantee any dental service;

2 (O) Advertising in any manner that is false or misleading in 3 any material respect;

4 (P) Soliciting subscriptions from individuals within or 5 without the state for, or advertising or offering to individuals 6 within or without the state, a course or instruction or course 7 materials in any phase, part or branch of dentistry or dental 8 hygiene in any journal, newspaper, magazine or dental publication, 9 or by means of radio, television or United States mail, or in or by 10 any other means of contacting individuals: *Provided*, That the 11 provisions of this paragraph may not be construed so as to 12 prohibit:

(i) An individual dentist or dental hygienist from presenting
14 articles pertaining to procedures or technique to state or national
15 journals or accepted dental publications; or

16 (ii) Educational institutions approved by the board from 17 offering courses or instruction or course materials to individual 18 dentists and dental hygienists from within or without the state; or 19 (Q) Engaging in any action or conduct which would have 20 warranted the denial of the license.

(13) Knowing or suspecting that a licensee is incapable of engaging in the practice of dentistry or dental hygiene, with reasonable skill, competence and safety to the public, and failing to report any relevant information to the board;

1 (14) Using or disclosing protected health information in an 2 unauthorized or unlawful manner;

3 (15) Engaging in any conduct that subverts or attempts to 4 subvert any licensing examination or the administration of any 5 licensing examination;

6 (16) Failing to furnish to the board or its representatives 7 any information legally requested by the board or failing to 8 cooperate with or engaging in any conduct which obstructs an 9 investigation being conducted by the board;

10 (17) Announcing or otherwise holding himself or herself out to 11 the public as a specialist or as being specially qualified in any 12 particular branch of dentistry or as giving special attention to 13 any branch of dentistry or as limiting his or her practice to any 14 branch of dentistry without first complying with the requirements 15 established by the board for the specialty and having been issued 16 a certificate of qualification in the specialty by the board;

(18) Failing to report to the board within seventy-two hours of becoming aware thereof any life threatening occurrence, serious injury or death of a patient resulting from dental treatment or complications following a dental procedure;

(19) Failing to report to the board any driving under the 22 influence and/or driving while intoxicated offense; or

(20) Violation of any of the terms or conditions of any orderentered in any disciplinary action.

(h) For the purposes of subsection (g) of this section,
 2 effective July 1, 2013, disciplinary action may include:

3 (1) Reprimand;

4 (2) Probation;

5 (3) Restrictions;

6 (4) Suspension;

7 (5) Revocation;

8 (6) Administrative fine, not to exceed \$1,000 per day per 9 violation;

10 (7) Mandatory attendance at continuing education seminars or 11 other training;

12 (8) Practicing under supervision or other restriction; or

(9) Requiring the licensee or permittee to report to the board14 for periodic interviews for a specified period of time.

(i) In addition to any other sanction imposed, the board may require a licensee or permittee to pay the costs of the proceeding. (j) A person authorized to practice under this article who reports or otherwise provides evidence of the negligence, impairment or incompetence of another member of this profession to the board or to any peer review organization is not liable to any person for making the report if the report is made without actual malice and in the reasonable belief that the report is warranted by the facts known to him or her at the time.

24 §30-4-20. Procedures for hearing; right of appeal.

(a) Hearings are governed by the provisions of section eight,
 2 article one of this chapter.

3 (b) The board may conduct the hearing or elect to have an 4 administrative law judge conduct the hearing.

5 (c) If the hearing is conducted by an administrative law 6 judge, at the conclusion of a hearing he or she shall prepare a 7 proposed written order containing findings of fact and conclusions 8 of law. The proposed order may contain proposed disciplinary 9 actions if the board so directs. The board may accept, reject or 10 modify the decision of the administrative law judge.

(d) Any member or the executive director of the board has the12 authority to administer oaths, examine any person under oath.

(e) If, after a hearing, the board determines the licensee or 14 permittee has violated provisions of this article or the board's 15 rules, a formal written decision shall be prepared which contains 16 findings of fact, conclusions of law and a specific description of 17 the disciplinary actions imposed.

18 §30-4-21. Judicial review.

A person adversely affected by a decision of the board denying an application or entered after a hearing may obtain judicial review of the decision in accordance with section four, article five, chapter twenty-nine-a of this code and may appeal any ruling resulting from judicial review in accordance with article six of aid chapter.

#### 1 §30-4-22. Criminal offenses.

2 (a) When, as a result of an investigation under this article 3 or otherwise, the board has reason to believe that a person 4 authorized under this article has committed a criminal offense 5 under this article, the board may bring its information to the 6 attention of an appropriate law-enforcement official.

7 (b) Any person who intentionally practices, or holds himself 8 or herself out as qualified to practice dentistry or dental 9 hygiene, or uses any title, word or abbreviation to indicate to or 10 induce others to believe he or she is licensed to practice as a 11 dentist or dental hygienist without obtaining an active, valid West 12 Virginia license to practice that profession or with a license that 13 is:

14 (1) Expired, suspended or lapsed; or

15 (2) Inactive, revoked, suspended as a result of disciplinary 16 action, or surrendered, is guilty of a misdemeanor and, upon 17 conviction thereof, shall be fined not more than \$10,000.

