WEST VIRGINIA LEGISLATURE EIGHTY-FIRST LEGISLATURE

REGULAR SESSION, 2013

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ENROLLED

COMMITTEE SUBSTITUTE

FOR

Senate Bill No. 580

(SENATOR STOLLINGS, ORIGINAL SPONSOR)

[PASSED APRIL 13, 2013; IN EFFECT NINETY DAYS FROM PASSAGE.]

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(SENATOR STOLLINGS, original sponsor)

[Passed April 13, 2013; in effect ninety days from passage.]

AN ACT to repeal §30-4-8a, §30-4-10a, §30-4-25, §30-4-26, §30-4-27, §30-4-28 and §30-4-29 of the Code of West Virginia, 1931, as amended; to repeal §30-4A-6a, §30-4A-6b, §30-4A-6c, §30-4A-6d and §30-4A-18 of said code; to repeal §30-4B-5, §30-4B-6, §30-4B-7 and §30-4B-8 of said code; to amend and reenact §30-4-1, §30-4-2, §30-4-3, §30-4-4, §30-4-5, §30-4-6, §30-4-7, §30-4-8, §30-4-9, §30-4-10, \$30-4-11, \$30-4-12, \$30-4-13, \$30-4-14, \$30-4-15, \$30-4-16, \$30-4-17, \$30-4-18, \$30-4-19, \$30-4-20, \$30-4-21, \$30-4-22, §30-4-23 and §30-4-24 of said code; to amend and reenact §30-4A-1, §30-4A-2, §30-4A-3, §30-4A-4, §30-4A-5, §30-4A-6, §30-4A-7, §30-4A-8, §30-4A-9, §30-4A-10, §30-4A-11, §30-4A-12, §30-4A-13, §30-4A-14, §30-4A-15, §30-4A-16 and §30-4A-17 of said code; and to amend and reenact §30-4B-1, §30-4B-2, §30-4B-3 and §30-4B-4 of said code, all relating to the practice of dentistry; prohibiting the practice of dentistry without a license; providing other applicable sections; providing definitions; providing for board composition; setting forth the powers and duties of the board; clarifying rule-making authority; continuing a special revenue account; establishing license, certification and permit requirements; continuing a scope of practice; creating temporary permits; establishing renewal requirements; providing for exemptions from licensure; providing requirements for the display of a board authorization; permitting the board to file an injunction; setting forth grounds for disciplinary actions; allowing for specific disciplinary actions; providing procedures for investigation of complaints; providing for judicial review and appeals of decisions; setting forth hearing and notice requirements; providing for civil causes of action; providing criminal penalties; updating the requirements concerning the use of anesthesia; updating the requirements of dental laboratory services; and updating references.

Be it enacted by the Legislature of West Virginia:

That \$30-4-8a, \$30-4-10a, \$30-4-25, \$30-4-26, \$30-4-27, \$30-4-28 and \$30-4-29 of the Code of West Virginia, 1931, as amended, be repealed; that \$30-4A-6a, \$30-4A-6b, \$30-4A-6c, \$30-4A-6d and \$30-4A-18 of said code be repealed; that \$30-4B-5, \$30-4B-6, \$30-4B-7 and \$30-4B-8 of said code be repealed; that \$30-4-1, \$30-4-2, \$30-4-3, \$30-4-4, \$30-4-5, \$30-4-6, \$30-4-7, \$30-4-8, \$30-4-9, \$30-4-10, \$30-4-11, \$30-4-12, \$30-4-13, \$30-4-14, \$30-4-15, \$30-4-16, \$30-4-17, \$30-4-18, \$30-4-19, \$30-4-20, \$30-4-21, \$30-4-22, \$30-4-23 and \$30-4-24 of said code be amended and reenacted; that \$30-4A-1, \$30-4A-2, \$30-4A-3, \$30-4A-4, \$30-4A-5, \$30-4A-6, \$30-4A-7, \$30-4A-8, \$30-4A-9, \$30-4A-10, \$30-4A-11, \$30-4A-12, \$30-4A-13, \$30-4A-14, \$30-4A-15, \$30-4A-16 and \$30-4A-17 of said code be amended and reenacted; and that \$30-4B-1, \$30-4B-2, \$30-4B-3 and \$30-4B-4 of said code be amended and reenacted; all to read as follows:

ARTICLE 4. WEST VIRGINIA DENTAL PRACTICE ACT.

§30-4-1. Unlawful acts.

- 1 (a) It is unlawful for any person to practice or offer to 2 practice dentistry or dental hygiene in this state without a
- 3 license, issued under the provisions of this article, or

- 4 advertise or use any title or description tending to convey or
- 5 give the impression that they are a dentist or dental hygienist,
- 6 unless the person is licensed under the provisions of this 7 article.
- 8 (b) A business entity may not render any service or 9 engage in any activity which, if rendered or engaged in by an 10 individual, would constitute the practice of dentistry, except 11 through a licensee.

§30-4-2. Applicable law.

- 1 The practices authorized under the provisions of this
- 2 article and the Board of Dentistry are subject to article one of
- 3 this chapter, the provisions of this article and any rules
- 4 promulgated hereunder.

§30-4-3. Definitions.

- As used in articles four, four-a and four-b, the following
 words and terms have the following meanings:
- 3 (1) "AAOMS" means the American Association of Oral4 and Maxillofacial Surgeons;
- 5 (2) "AAPD" means the American Academy of Pediatric6 Dentistry;
- 7 (3) "ACLS" means Advanced Cardiac Life Support;
- 8 (4) "ADA" means the American Dental Association;
- 9 (5) "AMA" means the American Medical Association;
- 10 (6) "ASA" means American Society of Anesthesiologists;

3

(7) "Anxiolysis/minimal sedation" means removing, 11 12 eliminating or decreasing anxiety by the use of a single 13 anxiety or analgesia medication that is administered in an 14 amount consistent with the manufacturer's current 15 recommended dosage for the unsupervised treatment of 16 anxiety, insomnia or pain, in conjunction with nitrous oxide 17 and oxygen. This does not include multiple dosing or 18 exceeding current normal dosage limits set by the 19 manufacturer for unsupervised use by the patient at home for 20 the treatment of anxiety;

(8) "Approved dental hygiene program" means a program
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 Dental Accreditation of the 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 Dental Accreditation of the
American Dental Association;

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

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

38 (12) "Board" means the West Virginia Board of39 Dentistry;

40 (13) "Business entity" means any firm, partnership,
41 association, company, corporation, limited partnership,
42 limited liability company or other entity;

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

46 (15) "Certificate of qualification" means a certificate47 authorizing a dentist to practice a specialty;

48 (16) "CPR" means Cardiopulmonary Resuscitation;

49 (17) "Conscious sedation/Moderate sedation" means an 50 induced, controlled state of depressed consciousness, 51 produced through the administration of nitrous oxide and 52 oxygen and/or the administration of other agents whether 53 enteral or parenteral, in which the patient retains the ability 54 to independently and continuously maintain an airway and to 55 respond purposefully to physical stimulation and to verbal 56 command:

57 (18) "CRNA" means Certified Registered Nurse58 Anesthetist;

(19) "Defibrillator" means a device used to sustain
asthmetic heartbeat in an emergency and includes an
automatic electronic defibrillator (AED)

62 (20) "Delegated procedures" means those procedures
63 specified by law or by rule of the board and performed by
64 dental auxiliary personnel under the supervision of a licensed
65 dentist;

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

69 (22) "Dental assistant" means a person qualified by
70 education, training or experience who aids or assists a dentist
71 in the delivery of patient care in accordance with delegated

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procedures as specified by the board by rule or who mayperform nonclinical duties in the dental office;

74 (23) "Dental auxiliary personnel" or "auxiliary" means
75 dental hygienists and dental assistants who assist the dentist
76 in the practice of dentistry;

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

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

84 (26) "Dental laboratory" means a business performing85 dental laboratory services;

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

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

93 (29) "Dental office" means the place where the licensed94 dentist and dental auxiliary personnel are practicing dentistry;

95 (30) "Dental prosthesis" means an artificial appliance
96 fabricated to replace one or more teeth or other oral or
97 peri-oral structure in order to restore or alter function or
98 aesthetics;

99 (31) "Dentist" means an individual licensed by the board100 to practice dentistry;

