

**WEST VIRGINIA
SECRETARY OF STATE
JOE MANCHIN, III
ADMINISTRATIVE LAW DIVISION**

Form #3 □

Do Not Mark In This Box

FILED

2004 AUG 25 P 4: 14

OFFICE WEST VIRGINIA
SECRETARY OF STATE

**NOTICE OF AGENCY APPROVAL OF A PROPOSED RULE
AND
FILING WITH THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE**

AGENCY: West Virginia Board of Dental Examiners TITLE NUMBER: 5

CITE AUTHORITY: 30-4-1 et. seq.

AMENDMENT TO AN EXISTING RULE: YES NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: 1

TITLE OF RULE BEING AMENDED: Rule for the West Virginia Board of Dental Examiners

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: _____

TITLE OF RULE BEING PROPOSED: _____

THE ABOVE PROPOSED LEGISLATIVE RULE HAVING GONE TO A PUBLIC HEARING OR A PUBLIC COMMENT PERIOD IS HEREBY APPROVED BY THE PROMULGATING AGENCY FOR FILING WITH THE SECRETARY OF STATE AND THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE FOR THEIR REVIEW.


Authorized Signature

QUESTIONNAIRE

(Please include a copy of this form with each filing of your rule: Notice of Public Hearing or Comment Period; Proposed Rule, and if needed, Emergency and Modified Rule.)

DATE: August 25, 2004

TO: LEGISLATIVE RULE-MAKING REVIEW COMMITTEE

FROM: (Agency Name, Address & Phone No) West Virginia Board of Dental Examiners
207 South Heber Street
Beckley, WV 25801

LEGISLATIVE RULE TITLE: Rule for the West Virginia Board of Dental Examiners

1. Authorizing statute(s) citation 30-1-1 et seq & 30-4-1 et seq

2. a. Date filed in State Register with Notice of Hearing or Public Comment Period:
June 10, 2004

b. What other notice, including advertising, did you give of the hearing?
Comment Period Only - Noticed in the State Register, sent notification to all licensees by letter dated June 10, 2004, posted on our web site and notified the West Virginia Dental Association, West Virginia Dental Hygiene Association and West Virginia Dental Assistants Association by letter dated June 10, 2004.

c. Date of Public Hearing(s) *or* Public Comment Period ended:
July 12, 2004 4:00 p.m.

d. Attach list of persons who appeared at hearing, comments received, amendments, reasons for amendments.

Attached yes No comments received _____

- e. Date you filed in State Register the agency approved proposed Legislative Rule following public hearing: (be exact)

August ²⁵, 2004

- f. **Name, title, address and phone/fax/e-mail numbers** of agency person(s) to receive all *written correspondence* regarding this rule: (Please type)

John F. Parkulo
West Virginia Board of Dental Examiners
207 South Heber Street
Beckley, WV 25801

- g. **IF DIFFERENT FROM ITEM 'f'**, please give **Name, title, address and phone number(s)** of agency person(s) who wrote and/or has responsibility for the contents of this rule: (Please type)

same as item "f"

3. If the statute under which you promulgated the submitted rules requires certain findings and determinations to be made as a condition precedent to their promulgation:

- a. Give the date upon which you filed in the State Register a notice of the time and place of a hearing for the taking of evidence and a general description of the issues to be decided.

n/a - Comment period only

b. Date of hearing or comment period:

Comment period ended July 12, 2004 at 4:00 p.m.

c. On what date did you file in the State Register the findings and determinations required together with the reasons therefor?

August 25, 2004

d. Attach findings and determinations and reasons:

Attached Yes

SUMMARY OF PROPOSED RULE

To increase the number of continuing education hours required for renewal of licenses for dentists and dental hygienists every two years. To decrease one hour of infection control, add a requirement of a three hour healthcare provider/basic life support course every two years, to allow up to five hours credit for serving on National, State and local dental and hygiene boards, counsels or committees and up to five hours of continuing education for providing indigent care and to enable the board to fine those that do not complete their continuing education requirements.