#### 18 §30-4-23. Single act evidence of practice.

In any action brought under this article, article four-a or 20 article four-b any proceeding initiated under this article, 21 evidence of the commission of a single act prohibited by this 22 article is sufficient to justify a penalty, injunction, restraining 23 order or conviction without evidence of a general course of 24 conduct.

#### 1 §30-4-24. Inapplicability of article.

2 The provisions of this article do not apply to:

3 (1) A licensed physician or surgeon in the practice of his or 4 her profession when rendering dental relief in emergency cases, 5 unless he or she undertakes to reproduce or reproduces lost parts 6 of the human teeth or to restore or replace lost or missing teeth 7 in the human mouth;

8 (2) A dental laboratory in the performance of dental 9 laboratory services, while the dental laboratory, in the 10 performance of the work, conforms in all respects to the 11 requirements of article four-b of this chapter and further does not 12 apply to persons performing dental laboratory services under the 13 direct supervision of a licensed dentist or under the direct 14 supervision of a person authorized under this article to perform 15 any of the acts in this article defined to constitute the practice 16 of dentistry while the work is performed in connection with, and as 17 a part of, the dental practice of the licensed dentist or other 18 authorized person and for his or her dental patients;

19 (3) A student enrolled in and regularly attending any dental 20 college recognized by the board, provided their acts are done in 21 the dental college and under the direct and personal supervision of 22 their instructor;

(4) A student enrolled in and regularly attending any dentalcollege, recognized by the board, practicing dentistry in a public

1 health setting, provided their acts are done under the direct 2 supervision of their instructor, adjunct instructor or a dentist;

3 (5) An authorized dentist of another state temporarily 4 operating a clinic under the auspices of a organized and reputable 5 dental college or reputable dental society, or to one lecturing 6 before a reputable society composed exclusively of dentists; or

7 (6) A dentists whose practice is confined exclusively to the 8 service of the United States Army, the United States Navy, the 9 United States Air Force, The United States Coast Guard, the United 10 States Public Health Service, the United States Veteran's Bureau or 11 any other authorized United States government agency or bureau.

12 ARTICLE 4A. ADMINISTRATION OF ANESTHESIA BY DENTISTS.

13 §30-4A-1. Requirement for anesthesia permit; qualifications and 14 requirements for qualified monitors.

(a) No dentist may induce central nervous system anesthesia
without first having obtained an anesthesia permit for the level of
anesthesia being induced.

(b) The applicant for an anesthesia permit shall pay the 19 appropriate permit fees and renewal fees, submit a completed 20 board-approved application and consent to an office evaluation.

21 (c) Permits shall be issued to coincide with the annual 22 renewal dates for licensure.

23 (d) Permit holders shall report the names and qualifications24 of each qualified monitor providing services to that permit holder.

1 A qualified monitor may not perform the functions and 2 responsibilities specified in this article for any level of 3 anesthesia, other than relative analgesia/minimal sedation, without 4 certification by the board. Qualified monitors shall apply for 5 certification and pay the appropriate application fees and renewal 6 fees. Qualified monitors are required to renew annually by the 7 30th day of June. To be certified as a qualified monitor, the 8 applicant must meet the following minimum qualifications:

9 (1) Possess a current health care provider BLS/CPR 10 certification;

(2) For monitoring, conscious sedation/moderate sedation or general anesthesia/deep conscious sedation procedures, successful completion of an AAOMS or AAPD anesthesia assistants certification program; and

15 (3) For monitoring a nitrous oxide unit, successful completion16 of a board-approved course in nitrous oxide monitoring.

(e) A dentist shall hold a class permit equivalent to or exceeding the anesthesia level being provided unless the provider of anesthesia is a physician anesthesiologist or another licensed dentist who holds a current anesthesia permit issued by the board. **S30-4A-2.** Presumption of Degree of Central Nervous System Depression.

(a) In any hearing where a question exists as to the level of24 central nervous system depression a licensee has induced, as

1 outlined in this article, the board may base its findings on, among 2 other things, the types, dosages and routes of administration of 3 drugs administered to the patient and what result can reasonably be 4 expected from those drugs in those dosages and routes administered 5 in a patient of that physical and psychological status.

6 (b) No permit holder may have more than one person under 7 conscious sedation/moderate sedation and/or general anesthesia/deep 8 conscious sedation at the same time, exclusive of recovery.

#### 9 §30-4A-3. Classes of anesthesia permits.

10 (a) The board shall issue the following permits:

11 (1) Class 2 Permit: A Class 2 Permit authorizes a dentist to 12 induce anxiolysis/minimal sedation.

(2) Class 3 Permit: A Class 3 Permit authorizes a dentist to 14 induce conscious sedation/moderate sedation as limited enteral (3a) 15 and/or comprehensive parenteral (3b) and anxiolysis/minimal 16 sedation.

17 (3) Class 4 Permit: A Class 4 Permit authorizes a dentist to
18 induce general anesthesia/deep conscious sedation, conscious
19 sedation/moderate sedation and anxiolysis/minimal sedation.

(b) When anesthesia services are provided in dental facilities 21 by a medical doctor or doctor of osteopathy physician 22 anesthesiologist or dentist anesthesiologist, the dental facility 23 shall be inspected and approved for a Class 4 permit and the 24 dentist shall have a minimum of a Class 2 permit. If anesthesia

1 services are provided by a CRNA, the dental facility shall be 2 inspected and approved for a Class 4 permit and the supervising 3 dentist shall have the same level of permit for the level of 4 anesthesia provided by the CRNA.