101 (32) "Dentistry" means the evaluation, diagnosis,
102 prevention and treatment of diseases, disorders and
103 conditions of the oral cavity, maxillofacial area and the
104 adjacent and associated structures provided by a dentist;

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

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

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

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

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

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(38) "Good moral character" means a lack of history ofdishonesty;

- (39) "Health Care Provider BLS/CPR" means Health
 Care Provider Basic Life Support/Cardiopulmonary
 Resuscitation;
- 133 (40) "License" means a license to practice dentistry or134 dental hygiene;
- 135 (41) "Licensee" means a person holding a license;

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

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

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

- 151 (45) "PALS" means Pediatric Advanced Life Support;
- 152 (46) "Pediatric patient" means infants and children;

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

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

161 (49) "Public health setting" means hospitals, schools, 162 correctional facilities, jails, community clinics, long-term 163 care facilities, nursing homes, home health agencies, group 164 homes, state institutions under the West Virginia Department 165 of Health and Human Resources, public health facilities, 166 homebound settings, accredited dental hygiene education 167 programs and any other place designated by the board by 168 rule;

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

173 (51) "Relative analgesia/minimal sedation" means an 174 induced, controlled state of minimally depressed 175 consciousness produced solely by the inhalation of a 176 combination of nitrous oxide and oxygen or single oral 177 premedication without the addition of nitrous oxide and 178 oxygen in which the patient retains the ability to 179 independently and continuously maintain an airway and to 180 respond purposefully to physical stimulation and to verbal 181 command.

182 (52) "Specialty" means the practice of a certain branch of183 dentistry;

184 (53) "Subcommittee" means West Virginia Board of185 Dentistry Subcommittee on Anesthesia; and

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

§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.

- 8 (b) The Governor, by and with the advice and consent of9 the Senate, shall appoint:
- 10 (1) Six licensed dentists;
- 11 (2) One licensed dental hygienist;
- 12 (3) One nationally certified dental assistant or currently

practicing dental assistant with a minimum of ten yearsexperience; and

(4) One citizen member who is not licensed under the
provisions of this article and does not perform any services
related to the practice of dentistry.

18 (c) The West Virginia Dental Association may submit 19 recommendations to the Governor for the appointment of the 20 licensed dentists board members, the West Virginia 21 Association of Dental Hygienists may submit 22 recommendations to the Governor for the appointment of an 23 Dental Hygienist board member and the West Virginia Dental 24 Assistant Association may submit recommendations to the 25 Governor for the appointment of a dental assistant board 26 member.

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

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

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

43 (g) Each member of the board shall be a resident of this44 state during the appointment term.

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

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

51 (j) A licensed member of the board immediately and 52 automatically forfeits membership to the board if his or her 53 license to practice is suspended or revoked in any 54 jurisdiction.

(k) A member of the board immediately andautomatically forfeits membership to the board if he or she is

57 convicted of a felony under the laws of any jurisdiction or58 becomes a nonresident of this state.

- (1) The board shall elect annually one of its members as
 president and one member as secretary who shall serve at the
 will and pleasure of the board.
- 62 (m) Each member of the board is entitled to receive
 63 compensation and expense reimbursement in accordance with
 64 article one of this chapter.
- (n) A simple majority of the membership serving on the
 board at a given time is a quorum for the transaction of
 business.
- 68 (o) The board shall hold at least two meetings annually.
 69 Other meetings shall be held at the call of the president or
 70 upon the written request of four members, at the time and
 71 place as designated in the call or request.
- (p) Prior to commencing his or her duties as a member of
 the board, each member shall take and subscribe to the oath
 required by section five, article four of the Constitution of
 this state.
- (q) The members of the board, when acting in good faith
 and without malice, shall enjoy immunity from individual
 civil liability while acting within the scope of their duties as
 board members.

§30-4-5. Powers of the board.

- 1 The board has all the powers and duties set forth in this
- 2 article, by rule, in article one of this chapter and elsewhere in
- 3 law, including:
- 4 (1) Hold meetings;

13	[Enr. Com. Sub. for S. B. No. 580
5 6	(2) Establish procedures for submitting, approving and rejecting applications for a license, certificate and permit;
7 8	(3) Determine the qualifications of any applicant for a license, certificate and permit;
9 10	(4) Establish the fees charged under the provisions of this article;
11 12	(5) Issue, renew, deny, suspend, revoke or reinstate a license, certificate and permit;
13 14	(6) Prepare, conduct, administer and grade written, oral or written and oral examinations for a license;
15 16	(7) Contract with third parties to administer the examinations required under the provisions of this article;
17 18 19	(8) Maintain records of the examinations the board or a third-party administers, including the number of persons taking the examination and the pass and fail rate;
20 21 22 23	(9) Maintain an office and hire, discharge, establish the job requirements and fix the compensation of employees and contract with persons necessary to enforce the provisions of this article.
24 25 26 27	(10) Employ investigators, attorneys, hearing examiners, consultants and other employees as may be necessary who are exempt from the classified service and who serve at the will and pleasure of the board.
28 29 30	(11) Investigate alleged violations of the provisions of this article and articles four-a and four-b of this chapter and legislative rules, orders and final decisions of the board;

31 (12) Conduct disciplinary hearings of persons regulated32 by the board;

- 33 (13) Determine disciplinary action and issue orders;
- 34 (14) Institute appropriate legal action for the enforcement35 of the provisions of this article;
- 36 (15) Maintain an accurate registry of names and37 addresses of all persons regulated by the board;
- 38 (16) Keep accurate and complete records of its
 39 proceedings, and certify the same as may be necessary and
 40 appropriate;
- 41 (17) Propose rules in accordance with the provisions of
 42 article three, chapter twenty-nine-a of this code to implement
 43 the provisions of this article;
- 44 (18) Sue and be sued in its official name as an agency of45 this state; and
- 46 (19) Confer with the Attorney General or his or her47 assistant in connection with legal matters and questions.

§30-4-6. Rule-making authority.

- 1 (a) The board shall propose rules for legislative approval,
- 2 in accordance with the provisions of article three, chapter
- 3 twenty-nine-a of this code to implement the provisions of this
- 4 article and articles four-a and four-b of this chapter including:
- 5 (1) Standards and requirements for licenses, certifications6 and permits;

15	[Enr. Com. Sub. for S. B. No. 580
7	(2) Requirements for third parties to prepare and/or
8	administer examinations and reexaminations;
9	(3) Educational and experience requirements;
10	(4) Continuing education requirements and approval of
11	continuing education courses;
12	(5) Procedures for the issuance and renewal of licenses,
13	certifications and permits;
14	(6) Establish a fee schedule;
15	(7) Regulate dental specialities;
16	(8) Delegate procedures to be performed by a dental
17	hygienist;
18	(9) Delegate procedures to be performed by a dental
19	assistant;
20	(10) Designate the services and procedures performed
21	under direct supervision, general supervision in public health
22	practice;
23	(11) Designate additional public health settings;
24	(12) Regulate the use of firm or trade names;
25	(13) Regulate dental corporations;
26	(14) Regulate mobile dental facilities;
27	(15) Regulate portable dental units;
28	(16) Regulate professional limited liability companies;

29	(17) Establish professional conduct requirements;
30 31 32	(18) Establish the procedures for denying, suspending, revoking, reinstating or limiting the practice of licensees, certifications and permitees;
33 34	(19) Establish requirements for inactive or revoked licenses, certifications and permits;
35	(20) Regulate dental anesthesia, including:
36	(A) Fees;
37	(B) Evaluations;
38	(C) Equipment;
39	(D) Emergency drugs;
40	(E) Definitions;
41	(F) Qualified monitor requirements; and
42	(G) Education;
43	(21) Any other rules necessary to implement this article.
44 45 46	(b) All of the board's rules in effect and not in conflict with these provisions shall remain in effect until they are amended or rescinded.
§30-4	-7. Fees; special revenue account; administrative fines.

(a) All fees and other moneys, except administrative fines, received by the board shall be deposited in a separate special revenue fund in the State Treasury designated the

4 Board of Dentists and Dental Hygienist Special Fund, which

5 is continued and shall be known as the Board of Dentistry
6 Special Fund. The fund is used by the board for the
7 administration of this article. Except as may be provided in
8 article one of this chapter, the board retains the amount in the
9 special revenue account from year to year. No compensation
10 or expense incurred under this article is a charge against the
11 General Revenue Fund.