STATEMENT OF CIRCUMSTANCES

To increase the number of continuing education hours required for renewal of licenses for dentists and dental hygienists every two years. To decrease one hour of infection control, add a requirement of a three hour healthcare provider/basic life support course every two years, to allow up to five hours credit for serving on National, State and local dental and hygiene boards, councils or committees and up to five hours of continuing education for providing indigent care and to enable the board to fine those that do not complete their continuing education requirements.

□
APPENDIX B

FISCAL NOTE FOR PROPOSED RULES

Rule Title: Rule for the West Virginia Board of Dental Examiners

Type of Rule: Legislative Interpretive Procedural

Agency: West Virginia Board of Dental Examiners

Address: 207 South Heber Street
Beckley, WV 25801

1. Effect of Proposed rule:

	ANNUAL FISCAL YEAR				
	INCREASE	DECREASE	CURRENT	NEXT	THEREAFTER
ESTIMATED TOTAL COST	none	none			
PERSONAL SERVICES	none	none			
CURRENT EXPENSE	none	none			
REPAIRS & ALTERATIONS	none	none			
EQUIPMENT	none	none			
OTHER	none	none			

2. Explanation of Above Estimates:
n/a

3. Objectives of These Rules:
See Attached

Rule Title: Rule for the West Virginia Board of Dental Examiners

4. Explanation of Overall Economic Impact of Proposed Rule:

A. Economic Impact on State Government:

none

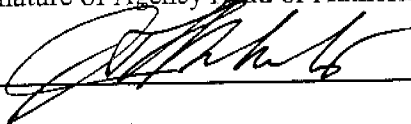
B. Economic Impact on Political Subdivisions; Specific Industries; Specific Groups of Citizens: To create incentives to be active in National, State and local dental and hygiene organizations.

C. Economic Impact on Citizens/Public at Large.

To assist in providing dental services to indigents.

Date: 6/8/04

Signature of Agency Head or Authorized Representative:



ATTACHMENT TO FISCAL NOTE

To increase the number of continuing education hours required for renewal of licenses for dentists and dental hygienists every two years. To decrease one hour of infection control, add a requirement of a three hour healthcare provider/basic life support course every two years, to allow up to five hours credit for serving on National, State and local dental and hygiene boards, counsels or committees and up to five hours of continuing education for providing indigent care and to enable the board to fine those that do not complete their continuing education requirements.

TITLE 5
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF DENTAL EXAMINERS

FILED

2003 AUG 25 P 4: 15

SERIES 1
RULE FOR THE WEST VIRGINIA BOARD OF DENTAL EXAMINERS

OFFICE WEST VIRGINIA
SECRETARY STATE

§5-1-1. General.

1.1. Scope. This rule regulates the W. Va. Board of Dental Examiner's proceedings and carries out the purposes and enforces the provisions of W. Va. Code §§30-1-1 et seq and 30-4-1 et seq which are applicable to the W. Va. Board of Dental Examiners.

1.2. Authority. -- W. Va. Code §30-4- 5 & 6.

1.3. Effective Date. --

1.4. Filing Date. --

1.5. Certification. This rule is certified authentic by the President and Secretary of the W. Va. Board of Dental Examiners by Certification No. II.

1.6. Amend. -- This rule amends W. Va. Board of Dental Examiners Rule 5CSR1, W. Va. Administrative rules, W. Va. Board of Dental Examiners which became effective on ~~May 12, 1997~~ July 28, 2003.

§5-1-2. Definitions.

2.1. "Dental public health" is the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. For the purposes of this rule the term "community" is used in a restricted sense and relates to the people of a particular region having common organization or interests and living in the same place under the same laws. It is that form of dental practice which serves the community as a patient rather than the individual. It is concerned with the dental health education of the public, with research, and the application of the findings of research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis.

2.2. "Endodontics" is that area of dentistry dealing with etiology, histopathology, diagnosis, preventions, and treatment of the diseases of the dental pulp and their sequelae.