5 §30-4A-4. Qualifications, standards and continuing education
requirements for relative analgesia/minimal sedation use.
(a) The board shall allow administration of relative

8 analgesia/minimal sedation if the practitioner:

9 (1) Is a licensed dentist in the state;

10 (2) Holds valid and current documentation showing successful11 completion of a Health Care Provider BLS/CPR course; and

12 (3) Has completed a training course of instruction in dental 13 school, continuing education or as a postgraduate in the 14 administration of relative analgesia/minimal sedation.

(b) A practitioner who administers relative analgesia/minimal sedation shall have the following facilities, equipment and drugs available during the procedure and during recovery:

(1) An operating room large enough to adequately accommodate
19 the patient on an operating table or in an operating chair and to
20 allow delivery of age appropriate care in an emergency situation;

(2) An operating table or chair which permits the patient to positioned so that the patient's airway can be maintained, and quickly alter the patient's position in an emergency and provide a firm platform for the administration of basic life support;

1 (3) A lighting system which permits evaluation of the 2 patient's skin and mucosa color and a backup lighting system of 3 sufficient intensity to permit completion of any operation underway 4 in the event of a general power failure;

5 (4) Suction equipment which permits aspiration of the oral and6 pharyngeal cavities;

7 (5) An oxygen delivery system with adequate age appropriate 8 full face masks and appropriate connectors that is capable of 9 delivering high flow oxygen to the patient under positive pressure, 10 together with an adequate backup system;

11 (6) A nitrous oxide delivery system with a fail-safe mechanism 12 that will ensure appropriate continuous oxygen delivery and a 13 scavenger system; and

14 (7) A defibrillator device: *Provided*, That this requirement is 15 only for Class 2, 3 and 4 permitees.

16 (c) All equipment used shall be appropriate for the height and 17 weight and age of the patient.

18 (d) Before inducing relative analgesia/minimal sedation by 19 means of nitrous oxide or a single premedication agent, a 20 practitioner shall:

21 (1) Evaluate the patient;

(2) Give instruction to the patient or, when appropriate due 23 to age or psychological status of the patient, the patient's 24 guardian; and

(3) Certify that the patient is an appropriate candidate for
 2 relative analgesia/minimal sedation.

3 (e) A practitioner who administers relative analgesia/minimal 4 sedation shall see that the patient's condition is visually 5 monitored. At all times, the patient shall be observed by a 6 qualified monitor until discharge criteria have been met.

7 (f) A qualified monitor's record shall include documentation 8 of all medications administered with dosages, time intervals and 9 route of administration including local anesthesia.

10 (g) A discharge entry shall be made in the patient's record 11 indicating the patient's condition upon discharge.

12 (h) A qualified monitor shall hold valid and current 13 documentation:

14 (1) Showing successful completion of a Health Care Provider 15 BLS/CPR course; and

16 (2) Have received training and be competent in the recognition 17 and treatment of medical emergencies, monitoring vital signs, the 18 operation of nitrous oxide delivery systems and the use of the 19 sphygmomanometer and stethoscope.

(i) The practitioner shall assess the patient's responsiveness using preoperative values as normal guidelines and discharge the patient only when the following criteria are met:

(1) The patient is alert and oriented to person, place andtime as appropriate to age and preoperative neurological status;

1 (2) The patient can talk and respond coherently to verbal 2 questioning or to preoperative neurological status;

3 (3) The patient can sit up unaided or without assistance or to4 preoperative neurological status;

5 (4) The patient can ambulate with minimal assistance or to 6 preoperative neurological status; and

7 (5) The patient does not have uncontrollable nausea, vomiting8 or dizziness.

9 §30-4A-5. Qualifications, standards, and continuing education 10 requirements for a Class 2 Permit.

11 (a) The board shall issue a Class 2 Permit to an applicant 12 who:

13 (1) Is a licensed dentist in West Virginia;

14 (2) Holds valid and current documentation showing successful15 completion of a Health Care Provider BLS/CPR; and

16 (3) Has completed a board approved course of at least six 17 hours didactic and clinical of either predoctoral dental school or 18 postgraduate instruction.

(b) A dentist who induces relative analgesia/minimal sedation and anxiolysis/minimal sedation shall have the following facilities, properly maintained equipment and appropriate drugs available during the procedures and during recovery:

(1) An operating room large enough to adequately accommodate24 the patient on an operating table or in an operating chair and to

1 allow an operating team of at least two individuals to freely move
2 about the patient;

3 (2) An operating table or chair which permits the patient to 4 be positioned so the operating team can maintain the patient's 5 airway, quickly alter the patient's position in an emergency and 6 provide a firm platform for the administration of basic life 7 support;

8 (3) A lighting system which permits evaluation of the 9 patient's skin and mucosal color and a backup lighting system of 10 sufficient intensity to permit completion of any operation underway 11 in the event of a general power failure;

12 (4) Suction equipment which permits aspiration of the oral and 13 pharyngeal cavities;

14 (5) An oxygen delivery system with adequate age appropriate 15 full face mask and appropriate connectors that is capable of 16 delivering high flow oxygen to the patient under positive pressure, 17 together with an adequate backup system;

18 (6) A nitrous oxide delivery system with a fail-safe mechanism 19 that will ensure appropriate continuous oxygen delivery and a 20 scavenger system;

(7) A recovery area that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area can be the operating room;

24 (8) Sphygmomanometer, stethoscope and pulse oximeter;

1 (9) Emergency drugs as specified by rule;

2 (10) A defibrillator device; and

3 (11) All equipment and medication dosages shall be in 4 accordance with the height and weight and age of the patient being 5 treated.