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

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

1 (a) The board shall issue a license to practice dentistry to 2 an applicant who meets the following requirements: 3 (1) Is at least eighteen years of age; 4 (2) Is of good moral character; 5 (3) Is a graduate of and has a diploma from a school 6 accredited by the Commission on Dental Accreditation or 7 equivalently approved dental college, school or dental 8 department of a university as determined by the board; 9 (4) Has passed the National Board examination as given 10 by the Joint Commission on National Dental Examinations 11 and a clinical examination as specified by the board by rule; 12 (5) Has not been found guilty of cheating, deception or 13 fraud in the examination or any part of the application; 14 (6) Has paid the application fee specified by rule; and 15 (7) Not be an alcohol or drug abuser, as these terms are 16 defined in section eleven, article one-a, chapter twenty-seven

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17 of this code: *Provided*, That an applicant in an active

- 18 recovery process, which may, in the discretion of the board, 19 be evidenced by participation in a twelve-step program or
- be evidenced by participation in a twelve-step program or
- 20 other similar group or process, may be considered.

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

§30-4-9. Scope of practice of a dentist.

- 1 The practice of dentistry includes the following:
- 2 (1) Coordinate dental services to meet the oral health3 needs of the patient;
- 4 (2) Examine, evaluate and diagnose diseases, disorders 5 and conditions of the oral cavity, maxillofacial area and 6 adjacent and 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
 12 adjacent and associated structures;
- 13 (5) Fabricate, repair or alter a dental prosthesis;

19	[Enr. Com. Sub. for S. B. No. 580			
14 15	(6) Administer anesthesia in accordance with the provisions of 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			
18	required in the practice of dentistry;			
19	(9) Employ and supervise dental auxiliary personnel;			
20	(10) Authorize delegated procedures to be performed by			
21	dental auxiliary personnel; and			
22	(11) Perform any other work included in the curriculum			
23	of an approved dental school, college or dental department of			
24	a university.			
§30-4-10. License to practice dental hygiene.				
1	(a) The board shall issue a dental hygienist license to an			
2	applicant who meets the following requirements:			

- 3 (1) Is at least eighteen years of age;
- 4 (2) Is of good moral character;

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

- 8 (4) Has passed the national board dental hygiene 9 examination, a regional or state clinical examination and a 10 state law examination that tests the applicant's knowledge of 11 subjects specified by the board by rule;
- 12 (5) Has not been found guilty of cheating, deception or13 fraud in the examination or any part of the application;

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

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

- good standing on the effective date of the amendments to this
 section shall for all purposes be considered a dental hygienist
 license issued under this section: *Provided*. That a person
- license issued under this section: *Provided*, That a personholding a dental hygienist license shall renew the license.

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

- 1 The practice of dental hygiene includes the following:
- 2 (1) Perform a complete prophylaxis, including the
 3 removal of any deposit, accretion or stain from supra and
 4 subgingival, the surface of a tooth or a restoration;
- 5 (2) Apply a medicinal agent to a tooth for a prophylactic6 purpose;
- 7 (3) Take a radiograph for interpretation by a dentist;
- 8 (4) Instruct a patient on proper oral hygiene practice;

9 (5) Place sealants on a patient's teeth without a prior 10 examination by a licensed dentist: *Provided*, That for this 11 subdivision, the dental hygienist has a public health practice 12 permit issued by the board, and subject to a collaborative 13 agreement with a supervising dentist and the patient is 14 referred for a dental examination within six months of sealant 15 application;

- [Enr. Com. Sub. for S. B. No. 580
 (6) Perform all delegated procedures of a dental hygienist
 specified by rule by the board; and
- 18 (7) Performing all delegated procedures of a dental19 assistant specified by rule by the board.

§30-4-12. License renewal.

- (a) All persons regulated by this article shall annually or
 biannually, renew his or her board authorization by
 completing a form prescribed by the board and submitting
 any other information required by the board.
- 5 (b) The board shall charge a fee for each renewal of a 6 board authorization and shall charge a late fee for any 7 renewal not paid by the due date.
- 8 (c) The board shall require as a condition of renewal that 9 each licensee, certificate holder or permittee complete 10 continuing education.
- (d) The board may deny an application for renewal forany reason which would justify the denial of an originalapplication.

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

- (a) The board shall prescribe the form for a board
 authorization, and may issue a duplicate upon payment of a
 fee.
- 4 (b) Any person regulated by the article shall 5 conspicuously display his or her board authorization at his or 6 her principal business location.

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

1 (a) The board may issue a dental intern or dental resident 2 permit to an applicant who has been accepted as a dental 3 intern or dental resident by a licensed hospital or dental 4 school in this state which maintains an established dental 5 department under the supervision of a licensed dentist and 6 meets the following qualifications: 7 (1) Has graduated from a Commission on Dental 8 Accreditation or equivalent approved dental college, school 9 or dental department of a university with a degree in 10 dentistry; 11 (2) Has paid the application fee specified by rule; and 12 (3) Meets the other qualifications specified by rule. 13 (b) The dental intern or dental resident permit may be 14 renewed and expires on the earlier of: 15 (1) The date the permit holder ceases to be a dental intern 16 or dental resident; or 17 (2) One year after the date of issue. 18 (c) The board may issue a teaching permit to an applicant 19 who is not otherwise licensed to practice dentistry in this 20 state and who meets the following conditions: 21 (1) Is authorized or is eligible, as determined by the 22 board, for a authorization to practice dentistry in another 23 jurisdiction; 24 (2) Has met or been approved under the credentialing 25 standards of a dental school or an academic medical center 26 with which the person is to be affiliated: Provided, That the 27 dental school or academic medical center is accredited by the 28 Commission on Dental Accreditation or Joint Commission on 29 Accreditation of Health Care Organizations;

30 (3) The permittee may teach and practice dentistry in or
31 on behalf of a dental school or college offering a doctoral
32 degree in dentistry operated and conducted in this state, in
33 connection with an academic medical center or at any
34 teaching hospital adjacent to a dental school or an academic
35 medical center;

- 36 (4) Shall successfully complete the West Virginia Dental37 Law Examination;
- 38 (5) Shall pay annual renewal fees to the board;
- 39 (6) Shall comply with continuing education requirements;40 and
- 41 (7) Has had no disciplinary actions taken or pending42 against him or her by any other jurisdiction.
- 43 (d) A teaching permit may be renewed annually with a44 written recommendation from the dental school dean.
- (e) While in effect, a permittee is subject to the
 restrictions and requirements imposed by this article to the
 same extent as a licensee. In addition, a permittee may not
 receive any fee for service other than a salary paid by the
 hospital or dental school.

§30-4-15. Special volunteer dentist or dental hygienist license; civil immunity for voluntary services rendered to indigents.

1 (a) There is continued a special volunteer dentist and 2 dental hygienist license for dentist and dental hygienists 3 retired or retiring from the active practice of dentistry and 4 dental hygiene who wish to donate their expertise for the care 5 and treatment of indigent and needy patients in the clinic 6 setting of clinics organized, in whole or in part, for the

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7 delivery of health care services without charge. The special 8 volunteer dentist or dental hygienist license shall be issued by 9 the board to dentist or dental hygienists licensed or otherwise 10 eligible for licensure under this article and the legislative 11 rules promulgated hereunder without the payment of an 12 application fee, license fee or renewal fee, shall be issued for 13 the remainder of the licensing period and renewed consistent 14 with the boards other licensing requirements. The board shall 15 develop application forms for the special license provided in 16 this subsection which shall contain the dental hygienist's 17 acknowledgment that: 18 (1) The dentist or dental hygienist's practice under the 19 special volunteer dentist or dental hygienist license will be 20 exclusively devoted to providing dentistry or dental hygiene 21 care to needy and indigent persons in West Virginia; 22 (2) The dentist or dental hygienist will not receive any 23 payment or compensation, either direct or indirect, or have 24 the expectation of any payment or compensation, for any 25 dentistry or dental hygiene services rendered under the 26 special volunteer dentist or dental hygienist license; 27 (3) The dentist or dental hygienist will supply any 28 supporting documentation that the board may reasonably 29 require; and 30 (4) The dentist or dental hygienist agrees to continue to 31 participate in continuing professional education as required 32 by the board for the special volunteer dentist or dental 33 hygienist.

34 (b) Any dentist or dental hygienist who renders any
35 dentistry or dental hygiene service to indigent and needy
36 patients of a clinic organized, in whole or in part, for the
37 delivery of health care services without charge under a

38 special volunteer dentist or dental hygienist license 39 authorized under subsection (a) of this section without 40 payment or compensation or the expectation or promise of 41 payment or compensation is immune from liability for any 42 civil action arising out of any act or omission resulting from 43 the rendering of the dental hygiene service at the clinic unless 44 the act or omission was the result of the dentist's or dental 45 hygienist's gross negligence or willful misconduct. In order 46 for the immunity under this subsection to apply, there shall be 47 a written agreement between the dentist or dental hygienist 48 and the clinic pursuant to which the dentist or dental 49 hygienist will provide voluntary uncompensated dental 50 hygiene services under the control of the clinic to patients of 51 the clinic before the rendering of any services by the dentist 52 or dental hygienist at the clinic: Provided, That any clinic 53 entering into such written agreement is required to maintain 54 liability coverage of not less than one million dollars per 55 occurrence.

56 (c) Notwithstanding the provisions of subsection (b) of 57 this section, a clinic organized, in whole or in part, for the 58 delivery of health care services without charge is not relieved 59 from imputed liability for the negligent acts of a dentist or 60 dental hygienist rendering voluntary dental hygiene services 61 at or for the clinic under a special volunteer dentist or dental 62 hygienist license authorized under subsection (a) of this 63 section.

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

(e) Nothing in this section may be construed as requiringthe board to issue a special volunteer dentist or dental

72 hygienist license to any dental hygienist whose license is or 73 has been subject to any disciplinary action or to any dentist 74 or dental hygienist who has surrendered a license or caused 75 such license to lapse, expire and become invalid in lieu of 76 having a complaint initiated or other action taken against his 77 or her dentist or dental hygienist license, or who has elected 78 to place a dentist or dental hygienist license in inactive status in lieu of having a complaint initiated or other action taken 79 80 against his or her license, or who has been denied a dentist or 81 dental hygienist license.

82 (f) Any policy or contract of liability insurance providing 83 coverage for liability sold, issued or delivered in this state to any dentist or dental hygienist covered under the provisions 84 85 of this article shall be read so as to contain a provision or 86 endorsement whereby the company issuing such policy 87 waives or agrees not to assert as a defense on behalf of the 88 policyholder or any beneficiary thereof, to any claim covered by the terms of such policy within the policy limits, the 89 immunity from liability of the insured by reason of the care 90 91 and treatment of needy and indigent patients by a dentist or 92 dental hygienist who holds a special volunteer dentist or 93 dental hygienist license.

§30-4-16. Dental corporations.

- 1 (a) Dental corporations are continued.
- (b) One or more dentists may organize and become a
 shareholder or shareholders of a dental corporation domiciled
 within this state under the terms and conditions and subject
 to the limitations and restrictions specified by rule.
- 6 (c) No corporation may practice dentistry, or any of its
 7 branches, or hold itself out as being capable of doing so
 8 without a certificate of authorization from the board.

9 (d) When the Secretary of State receives a certificate of 10 authorization to act as a dental corporation from the board, he 11 or she shall attach the authorization to the corporation 12 application and, upon compliance with the applicable 13 provisions of chapter thirty-one of this code, the Secretary of 14 State shall issue to the incorporators a certificate of 15 incorporation for the dental corporation.

(e) A corporation holding a certificate of authorization
shall renew annually, on or before June 30, on a form
prescribed by the board and pay an annual fee in an amount
specified by rule.

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

24 (g) A dental corporation holding a certificate of 25 authorization shall cease to engage in the practice of dentistry 26 upon being notified by the board that any of its shareholders 27 is no longer a licensed dentist or when any shares of the 28 corporation have been sold or disposed of to a person who is 29 not a licensed dentist: Provided, That the personal 30 representative of a deceased shareholder has a period, not to 31 exceed twenty-four months from the date of the shareholder's 32 death, to dispose of the shares; but nothing contained herein 33 may be construed as affecting the existence of the corporation 34 or its right to continue to operate for all lawful purposes other 35 than the practice of dentistry.

§30-4-17. Reinstatement.

- 1 (a) A licensee against whom disciplinary action has been
- 2 taken under the provisions of this article shall be afforded an
- 3 opportunity to demonstrate the qualifications to resume

- 4 practice. The application for reinstatement shall be in writing
- 5 and subject to the procedures specified by the board by rule.
- 6 (b) A licensee who does not complete annual renewal, as
 7 specified by the board by rule, and whose license has lapsed
 8 for one year or longer, shall make application for
 9 reinstatement as specified by the board by rule.
- (c) The board, at its discretion and for cause, may require
 an applicant for reinstatement to undergo a physical and/or
 mental evaluation to determine a licensee is competent to
- 13 practice or if the licensee is impaired by drugs or alcohol.

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

- 1 (a) If the board obtains information that any person has 2 engaged in, is engaging in or is about to engage in any act which constitutes or will constitute a violation of the 3 4 provisions of this article, the rules promulgated pursuant to 5 this article or a final order or decision of the board, it may 6 issue a notice to the person to cease and desist in engaging in 7 the act and/or apply to the circuit court in the county of the 8 alleged violation for an order enjoining the act.
- 9 (b) The circuit court may issue a temporary injunction 10 pending a decision on the merits and may issue a permanent 11 injunction based on its findings in the case.
- (c) The judgment of the circuit court on an application
 permitted by the provisions of this section is final unless
 reversed, vacated or modified on appeal to the West Virginia
 Supreme Court of Appeals.

§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 4 to determine whether grounds exist for disciplinary action 5 under this article or the legislative rules promulgated 6 pursuant to this article.

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

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

15 (d) Upon a finding that probable cause exists that the licensee, certificate holder or permittee has violated 16 17 subsection (g) of this section or rules promulgated pursuant 18 to this article, the board may enter into a consent decree or 19 hold a hearing for disciplinary action against the licensee, 20 certificate holder or permittee. Any hearing shall be held in 21 accordance with the provisions of this article and shall 22 require a violation to be proven by a preponderance of the 23 evidence.

(e) A member of the complaint committee or the
executive director of the board may issue subpoenas and
subpoenas duces tecum to obtain testimony and documents to
aid in the investigation of allegations against any person
regulated by the article.

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

32 (g) The board may, after notice and opportunity for 33 hearing, deny or refuse to renew, suspend, restrict or revoke 34 the license, certificate or permit of, or impose probationary 35 conditions upon or take disciplinary action against, any 36 licensee, certificate holder or permittee for any of the 37 following reasons: 38 (1) Obtaining a board authorization by fraud. 39 misrepresentation or concealment of material facts; 40 (2) Being convicted of a felony or a misdemeanor crime 41 of moral turpitude; 42 (3) Being guilty of unprofessional conduct which placed 43 the public at risk, as defined by legislative rule of the board; 44 (4) Intentional violation of a lawful order or legislative 45 rule of the board: 46 (5) Having had a board authorization revoked or 47 suspended, other disciplinary action taken, or an application 48 for a board authorization denied by the proper authorities of 49 another jurisdiction; 50 (6) Aiding or abetting unlicensed practice; 51 (7) Engaging in an act while acting in a professional 52 capacity which has endangered or is likely to endanger the 53 health, welfare or safety of the public; 54 (8) Having an incapacity that prevents a licensee from 55 engaging in the practice of dentistry or dental hygiene, with 56 reasonable skill, competence and safety to the public; 57 (9) Committing fraud in connection with the practice of 58 dentistry or dental hygiene;