6 (c) Before inducing anxiolysis/minimal sedation, a dentist 7 shall:

8 (1) Evaluate the patient by using the ASA Patient Physical 9 Status Classification of the ASA that the patient is an appropriate 10 candidate for anxiolysis/minimal sedation; and

11 (2) Obtain written informed consent from the patient or 12 patient's guardian for the anesthesia. The obtaining of the 13 informed consent shall be documented in the patient's record.

(d) The dentist shall monitor and record the patient's condition or shall use a qualified monitor to monitor and record the patient's condition. The documented requirements of a qualified monitor monitoring anxiolysis/minimal sedation cases are as specified by rule. A Class 2 Permit holder may have no more than one person under anxiolysis/minimal sedation at the same time.

20 (e) The patient shall be monitored as follows:

(1) Patients shall have continuous monitoring using pulse oximetry. The patient's blood pressure, heart rate and respiration shall be recorded at least once before, during and after the procedure and these recordings shall be documented in the patient

1 record. At all times, the patient shall be observed by a qualified 2 monitor until discharge criteria have been met. If the dentist is 3 unable to obtain this information, the reasons shall be documented 4 in the patient's record. The record shall also include 5 documentation of all medications administered with dosages, time 6 intervals and route of administration including local anesthesia.

7 (2) A discharge entry shall be made by the dentist in the 8 patient's record indicating the patient's condition upon discharge. 9 (f) A permit holder who uses anxiolysis/minimal sedation shall 10 see that the patient's condition is visually monitored. The 11 patient shall be monitored as to response to verbal stimulation, 12 oral mucosal color and preoperative and postoperative vital signs. 13 (g) The dentist shall assess the patient's responsiveness 14 using preoperative values as normal guidelines and discharge the 15 patient only when the following criteria are met:

16 (1) Vital signs including blood pressure, pulse rate and 17 respiratory rate are stable;

(2) The patient is alert and oriented to person, place and
19 time as appropriate to age and preoperative neurological status;
(3) The patient can talk and respond coherently to verbal
21 questioning or to preoperative neurological status;

22 (4) The patient can sit up unaided or to preoperative 23 neurological status;

24 (5) The patient can ambulate with minimal assistance or to

1 preoperative neurological status; and

2 (6) The patient does not have uncontrollable nausea or 3 vomiting and has minimal dizziness.

4 (h) A dentist may not release a patient who has undergone 5 anxiolysis/minimal sedation except to the care of a responsible 6 adult third party.

7 §30-4A-6. Qualifications, standards, and continuing education
 8 requirements for Class 3 Anesthesia Permit.

9 (a) The board shall issue or renew a Class 3 Permit to an 10 applicant who:

11 (1) Is a licensed dentist in West Virginia;

(2) Holds valid and current documentation showing successful
13 completion of a Health Care Provider BLS/CPR course, ACLS and/or a
14 PALS course if treating pediatric patients; and

15 (3) Satisfies one of the following criteria:

16 (A) Certificate of completion of a comprehensive training 17 program in conscious sedation that satisfies the requirements 18 described in the ADA Guidelines for Teaching Pain Control and 19 Sedation to Dentists and Dental Students and the ADA Guidelines for 20 the Use of Sedation and General Anesthesia by Dentists at the time 21 training was commenced.

22 (B) Certificate of completion of an ADA-accredited 23 postdoctoral training program which affords comprehensive and 24 appropriate training necessary to administer and manage conscious

1 sedation commensurate with these guidelines.

2 (C) In lieu of these requirements, the board may accept 3 documented evidence of equivalent training or experience in 4 conscious sedation anesthesia for Limited Enteral Permit as Class 5 3a or comprehensive Parenteral Permit as Class 3b as specified by 6 rule.

7 (b) A dentist who induces conscious sedation shall have the 8 following facilities, properly maintained age appropriate equipment 9 and age appropriate medications available during the procedures and 10 during recovery:

(1) An operating room large enough to adequately accommodate 12 the patient on an operating table or in an operating chair and to 13 allow an operating team of at least two individuals to freely move 14 about the patient;

15 (2) An operating table or chair which permits the patient to 16 be positioned so the operating team can maintain the patient's 17 airway, quickly alter the patient's position in an emergency, and 18 provide a firm platform for the administration of basic life 19 support;

20 (3) A lighting system which permits evaluation of the 21 patient's skin and mucosal color and a backup lighting system of 22 sufficient intensity to permit completion of any operation underway 23 in the event of a general power failure;

24 (4) Suction equipment which permits aspiration of the oral and

1 pharyngeal cavities and a backup suction device which will function 2 in the event of a general power failure;

3 (5) An oxygen delivery system with adequate age appropriate 4 full face mask and appropriate connectors that is capable of 5 delivering high flow oxygen to the patient under positive pressure, 6 together with an adequate backup system;

7 (6) A nitrous oxide delivery system with a fail-safe mechanism 8 that will ensure appropriate continuous oxygen delivery and a 9 scavenger system;

10 (7) A recovery area that has available oxygen, adequate 11 lighting, suction and electrical outlets. The recovery area can be 12 the operating room;

(8) Sphygmomanometer, pulse oximeter, oral and nasopharyngeal 14 airways, intravenous fluid administration equipment and/or 15 equipment required for the standard of care or as specified by 16 rule;

17 (9) Emergency drugs as specified by rule; and

18 (10) A defibrillator device.