31	[Enr. Com. Sub. for S. B. No. 580
59	(10) Failing to report to the board one's surrender of a
60	license or authorization to practice dentistry or dental hygiene
61	in another jurisdiction while under disciplinary investigation
62	by any of those authorities or bodies for conduct that would
63	constitute grounds for action as defined in this section;
64	(11) Failing to report to the board any adverse judgment,
65	settlement or award arising from a malpractice claim arising
66	related to conduct that would constitute grounds for action as
67	defined in this section;
68	(12) Being guilty of unprofessional conduct as contained
69	in the American Dental Association principles of ethics and
70	code of professional conduct. The following acts are
71	conclusively presumed to be unprofessional conduct:
72	(A) Being guilty of any fraud or deception;
73	(B) Committing a criminal operation or being convicted
74	of a crime involving moral turpitude;
75	(C) Abusing alcohol or drugs;
76	(D) Violating any professional confidence or disclosing
77	any professional secret;
78	(E) Being grossly immoral;
79	(F) Harassing, abusing, intimidating, insulting, degrading
80	or humiliating a patient physically, verbally or through
81	another form of communication;
82	(G) Obtaining any fee by fraud or misrepresentation;
83	(H) Employing directly or indirectly, or directing or
84	permitting any suspended or unlicensed person so employed,
85	to perform operations of any kind or to treat lesions of the

86 human teeth or jaws or correct malimposed formations87 thereof;

88 (I) Practicing, or offering or undertaking to practice
89 dentistry under any firm name or trade name not approved by
90 the 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 or itself out in any manner contrary to this article;
- 96 (K) Making use of any advertising relating to the use of97 any drug or medicine of unknown formula;
- 98 (L) Advertising to practice dentistry or perform any99 operation thereunder without causing pain;
- 100 (M) Advertising professional superiority or the 101 performance of professional services in a superior manner;
- 102 (N) Advertising to guarantee any dental service;
- 103 (O) Advertising in any manner that is false or misleading104 in any material respect;

105 (P) Soliciting subscriptions from individuals within or without the state for, or advertising or offering to individuals 106 107 within or without the state, a course or instruction or course 108 materials in any phase, part or branch of dentistry or dental 109 hygiene in any journal, newspaper, magazine or dental publication, or by means of radio, television or United States 110 111 mail, or in or by any other means of contacting individuals: 112 *Provided*, That the provisions of this paragraph may not be 113 construed so as to prohibit:

114 (i) An individual dentist or dental hygienist from 115 presenting articles pertaining to procedures or technique to 116 state or national journals or accepted dental publications; or 117 (ii) educational institutions approved by the board from 118 offering courses or instruction or course materials to 119 individual dentists and dental hygienists from within or 120 without the state; or (Q) Engaging in any action or conduct which would have 121 122 warranted the denial of the license. 123 (13) Knowing or suspecting that a licensee is incapable 124 of engaging in the practice of dentistry or dental hygiene, 125 with reasonable skill, competence and safety to the public, 126 and failing to report any relevant information to the board; 127 (14) Using or disclosing protected health information in 128 an unauthorized or unlawful manner; 129 (15) Engaging in any conduct that subverts or attempts to 130 subvert any licensing examination or the administration of 131 any licensing examination; 132 (16) Failing to furnish to the board or its representatives 133 any information legally requested by the board or failing to cooperate with or engaging in any conduct which obstructs 134 135 an investigation being conducted by the board; 136 (17) Announcing or otherwise holding himself or herself 137 out to the public as a specialist or as being specially qualified 138 in any particular branch of dentistry or as giving special 139 attention to any branch of dentistry or as limiting his or her 140 practice to any branch of dentistry without first complying 141 with the requirements established by the board for the 142 specialty and having been issued a certificate of qualification

143 in the specialty by the board;

144 (18) Failing to report to the board within seventy-two 145 hours of becoming aware thereof any life threatening occurrence, serious injury or death of a patient resulting from 146 147 dental treatment or complications following a dental 148 procedure; 149 (19) Failing to report to the board any driving under the 150 influence and/or driving while intoxicated offense; or 151 (20) Violation of any of the terms or conditions of any 152 order entered in any disciplinary action. 153 (h) For the purposes of subsection (g) of this section, 154 effective July 1, 2013, disciplinary action may include: 155 (1) Reprimand; 156 (2) Probation; 157 (3) Restrictions; 158 (4) Suspension; 159 (5) Revocation; 160 (6) Administrative fine, not to exceed \$1,000 per day per 161 violation; 162 (7) Mandatory attendance at continuing education 163 seminars or other training; 164 (8) Practicing under supervision or other restriction; or 165 (9) Requiring the licensee or permittee to report to the board for periodic interviews for a specified period of time. 166

(i) In addition to any other sanction imposed, the boardmay require a licensee or permittee to pay the costs of theproceeding.

170 (i) A person authorized to practice under this article who 171 reports or otherwise provides evidence of the negligence, impairment or incompetence of another member of this 172 profession to the board or to any peer review organization is 173 174 not liable to any person for making the report if the report is 175 made without actual malice and in the reasonable belief that 176 the report is warranted by the facts known to him or her at the 177 time.

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

- (a) Hearings are governed by the provisions of section
 eight, article one of this chapter.
- 3 (b) The board may conduct the hearing or elect to have an4 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 7 a proposed written order containing findings of fact and 8 conclusions of law. The proposed order may contain 9 proposed disciplinary actions if the board so directs. The 10 board may accept, reject or modify the decision of the 11 administrative law judge.

12 (d) Any member or the executive director of the board13 has the authority to administer oaths, examine any person14 under oath.

(e) If, after a hearing, the board determines the licensee
or permittee has violated provisions of this article or the
board's rules, a formal written decision shall be prepared

35

- 18 which contains findings of fact, conclusions of law and a
- 19 specific description of the disciplinary actions imposed.

§30-4-21. Judicial review.

1 A person adversely affected by a decision of the board 2 denying an application or entered after a hearing may obtain 3 judicial review of the decision in accordance with section 4 four, article five, chapter twenty-nine-a of this code and may 5 appeal any ruling resulting from judicial review in 6 accordance with article six of said chapter.

§30-4-22. Criminal offenses.

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

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

13 (1) Expired, suspended or lapsed; or

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

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

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

§30-4-24. Inapplicability of article.

1 The provisions of this article do not apply to:

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

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

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

(4) A student enrolled in and regularly attending anydental college, recognized by the board, practicing dentistry

in a public health setting, provided their acts are done under 25

- 26 the direct supervision of their instructor, adjunct instructor or 27
- a dentist:
- 28 (5) An authorized dentist of another state temporarily 29 operating a clinic under the auspices of a organized and 30 reputable dental college or reputable dental society, or to one 31 lecturing before a reputable society composed exclusively of 32 dentists: or
- 33 (6) A dentists whose practice is confined exclusively to 34 the service of the United States Army, the United States 35 Navy, the United States Air Force, The United States Coast 36 Guard, the United States Public Health Service, the United 37 States Veteran's Bureau or any other authorized United 38 States government agency or bureau.

ARTICLE 4A. ADMINISTRATION OF ANESTHESIA BY DENTISTS.

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

1 (a) No dentist may induce central nervous system 2 anesthesia without first having obtained an anesthesia permit 3 for the level of anesthesia being induced.

- 4 (b) The applicant for an anesthesia permit shall pay the 5 appropriate permit fees and renewal fees, submit a completed 6 board-approved application and consent to an office 7 evaluation.
- 8 (c) Permits shall be issued to coincide with the annual 9 renewal dates for licensure.
- 10 (d) Permit holders shall report the names and 11 qualifications of each qualified monitor providing services to

12 that permit holder. A qualified monitor may not perform the 13 functions and responsibilities specified in this article for any 14 level of anesthesia, other than relative analgesia/minimal sedation, without certification by the board. Qualified 15 16 monitors shall apply for certification and pay the appropriate 17 application fees and renewal fees. Qualified monitors are 18 required to renew annually by the 30th day of June. To be 19 certified as a qualified monitor, the applicant must meet the 20 following minimum qualifications:

(1) Possess a current health care provider BLS/CPRcertification;

(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

- 27 (3) For monitoring a nitrous oxide unit, successful
 28 completion of a board-approved course in nitrous oxide
 29 monitoring.
- 30 (e) A dentist shall hold a class permit equivalent to or
 31 exceeding the anesthesia level being provided unless the
 32 provider of anesthesia is a physician anesthesiologist or
 33 another licensed dentist who holds a current anesthesia permit
 34 issued by the board.

§30-4A-2. Presumption of Degree of Central Nervous System Depression.