19 (c) Before inducing conscious sedation, a dentist shall:

(1) Evaluate the patient and document, using the ASA Patient
Physical Status Classifications, that the patient is an appropriate
candidate for conscious sedation;

(2) Give written preoperative and postoperative instructions24 to the patient or, when appropriate due to age or neurological

1 status of the patient, the patient's guardian; and

2 (3) Obtain written informed consent from the patient or 3 patient's guardian for the anesthesia.

4 (d) The dentist shall ensure that the patient's condition is 5 monitored and recorded on a contemporaneous record. The dentist 6 shall use a qualified monitor to monitor and record the patient's 7 condition in addition to the chair side dental assistant. A 8 qualified monitor shall be present to monitor the patient at all 9 times.

10 (e) The patient shall be monitored as follows:

11 (1) Patients shall have continuous monitoring using pulse 12 oximetry and/or equipment required for the standard of care or as 13 specified by rule by a qualified monitor until discharge criteria 14 have been met. The documented requirements of a qualified monitor 15 monitoring limited enteral or comprehensive parenteral sedations 16 cases are as specified by rule. The patient's blood pressure, 17 heart rate and respiration shall be recorded every five minutes and 18 these recordings shall be documented in the patient record. The 19 record shall also include documentation of preoperative and 20 postoperative vital signs, all medications administered with 21 dosages, time intervals and route of administration including local 22 anesthesia. If the dentist is unable to obtain this information, 23 the reasons shall be documented in the patient's record.

24 (2) During the recovery phase, the patient shall be monitored

1 by a qualified monitor.

2 (3) A discharge entry shall be made by the dentist in the 3 patient's record indicating the patient's condition upon discharge 4 and the name of the responsible party to whom the patient was 5 discharged.

6 (f) A dentist may not release a patient who has undergone 7 conscious sedation/moderate sedation except to the care of a 8 responsible adult third party.

9 (g) When discharging a pediatric patient the dentist shall 10 follow the current edition of AAPD Guidelines for Monitoring and 11 Management of Pediatric Patients During and After Sedation for 12 Diagnostic and Therapeutic Procedures.

13 (h) The dentist shall assess the patient's responsiveness 14 using preoperative values as normal guidelines and discharge the 15 patient only when the following criteria are met:

16 (1) Vital signs including blood pressure, pulse rate and 17 respiratory rate are stable;

18 (2) The patient is alert and oriented to person, place and19 time as appropriate to age and preoperative neurological status;

20 (3) The patient can talk and respond coherently to verbal21 questioning or to preoperative neurological status;

22 (4) The patient can sit up unaided or to preoperative 23 neurological status;

24 (5) The patient can ambulate with minimal assistance or to

1 preoperative neurological status; and

2 (6) The patient does not have uncontrollable nausea or 3 vomiting and has minimal dizziness.

4 (i) A dentist who induces conscious sedation shall employ the 5 services of a qualified monitor and a chair side dental assistant 6 at all times who each shall hold a valid BLS/CPR certification and 7 maintains certification as specified by rule.

8 §30-4A-7. Qualifications, standards, and continuing education
 9 requirements for Class 4 Anesthesia Permit.

10 (a) A Class 4 Permit permits the use of general 11 anesthesia/deep conscious sedation, conscious sedation/moderate 12 sedation and anxiolysis/minimal sedation.

13 (b) The board shall issue or renew a Class 4 Permit to an 14 applicant who:

15 (1) Is a licensed dentist in West Virginia;

16 (2) Holds a valid and current documentation showing successful 17 completion of a Healthcare Provider BLS/CPR course, Advanced 18 Cardiac Life Support (ACLS) and/or Pediatric Advanced Life Support 19 (PALS) course if treating pediatric patients;

20 (3) Satisfies one of the following criteria:

(A) Completion of an advanced training program in anesthesia and related subjects beyond the undergraduate dental curriculum that satisfies the requirements described in the ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students

1 and the ADA Guidelines for the Use of Sedation and General 2 Anesthesia by Dentists at the time training was commenced;

3 (B) Completion of an ADA- or AMA-accredited postdoctoral 4 training program which affords comprehensive and appropriate 5 training necessary to administer and manage general anesthesia, 6 commensurate with these guidelines;

7 (C) In lieu of these requirements, the board may accept 8 documented evidence of equivalent training or experience in general 9 anesthesia/deep conscious sedation.

10 (c) A dentist who induces general anesthesia/deep conscious 11 sedation shall have the following facilities, properly maintained 12 age appropriate equipment and age appropriate drugs available 13 during the procedure and during recovery:

14 (1) An operating room large enough to adequately accommodate 15 the patient on an operating table or in an operating chair and to 16 allow an operating team of at least three individuals to freely 17 move about the patient;

18 (2) An operating table or chair which permits the patient to 19 be positioned so the operating team can maintain the patient's 20 airway, quickly alter the patient's position in an emergency and 21 provide a firm platform for the administration of basic life 22 support;

(3) A lighting system which permits evaluation of the24 patient's skin and mucosal color and a backup lighting system of

1 sufficient intensity to permit completion of any operation underway
2 in the event of a general power failure;

3 (4) Suction equipment which permits aspiration of the oral and 4 pharyngeal cavities and a backup suction device which will function 5 in the event of a general power failure;

6 (5) An oxygen delivery system with adequate age appropriate 7 full face mask and appropriate connectors that is capable of 8 delivering high flow oxygen to the patient under positive pressure, 9 together with an adequate backup system;

10 (6) A nitrous oxide delivery system with a fail-safe mechanism 11 that will insure appropriate continuous oxygen delivery and a 12 scavenger system;

13 (7) A recovery area that has available oxygen, adequate 14 lighting, suction and electrical outlets. The recovery area can be 15 the operating room;

16 (8) Equipment as specified by rule;

17 (9) Emergency drugs as specified by rule

18 (10) A defibrillator device.

19 (d) Before inducing general anesthesia/deep conscious sedation 20 the dentist shall:

(1) Evaluate the patient and document, using the ASA Patient
Physical Status Classifications, that the patient is an appropriate
candidate for general anesthesia or deep conscious sedation;

24 (2) Shall give written preoperative and postoperative

1 instructions to the patient or, when appropriate due to age or 2 neurological status of the patient, the patient's guardian; and

3 (3) Shall obtain written informed consent from the patient or4 patient's guardian for the anesthesia.

5 (e) A dentist who induces general anesthesia/deep conscious 6 sedation shall ensure that the patient's condition is monitored and 7 recorded on a contemporaneous record. The dentist shall use a 8 qualified monitor to monitor and record the patient's condition on 9 a contemporaneous record and a chair side dental assistant. The 10 documented requirements of a qualified monitor monitoring general 11 anesthesia/deep conscious sedation cases are as specified by rule. 12 No permit holder may have more than one patient under general 13 anesthesia at the same time.

14 (f) The patient shall be monitored as follows:

(1) Patients shall have continuous monitoring using pulse oximetry and/or equipment required for the standard of care or as repetitive by rule by a qualified monitor until discharge criteria have been met. The patient's blood pressure, heart rate and oxygen saturation shall be assessed every five minutes and shall be contemporaneously documented in the patient record. The record shall also include documentation of preoperative and postoperative vital signs, all medications administered with dosages, time intervals and route of administration including local anesthesia. The person administering the anesthesia may not leave the patient

1 while the patient is under general anesthesia;

(2) During the recovery phase, the patient shall be monitored,
including the use of pulse oximetry, by a qualified monitor; and
(3) A dentist may not release a patient who has undergone
general anesthesia/deep conscious sedation except to the care of a
responsible adult third party.

7 (4) When discharging a pediatric patient the dentist shall 8 follow the current edition of AAPD Guidelines for the Monitoring 9 and Management of Pediatric Patients During and After Sedation for 10 Diagnostic and Therapeutic Procedures.

11 (g) The dentist shall assess the patient's responsiveness 12 using preoperative values as normal guidelines and discharge the 13 patient only when the following criteria are met:

14 (1) Vital signs including blood pressure, pulse rate and 15 respiratory rate are stable;

16 (2) The patient is alert and oriented to person, place and17 time as appropriate to age and preoperative neurological status;

18 (3) The patient can talk and respond coherently to verbal19 questioning or to preoperative neurological status;

20 (4) The patient can sit up unaided or to preoperative 21 neurological status;

22 (5) The patient can ambulate with minimal assistance or to 23 preoperative neurological status; and

24 (6) The patient does not have uncontrollable nausea or

1 vomiting and has minimal dizziness.

2 (7) A discharge entry shall be made in the patient's record by 3 the dentist indicating the patient's condition upon discharge and 4 the name of the responsible party to whom the patient was 5 discharged.

6 (h) A dentist who induces general anesthesia shall employ the 7 services of a qualified monitor and a chair side dental assistant 8 at all times, who each shall hold a valid BLS/CPR certification and 9 maintains certification as specified by rule.

10 §30-4A-8. Board to review, inspect and reinspect dentists for 11 issuance of permits.

12 (a) By making application to the board for an anesthesia 13 permit, a dentist consents and authorizes the board to review his 14 or her credentials, inspect or reinspect his or her facilities and 15 investigate any alleged anesthesia mortalities, misadventure or 16 other adverse occurrences. The board shall conduct an in-office 17 review or on-site inspection of any dentist applying for or holding 18 a permit to administer anesthesia.

Prior to issuing a permit, the board shall conduct an on-site inspection of facility, equipment and auxiliary personnel of the applicant to determine if, in fact, all the requirements for the permit have been met. This inspection or evaluation, if required, shall be carried out by at least two members of the subcommittee. This evaluation is to be carried out in a manner following the

1 principles, but not necessarily the procedures, set forth by the 2 current edition of the AAOMS Office Anesthesia Evaluation Manual. 3 On-site inspections are required and shall be performed for all 4 Class 3a, 3b and 4 permitees. The board may reinspect annually, at 5 its discretion, but shall perform an on-site inspection for all 6 permit holders at least once every five years except Class 2 permit 7 holders. The board reserves the right to conduct an on-site 8 inspection whenever it deems necessary for all permit holders. All 9 on-site inspections shall be held during regular business hours.