(a) In any hearing where a question exists as to the level
 of central nervous system depression a licensee has induced,
 as outlined in this article, the board may base its findings on,
 among other things, the types, dosages and routes of
 administration of drugs administered to the patient and what
 result can reasonably be expected from those drugs in those

- 7 dosages and routes administered in a patient of that physical
- 8 and psychological status.
- 9 (b) No permit holder may have more than one person 10 under conscious sedation/moderate sedation and/or general 11 anesthesia/deep conscious sedation at the same time,
- 12 exclusive of recovery.

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

- 1 (a) The board shall issue the following permits:
- 2 (1) Class 2 Permit: A Class 2 Permit authorizes a dentist
 3 to induce anxiolysis/minimal sedation.
- 4 (2) Class 3 Permit: A Class 3 Permit authorizes a dentist 5 to induce conscious sedation/moderate sedation as limited 6 enteral (3a) and/or comprehensive parenteral (3b) and 7 anxiolysis/minimal sedation.
- 8 (3) Class 4 Permit: A Class 4 Permit authorizes a dentist
 9 to induce general anesthesia/deep conscious sedation,
 10 conscious sedation/moderate sedation and anxiolysis/minimal
 11 sedation.
- 12 (b) When anesthesia services are provided in dental 13 facilities by a medical doctor or doctor of osteopathy 14 physician anesthesiologist or dentist anesthesiologist, the 15 dental facility shall be inspected and approved for a Class 4 16 permit and the dentist shall have a minimum of a Class 2 17 permit. If anesthesia services are provided by a CRNA, the 18 dental facility shall be inspected and approved for a Class 4 19 permit and the supervising dentist shall have the same level 20 of permit for the level of anesthesia provided by the CRNA.

§30-4A-4. Qualifications, standards and continuing education requirements for relative analgesia/minimal sedation use.

- (a) The board shall allow administration of relative
 analgesia/minimal sedation if the practitioner:
- 3 (1) Is a licensed dentist in the state;
- 4 (2) Holds valid and current documentation showing
 5 successful completion of a Health Care Provider BLS/CPR
 6 course; and
- 7 (3) Has completed a training course of instruction in
 8 dental school, continuing education or as a postgraduate in
 9 the 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:
- 14 (1) An operating room large enough to adequately
 15 accommodate the patient on an operating table or in an
 16 operating chair and to allow delivery of age appropriate care
 17 in an emergency situation;
- (2) An operating table or chair which permits the patient
 to be positioned so that the patient's airway can be
 maintained, quickly alter the patient's position in an
 emergency and provide a firm platform for the administration
 of basic life support;
- (3) A lighting system which permits evaluation of the
 patient's skin and mucosal color and a backup lighting
 system of sufficient intensity to permit completion of any
 operation underway in the event of a general power failure;

27 (4) Suction equipment which permits aspiration of the28 oral and pharyngeal cavities;

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

33 (6) A nitrous oxide delivery system with a fail-safe
34 mechanism that will ensure appropriate continuous oxygen
35 delivery and a scavenger system; and

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

38 (c) All equipment used shall be appropriate for the height39 and weight and age of the patient.

- 40 (d) Before inducing relative analgesia/minimal sedation41 by means of nitrous oxide or a single premedication agent, a
- 42 practitioner shall:
- 43 (1) Evaluate the patient;

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

47 (3) Certify that the patient is an appropriate candidate for48 relative analgesia/minimal sedation.

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

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

- (g) A discharge entry shall be made in the patient'srecord indicating the patient's condition upon discharge.
- 60 (h) A qualified monitor shall hold valid and current61 documentation:
- 62 (1) Showing successful completion of a Health Care63 Provider BLS/CPR course; and

64 (2) Have received training and be competent in the
65 recognition and treatment of medical emergencies,
66 monitoring vital signs, the operation of nitrous oxide delivery
67 systems and the use of the sphygmomanometer and
68 stethoscope.

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

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

76 (2) The patient can talk and respond coherently to verbal77 questioning or to preoperative neurological status;

- (3) The patient can sit up unaided or without assistanceor to preoperative neurological status;
- 80 (4) The patient can ambulate with minimal assistance or81 to preoperative neurological status; and

82 (5) The patient does not have uncontrollable nausea,83 vomiting or dizziness.

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

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

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

4 (2) Holds valid and current documentation showing
5 successful completion of a Health Care Provider BLS/CPR;
6 and

7 (3) Has completed a board-approved course of at least six
8 hours didactic and clinical of either predoctoral dental school
9 or 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
accommodate the patient on an operating table or in an
operating chair and to allow an operating team of at least two
individuals to freely move about the patient;

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

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

- (4) Suction equipment which permits aspiration of theoral and pharyngeal cavities;
- 30 (5) An oxygen delivery system with adequate age
 31 appropriate full face mask and appropriate connectors that is
 32 capable of delivering high flow oxygen to the patient under
 33 positive pressure, together with an adequate backup system;
- 34 (6) A nitrous oxide delivery system with a fail-safe
 35 mechanism that will ensure appropriate continuous oxygen
 36 delivery and a scavenger system;
- 37 (7) A recovery area that has available oxygen, adequate
 38 lighting, suction and electrical outlets. The recovery area can
 39 be the operating room;
- 40 (8) Sphygmomanometer, stethoscope and pulse oximeter;
- 41 (9) Emergency drugs as specified by rule;
- 42 (10) A defibrillator device; and
- 43 (11) All equipment and medication dosages shall be in
 44 accordance with the height and weight and age of the patient
 45 being treated.
- 46 (c) Before inducing anxiolysis/minimal sedation, a dentist47 shall:
- 48 (1) Evaluate the patient by using the ASA Patient
 49 Physical Status Classification of the ASA that the patient is
 50 an appropriate candidate for anxiolysis/minimal sedation; and

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

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

62 (1) Patients shall have continuous monitoring using pulse 63 oximetry. The patient's blood pressure, heart rate and 64 respiration shall be recorded at least once before, during and 65 after the procedure and these recordings shall be documented 66 in the patient record. At all times, the patient shall be 67 observed by a qualified monitor until discharge criteria have 68 been met. If the dentist is unable to obtain this information, 69 the reasons shall be documented in the patient's record. The 70 record shall also include documentation of all medications 71 administered with dosages, time intervals and route of 72 administration including local anesthesia.

(2) A discharge entry shall be made by the dentist in the
patient's record indicating the patient's condition upon
discharge.

(f) A permit holder who uses anxiolysis/minimal sedation
shall see that the patient's condition is visually monitored.
The patient shall be monitored as to response to verbal
stimulation, oral mucosal color and preoperative and
postoperative vital signs.

47	[Enr. Com. Sub. for S. B. No. 580	
81 82 82	(g) The dentist shall assess the patient's responsiveness using preoperative values as normal guidelines and discharge	
83	the patient only when the following criteria are met:	
84 85	(1) Vital signs including blood pressure, pulse rate and respiratory rate are stable;	
86 87 88	(2) The patient is alert and oriented to person, place and time as appropriate to age and preoperative neurological status;	
89 90	(3) The patient can talk and respond coherently to verbal questioning or to preoperative neurological status;	
91 92	(4) The patient can sit up unaided or to preoperative neurological status;	
93 94	(5) The patient can ambulate with minimal assistance or to preoperative neurological status; and	
95 96	(6) The patient does not have uncontrollable nausea or vomiting and has minimal dizziness.	
97	(h) A dentist may not release a patient who has	
98	undergone anxiolysis/minimal sedation except to the care of	
99	a responsible adult third party.	
§30-4A-6. Qualifications, standards, and continuing education requirements for Class 3 Anesthesia Permit.		
1 2	(a) The board shall issue or renew a Class 3 Permit to an applicant who:	
3	(1) Is a licensed dentist in West Virginia;	

4 (2) Holds valid and current documentation showing 5 successful completion of a Health Care Provider BLS/CPR

- 6 course, ACLS and/or a PALS course if treating pediatric7 patients; and
- 8 (3) Satisfies one of the following criteria:

9 (A) Certificate of completion of a comprehensive training 10 program in conscious sedation that satisfies the requirements 11 described in the ADA Guidelines for Teaching Pain Control 12 and Sedation to Dentists and Dental Students and the ADA 13 Guidelines for the Use of Sedation and General Anesthesia 14 by Dentists at the time training was commenced.

(B) Certificate of completion of an ADA-accredited
postdoctoral training program which affords comprehensive
and appropriate training necessary to administer and manage
conscious sedation commensurate with these guidelines.