10 (b) Cancellation or failure to appear or be present for a 11 scheduled evaluation by a permit holder, for an unexplained or 12 unexcusable reason, shall be assessed a penalty fee two times the 13 permit holders normal annual renewal fee. The penalty fee shall be 14 separate from the annual renewal fees.

#### 15 §30-4A-9. Office evaluations.

16 (a) The in-office evaluation shall include:

17 (1) Observation of one or more cases of anesthesia to 18 determine the appropriateness of technique and adequacy of patient 19 evaluation and care;

20 (2) Inspection of facilities, which shall include but not be 21 limited to, the inspection of equipment, drugs and patient records 22 and qualified monitor's certifications and documentation; and

(3) The evaluation shall be performed by a team appointed by24 the board and shall include a member of the subcommittee who holds

a current anesthesia permit in the same class or in a higher class
 than that held by the permit holder being evaluated.

3 (4) Class 2 permit holders may be audited periodically as 4 determined by the committee; and

5 (5) Class 3 and 4 permit holders shall be evaluated once every6 five years.

7 (b) A dentist utilizing a licensed dentist who holds a current 8 anesthesia permit issued by the board shall have his or her office 9 inspected to the level of a Class 4 permit as specified by section 10 twelve of this article. The office is only approved at that level 11 when the anesthesia permit holder is present and shall have the 12 number of qualified monitors present as required by this article. 13 (c) In addition to the requirements of this article, a 14 treating dentist who applies for a certificate to allow a CRNA to 15 administer anesthesia and sedation to a patient shall maintain a 16 permit as follows:

(1) A treating dentist who allows a CRNA to administer limited 18 enteral sedation to a patient shall maintain a Class 3a permit for 19 themselves and the administration site shall be inspected to a 20 Class 4 permit level;

(2) A treating dentist who allows a CRNA to administer 22 comprehensive parenteral sedation to a patient shall maintain a 23 Class 3b permit for themselves and the administration site shall be 24 inspected to a Class 4 permit level; and

1 (3) A treating dentist who allows a CRNA to administer general 2 anesthesia/deep conscious sedation to a patient shall maintain a 3 Class 4 permit for themselves and the administration site shall be 4 inspected to a Class 4 permit level.

#### 5 §30-4A-10. Reporting of Death, Serious Complications or Injury.

If a death, any serious complication or any injury occurs 6 7 which may have resulted from the administration of general 8 anesthesia/deep conscious sedation, conscious sedation/moderate 9 sedation, anxiolysis/minimal sedation, or relative 10 analgesia/minimal sedation, the licensee performing the dental 11 procedure shall submit a written detailed report to the board 12 within seventy-two hours of the incident along with copies of the 13 patient's original complete dental records. If the anesthetic 14 agent was administered by a person other than the person performing 15 the dental procedure, that person shall also submit a detailed 16 written report. The detailed report(s) shall include:

17 (1) Name, age and address of patient;

18 (2) Name of the licensee and other persons present during the19 incident along with their names and addresses;

20 (3) Address where the incident took place;

(4) Type of anesthesia and dosages of drugs administered to22 the patient including local anesthesia;

(5) A narrative description of the incident including24 approximate times and evolution of symptoms; and

1 (6) The anesthesia record and the signed informed consent form 2 for the anesthesia.

#### 3 §30-4A-11. Immunity from liability.

4 (a) Notwithstanding any other provision of law, no person 5 providing information to the board or to the subcommittee may be 6 held, by reason of having provided the information, to be civilly 7 liable under any law unless the information was false and the 8 person providing information knew or had reason to believe the such 9 information was false.

10 (b) No member or employee of the board or the subcommittee may 11 be held by reason of the performance by him or her of any duty, 12 function or activity authorized or required of the board or the 13 subcommittee to be civilly liable. The foregoing provisions of 14 this subsection do not apply with respect to any action taken by 15 any individual if the individual, in taking the action, was 16 motivated by malice toward any person affected by the action.

#### 17 §30-4A-12. Facility Inspections.

(a) The board shall perform an onsite evaluation of Class 3
19 and 4 applicants dental facilities, equipment, techniques and
20 personnel prior to issuing a permit. The board may conduct further
21 on-site evaluations.

22 (b) The board may inspect Class 2 applicants facilities.

#### 23 §30-4A-13. Issuance of regular annual permits.

24 Upon the recommendation of the subcommittee, the board shall

1 issue permits to applicable dentists. An anesthesia permit shall 2 be renewed annually: Provided, That the permittee meets the 3 requirements of this article and has not been subject to 4 disciplinary action prohibiting issuance of the permit.

### 5 §30-4A-14. Waiting period for reapplication or reinspection of 6 facilities.

7 A dentist whose application has been denied for failure to 8 satisfy the requirements in the application procedure or the on-9 site evaluation shall wait thirty days from the date of the denial 10 prior to reapplying and shall submit to another on-site evaluation 11 prior to receiving a permit. The board and the subcommittee shall 12 promptly reinspect the applicant dentist's facilities, techniques, 13 equipment and personnel within ninety days after the applicant has 14 made reapplication.