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

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

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

32 (2) An operating table or chair which permits the patient
33 to be positioned so the operating team can maintain the
34 patient's airway, quickly alter the patient's position in an

35 emergency, and provide a firm platform for the36 administration of basic life support;

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

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

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

48 (6) A nitrous oxide delivery system with a fail-safe
49 mechanism that will ensure appropriate continuous oxygen
50 delivery and a scavenger system;

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

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

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

- 59 (10) A defibrillator device.
- 60 (c) Before inducing conscious sedation, a dentist shall:

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

- 64 (2) Give written preoperative and postoperative 65 instructions to the patient or, when appropriate due to age or 66 neurological status of the patient, the patient's guardian; and
- 67 (3) Obtain written informed consent from the patient or68 patient's guardian for the anesthesia.
- (d) The dentist shall ensure that the patient's condition is
 monitored and recorded on a contemporaneous record. The
 dentist shall use a qualified monitor to monitor and record the
 patient's condition in addition to the chair side dental
 assistant. A qualified monitor shall be present to monitor the
 patient at all times.

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

76 (1) Patients shall have continuous monitoring using pulse 77 oximetry and/or equipment required for the standard of care 78 or as specified by rule by a qualified monitor until discharge 79 criteria have been met. The documented requirements of a 80 qualified monitor monitoring limited enteral 81 comprehensive parenteral sedations cases are as specified by 82 rule. The patient's blood pressure, heart rate and respiration 83 shall be recorded every five minutes and these recordings 84 shall be documented in the patient record. The record shall 85 also include documentation of preoperative and postoperative 86 vital signs, all medications administered with dosages, time 87 intervals and route of administration including local 88 anesthesia. If the dentist is unable to obtain this information, 89 the reasons shall be documented in the patient's record.

90 (2) During the recovery phase, the patient shall be91 monitored by a qualified monitor.

51	[Enr. Com. Sub. for S. B. No. 580
92 93	(3) A discharge entry shall be made by the dentist in the patient's record indicating the patient's condition upon
94	discharge and the name of the responsible party to whom the
95	patient was discharged.
96	(f) A dentist may not release a patient who has undergone
97	conscious sedation/moderate sedation except to the care of a
98	responsible adult third party.
99	(g) When discharging a pediatric patient the dentist shall
100	follow the current edition of AAPD Guidelines for
101	Monitoring and Management of Pediatric Patients During and
102	After Sedation for Diagnostic and Therapeutic Procedures.
103	(h) The dentist shall assess the patient's responsiveness
104	using preoperative values as normal guidelines and discharge
105	the patient only when the following criteria are met:
106	(1) Vital signs including blood pressure, pulse rate and
107	respiratory rate are stable;
108	(2) The patient is alert and oriented to person, place and
109	time as appropriate to age and preoperative neurological
110	status;
111	(3) The patient can talk and respond coherently to verbal
112	questioning or to preoperative neurological status;
113	(4) The patient can sit up unaided or to preoperative
114	neurological status;
115	(5) The patient can ambulate with minimal assistance or
116	to preoperative neurological status; and
117	(6) The patient does not have uncontrollable nausea or
118	vomiting and has minimal dizziness.

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

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

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

- 4 (b) The board shall issue or renew a Class 4 Permit to an5 applicant who:
- 6 (1) Is a licensed dentist in West Virginia;
- 7 (2) Holds a valid and current documentation showing
 8 successful completion of a Healthcare Provider BLS/CPR
 9 course, Advanced Cardiac Life Support (ACLS) and/or
 10 Pediatric Advanced Life Support (PALS) course if treating
 11 pediatric patients;
- 12 (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 and the ADA Guidelines for
 the Use of Sedation and General Anesthesia by Dentists at the
 time training was commenced;
- 20 (B) Completion of an ADA- or AMA-accredited21 postdoctoral training program which affords comprehensive

22 and appropriate training necessary to administer and manage

23 general anesthesia, commensurate with these guidelines;

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

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

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

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

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

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

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

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

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

- 58 (8) Equipment as specified by rule;
- 59 (9) Emergency drugs as specified by rule
- 60 (10) A defibrillator device.

61 (d) Before inducing general anesthesia/deep conscious62 sedation the dentist shall:

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

67 (2) Shall give written preoperative and postoperative68 instructions to the patient or, when appropriate due to age or69 neurological status of the patient, the patient's guardian; and

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

72 (e) A dentist who induces general anesthesia/deep 73 conscious sedation shall ensure that the patient's condition is 74 monitored and recorded on a contemporaneous record. The 75 dentist shall use a qualified monitor to monitor and record the 76 patient's condition on a contemporaneous record and a chair 77 side dental assistant. The documented requirements of a 78 qualified monitor monitoring general anesthesia/deep 79 conscious sedation cases are as specified by rule. No permit 80 holder may have more than one patient under general81 anesthesia at the same time.

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

83 (1) Patients shall have continuous monitoring using pulse 84 oximetry and/or equipment required for the standard of care 85 or as specified by rule by a qualified monitor until discharge 86 criteria have been met. The patient's blood pressure, heart 87 rate and oxygen saturation shall be assessed every five 88 minutes and shall be contemporaneously documented in the 89 patient record. The record shall also include documentation 90 of preoperative and postoperative vital signs, all medications 91 administered with dosages, time intervals and route of 92 administration including local anesthesia. The person 93 administering the anesthesia may not leave the patient while 94 the patient is under general anesthesia;

- 95 (2) During the recovery phase, the patient shall be
 96 monitored, including the use of pulse oximetry, by a qualified
 97 monitor; and
- 98 (3) A dentist may not release a patient who has
 99 undergone general anesthesia/deep conscious sedation except
 100 to the care of a responsible adult third party.
- (4) When discharging a pediatric patient the dentist shall
 follow the current edition of AAPD Guidelines for the
 Monitoring and Management of Pediatric Patients During and
 After Sedation for Diagnostic and Therapeutic Procedures.
- (g) The dentist shall assess the patient's responsiveness
 using preoperative values as normal guidelines and discharge
 the patient only when the following criteria are met:
- 108 (1) Vital signs including blood pressure, pulse rate and109 respiratory rate are stable;

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

- (3) The patient can talk and respond coherently to verbalquestioning or to preoperative neurological status;
- (4) The patient can sit up unaided or to preoperativeneurological status;
- (5) The patient can ambulate with minimal assistance orto preoperative neurological status; and
- (6) The patient does not have uncontrollable nausea orvomiting and has minimal dizziness.
- 121 (7) A discharge entry shall be made in the patient's
 122 record by the dentist indicating the patient's condition upon
 123 discharge and the name of the responsible party to whom the
 124 patient was discharged.

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

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

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

7 dentist applying for or holding a permit to administer8 anesthesia.

9 Prior to issuing a permit, the board shall conduct an on-10 site inspection of facility, equipment and auxiliary personnel of the applicant to determine if, in fact, all the requirements 11 12 for the permit have been met. This inspection or evaluation, 13 if required, shall be carried out by at least two members of 14 the subcommittee. This evaluation is to be carried out in a 15 manner following the principles, but not necessarily the 16 procedures, set forth by the current edition of the AAOMS 17 Office Anesthesia Evaluation Manual. On-site inspections 18 are required and shall be performed for all Class 3a, 3b and 19 4 permitees. The board may reinspect annually, at its 20 discretion, but shall perform an on-site inspection for all permit holders at least once every five years except Class 2 21 22 permit holders. The board reserves the right to conduct an 23 on-site inspection whenever it deems necessary for all permit 24 holders. All on-site inspections shall be held during regular 25 business hours.

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

§30-4A-9. Office evaluations.