## 15 \$30-4A-15. Application and annual renewal of regular permits; 16 fees.

17 The board shall require an initial application fee and an 18 annual renewal fee for Class 2, Class 3 and 4 Permits. Permits 19 expire annually. The board shall renew permits for the use of 20 anesthesia after the permittee satisfies the application for 21 renewal.

# 22 §30-4A-16. Violations of article; penalties for practicing anesthesia without a permit.

24 Violations of any of the provisions of this article, whether

1 intentional or unintentional, may result in the revocation or 2 suspension of the dentist's permit to administer anesthesia; 3 multiple or repeated violations or gross infractions, such as 4 practicing anesthesia without a valid permit may result in 5 suspension of the dentist's license to practice dentistry for up to 6 one year as well as other disciplinary measures as deemed 7 appropriate by the board.

## 8 §30-4A-17. Appointment of Subcommittee; credentials review; and on-site inspections.

10 (a) The board shall appoint a subcommittee to carry out the 11 review and on-site inspection of any dentist applying for or 12 renewing a permit under this article.

13 (b) The subcommittee shall make a recommendation for issuing14 or revoking a permit under this article.

15 (c) This subcommittee shall be known as the West Virginia 16 Board of Dentistry Subcommittee on Anesthesia. The subcommittee 17 shall, at a minimum, consist of one member of the board who shall 18 act as chairman of the subcommittee and two members holding a Class 19 4 permit and two members holding a Class 3 permit.

20 (d) The subcommittee shall adopt policies and procedures 21 related to the regulation of general anesthesia/deep conscious 22 sedation, conscious sedation/moderate sedation, anxiolysis/minimal 23 sedation, and relative analgesia/minimal sedation with the same 24 being approved by the board. The subcommittee members shall be

1 paid and reimbursed expenses pursuant to article one of this
2 chapter.

3 ARTICLE 4B. DENTAL LABORATORY SERVICES.

4 §30-4B-1. Unlawful acts.

5 (a) It is unlawful for any person, other than a dentist or 6 other dental practitioner, to sell, offer for sale or furnish any 7 dental prosthesis or other dental laboratory service to any person 8 who is not a dentist or other dental practitioner.

9 (b) It is unlawful for any person to perform dental laboratory 10 services without a work authorization: *Provided*, That this 11 subsection does not apply to a dentist or other dental 12 practitioner, or to their employees working under their direct 13 supervision, performing dental laboratory services as a part of 14 their own dental practice and for their own dental patients.

15 (c) It is unlawful for any dental laboratory to perform any 16 dental laboratory service without the issuance of a work 17 authorization by a dentist or other dental practitioner.

(d) It is unlawful for any dental laboratory or dentist who 19 fabricates a full upper or full lower set of prosthetic dentures 20 not to affix upon the dentures, in a nonremovable manner, the name 21 of the patient, the initials of the dentist's state of practice and 22 license identification.

(e) It is unlawful for any dental laboratory either directly24 or indirectly:

1 (1) To advertise that it is engaged in the business of 2 performing dental laboratory services;

3 (2) To advertise it performs dental laboratory services for 4 members of the public;

5 (3) To advertise a price for the performance of dental 6 laboratory services; or

7 (4) To advertise techniques used or materials employed by it 8 in the performance of dental laboratory services: *Provided*, That 9 this subsection does not prevent dental laboratories from 10 advertising in dental journals or in other professional dental 11 publications or from communicating directly to a dentist and other 12 dental practitioner or from listing the dental laboratory in 13 business and telephone directories if the business and telephone 14 directory announcements are limited to name, address and telephone 15 number and do not occupy more than the number of lines necessary to 16 disclose the information, or from displaying the trade name and 17 address of the dental laboratory on the door of its place of 18 business or on name plates or door plates exhibited on the interior 19 or exterior of the place of business.

20 §30-4B-2. Work authorization required; contents; retention.

(a) No dental laboratory technician may perform any dental laboratory service without the issuance of a work authorization by a dentist or other dental practitioner.

24 (b) Each work authorization shall contain:

(1) The name and address of the dental laboratory to which it
 2 is directed;

3 (2) The case identification;

4 (3) A specification of the materials to be used;

5 (4) A description of the work to be done and, if necessary,6 diagrams thereof;

7 (5) The date of issue; and

8 (6) The signature and address of the dentist or other dental 9 practitioner issuing the work authorization.

10 (c)A separate work authorization shall be issued for each 11 patient of the dentist or other dental practitioner for whom a 12 dental laboratory service is to be performed.

13 (d) Every work authorization shall be made in duplicate with 14 the original being delivered to the dental laboratory to which it 15 is directed and the copy being retained in the office of the 16 issuing dentist or other dental practitioner. A work authorization 17 shall be saved for a period of two years from its date of issue.

18 §30-4B-3. Denture identification.

A dental laboratory or a dentist who engages in dental laboratory services and who fabricates any full upper or full lower set of prosthetic dentures shall affix upon the dentures, in a nonremovable manner, the name of the patient for whom the dentures are made and the initials of the dentist's state of practice and license identification number.

### 1 §30-4B-4. Review of dental laboratory services.

2 The board may review the dental laboratory services of a 3 dental laboratory on a random and general basis without any 4 requirement of a formal complaint or suspicion of impropriety.