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

2 (1) Observation of one or more cases of anesthesia to
3 determine the appropriateness of technique and adequacy of
4 patient evaluation and care;

5 (2) Inspection of facilities, which shall include, but not be 6 limited to, the inspection of equipment, drugs and patient

7 records and qualified monitor's certifications and8 documentation; and

- 9 (3) The evaluation shall be performed by a team 10 appointed by the board and shall include a member of the 11 subcommittee who holds a current anesthesia permit in the 12 same class or in a higher class than that held by the permit 13 holder being evaluated.
- 14 (4) Class 2 permit holders may be audited periodically as15 determined by the committee; and
- 16 (5) Class 3 and 4 permit holders shall be evaluated once17 every five years.
- (b) A dentist utilizing a licensed dentist who holds a
 current anesthesia permit issued by the board shall have his
 or her office inspected to the level of a Class 4 permit as
 specified by section twelve of this article. The office is only
 approved at that level when the anesthesia permit holder is
 present and shall have the number of qualified monitors
 present as required by this article.
- (c) In addition to the requirements of this article, a
 treating dentist who applies for a certificate to allow a CRNA
 to administer anesthesia and sedation to a patient shall
 maintain a permit as follows:
- (1) A treating dentist who allows a CRNA to administer
 limited enteral sedation to a patient shall maintain a Class 3a
 permit for themselves and the administration site shall be
 inspected to a Class 4 permit level;
- (2) A treating dentist who allows a CRNA to administer
 comprehensive parenteral sedation to a patient shall maintain
 a Class 3b permit for themselves and the administration site
 shall be inspected to a Class 4 permit level; and

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

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

1 If a death, any serious complication or any injury occurs 2 which may have resulted from the administration of general 3 anesthesia/deep conscious sedation, conscious 4 sedation/moderate sedation, anxiolysis/minimal sedation, or 5 relative analgesia/minimal sedation, the licensee performing 6 the dental procedure shall submit a written detailed report to 7 the board within seventy-two hours of the incident along with 8 copies of the patient's original complete dental records. If 9 the anesthetic agent was administered by a person other than 10 the person performing the dental procedure, that person shall 11 also submit a detailed written report. The detailed report(s) 12 shall include: 13 (1) Name, age and address of patient; 14 (2) Name of the licensee and other persons present during 15 the incident along with their names and addresses; 16 (3) Address where the incident took place; 17 (4) Type of anesthesia and dosages of drugs administered 18 to the patient including local anesthesia; 19 (5) A narrative description of the incident including 20 approximate times and evolution of symptoms; and 21 (6) The anesthesia record and the signed informed 22 consent form for the anesthesia.

§30-4A-11. Immunity from liability.

1 (a) Notwithstanding any other provision of law, no 2 person providing information to the board or to the 3 subcommittee may be held, by reason of having provided the 4 information, to be civilly liable under any law unless the 5 information was false and the person providing information knew or had reason to believe the such information was false. 6 7 (b) No member or employee of the board or the 8 subcommittee may be held by reason of the performance by 9 him or her of any duty, function or activity authorized or 10 required of the board or the subcommittee to be civilly liable. 11 The foregoing provisions of this subsection do not apply with 12 respect to any action taken by any individual if the individual,

13 in taking the action, was motivated by malice toward any

14 person affected by the action.

§30-4A-12. Facility Inspections.

- 1 (a) The board shall perform an onsite evaluation of Class
- 2 3 and 4 applicants dental facilities, equipment, techniques and
- 3 personnel prior to issuing a permit. The board may conduct
- 4 further on-site evaluations.
- 5 (b) The board may inspect Class 2 applicants facilities.

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

1 Upon the recommendation of the subcommittee, the board 2 shall issue permits to applicable dentists. An anesthesia 3 permit shall be renewed annually: *Provided*, That the 4 permittee meets the requirements of this article and has not 5 been subject to disciplinary action prohibiting issuance of the 6 permit.

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

1 A dentist whose application has been denied for failure to 2 satisfy the requirements in the application procedure or the 3 on-site evaluation shall wait thirty days from the date of the 4 denial prior to reapplying and shall submit to another on-site 5 evaluation prior to receiving a permit. The board and the 6 subcommittee shall promptly reinspect the applicant dentist's 7 facilities, techniques, equipment and personnel within ninety 8 days after the applicant has made reapplication.

§30-4A-15. Application and annual renewal of regular permits; fees.

- 1 The board shall require an initial application fee and an
- 2 annual renewal fee for Class 2, Class 3 and 4 Permits.
- 3 Permits expire annually. The board shall renew permits for
- 4 the use of anesthesia after the permittee satisfies the
- 5 application for renewal.

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

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

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

(a) The board shall appoint a subcommittee to carry out
 the review and on-site inspection of any dentist applying for

- 3 or renewing a permit under this article.
- 4 (b) The subcommittee shall make a recommendation for5 issuing or revoking a permit under this article.

6 (c) This subcommittee shall be known as the West 7 Virginia Board of Dentistry Subcommittee on Anesthesia. 8 The subcommittee shall, at a minimum, consist of one 9 member of the board who shall act as chairman of the 10 subcommittee and two members holding a Class 4 permit and 11 two members holding a Class 3 permit.

(d) The subcommittee shall adopt policies and procedures
related to the regulation of general anesthesia/deep conscious
sedation, conscious sedation/moderate sedation,
anxiolysis/minimal sedation, and relative analgesia/minimal
sedation with the same being approved by the board. The
subcommittee members shall be paid and reimbursed
expenses pursuant to article one of this chapter.

ARTICLE 4B. DENTAL LABORATORY SERVICES.

§30-4B-1. Unlawful acts.

- 1 (a) It is unlawful for any person, other than a dentist or 2 other dental practitioner, to sell, offer for sale or furnish any
- 3 dental prosthesis or other dental laboratory service to any
- 4 person who is not a dentist or other dental practitioner.
- 5 (b) It is unlawful for any person to perform dental 6 laboratory services without a work authorization: *Provided*, 7 That this subsection does not apply to a dentist or other dental 8 practitioner, or to their employees working under their direct 9 supervision, performing dental laboratory services as a part 10 of their own dental practice and for their own dental patients.

63	[Enr. Com. Sub. for S. B. No. 580
11	(c) It is unlawful for any dental laboratory to perform any
12	dental laboratory service without the issuance of a work
13	authorization by a dentist or other dental practitioner.
14	(d) It is unlawful for any dental laboratory or dentist who
15	fabricates a full upper or full lower set of prosthetic dentures
16	not to affix upon the dentures, in a nonremovable manner, the
17	name of the patient, the initials of the dentist's state of
18	practice and license identification.
19	(e) It is unlawful for any dental laboratory either directly
20	or indirectly:
21	(1) To advertise that it is engaged in the business of
22	performing dental laboratory services;
23	(2) To advertise it performs dental laboratory services for
24	members of the public;
25	(3) To advertise a price for the performance of dental
26	laboratory services; or
27	(4) To advertise techniques used or materials employed
28	by it in the performance of dental laboratory services:
29	Provided, That this subsection does not prevent dental
30	laboratories from advertising in dental journals or in other
31	professional dental publications or from communicating
32	directly to a dentist and other dental practitioner or from
33	listing the dental laboratory in business and telephone
34	directories if the business and telephone directory
35	announcements are limited to name, address and telephone
36	number and do not occupy more than the number of lines
37	necessary to disclose the information, or from displaying the
38	trade name and address of the dental laboratory on the door
39	of its place of business or on name plates or door plates
40	exhibited on the interior or exterior of the place of business.

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

1 2 3	(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.
4	(b) Each work authorization shall contain:
5 6	(1) The name and address of the dental laboratory to which it is directed;
7	(2) The case identification;
8	(3) A specification of the materials to be used;
9 10	(4) A description of the work to be done and, if necessary, diagrams thereof;
11	(5) The date of issue; and
12 13	(6) The signature and address of the dentist or other dental practitioner issuing the work authorization.
14	(c)A separate work authorization shall be issued for each
15	patient of the dentist or other dental practitioner for whom a
16	dental laboratory service is to be performed.
17	(d) Every work authorization shall be made in duplicate
18	with the original being delivered to the dental laboratory to
19	which it is directed and the copy being retained in the office
20	of the issuing dentist or other dental practitioner. A work
21	authorization shall be saved for a period of two years from its
22	date of issue.

§30-4B-3. Denture identification.

- 1 A dental laboratory or a dentist who engages in dental
- 2 laboratory services and who fabricates any full upper or full

- 3 lower set of prosthetic dentures shall affix upon the dentures,
- 4 in a nonremovable manner, the name of the patient for whom
- 5 the dentures are made and the initials of the dentist's state of
- 6 practice and license identification number.

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

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

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Committee

Chairman House Committee

Originated in the Senate.

In effect ninety days from passage.

Clerk of the Senate

Clerk of the House of Delegates

President of the Senate

Speaker of the House of Delegates

The within this the

Day of, 2013.

Governor