2.3. "Oral and maxillofacial surgery" is the specialty of dentistry which includes the diagnosis, surgical and adjunctive treatment of diseases, injuries, and defects involving both the functional and aesthetic aspects of the hard and soft tissues of the oral and maxillofacial regions.

2.4. "Oral pathology" embraces both morphologic and clinical study of diseases affecting the oral regions. An oral pathologist is a person who, through special study and training, is qualified to diagnose and otherwise study tumors and lesions, both local and systemic, of the oral regions.

2.5. "Orthodontics and dentofacial orthopedics" is prevention and correction of dental and oral anomalies by changing positions of teeth and jaw relationship by the use of appliances; correction of causative habits; or corrective muscular exercises, in order to establish normal function of the masticating mechanism and to encourage a normal development of the jaws and associated tissues.

2.6. "Pediatric dentistry" is the prevention, control and treatment of the oral and dental diseases of children.

2.7. "Periodontics" is the prevention, control and treatment of diseases of the supporting tissues of the teeth.

2.8. "Prosthodontics" is the restoration of masticatory function in part or as a whole through the designing and construction of removable dental prosthetic appliances known as artificial dentures, which are supported wholly or in part by the soft tissues of the mouth and not permanently attached to the natural teeth.

§5-1-3. Official seal.

3.1. General. The Board's official seal shall affix by way of stamp or embossing and shall contain somewhere on the seal the word "seal" and W. Va. Board of Dental Examiners.

§5-1-4. Corporate practice of dentistry.

4.1. Qualifications. Only duly licensed dentists eligible to practice in the State of W. Va. may form a dental corporation. The dentists shall file a written application with the Board of Dental Examiners on a form prescribed by the Board. A fee shall accompany each application, no part of which is returnable. If the Board finds that the signers are duly licensed dentists or if there are more than one, that all of the signers of the applications are duly licensed dentists, the Board shall notify the Secretary of State that a Certificate of Authorization has been issued to the individual or individuals signing the application, to form a dental corporation. Provided, however, that there is compliance with the applicable provisions of W. Va. Code §31-1-1, concerning corporations generally.

§5-1-5. Specialties.

5.1. Specialist General Qualifications. A licensee may apply to the Board for a certificate of qualification in a specialty of dentistry if the licensee can satisfactorily prove to the State Board of Dental Examiners that he or she possesses the following general qualifications, in excess of those required for the completion of a general course of study as given in a dental school or college recognized by the State Board:

(a) Membership in the American Dental Association or the National Dental Association;

(b) An exemplary record of professional ethics; and

(c) Requisite training. All training requirements for qualifications of each specialty shall be approved by the Counsel on Dental Education of the American Dental Association.

5.2. Specialist General Limitations. A person certified by the W. Va. State Board of Dental Examiners as a specialist has the following limitations:

(a) The licensee shall limit his or her practice of dentistry only to the specialty in which he or she is licensed and in which he or she holds himself out to the general public as a specialist; and

(b) The licensee shall limit his or her listing in the telephone directory to the specialties in which he or she has an office or offices.

5.3. Specialty Fields Licensed by the W. Va. Board of Dental Examiners. The Board may issue certificates of qualification in the following specialties:

(a) Dental public health. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of one full-time academic year of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(b) Endodontics. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(c) Oral and maxillofacial surgery. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of three full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(d) Oral pathology. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(e) Orthodontics and dentofacial orthopedics. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(f) Pediatric dentistry. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(g) Periodontics. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

(h) Prosthodontics. -- In order to qualify for certification in this specialty, the licensee shall have a minimum of two full-time academic years of at least eight calendar months each of graduate or post-graduate education, internship or residency.

§5-1-6. Issuance of temporary and/or special permits.

6.1. General. The Board may issue a temporary permit to practice dentistry or dental hygiene. Temporary and/or special permits may only be granted pursuant to a board meeting with a quorum of members present. Nothing in this rule prohibits the practice of dentistry or dental hygiene by persons licensed in another state who, at the request of an approved dental school or any regularly organized dental society, may give a clinic at the school or at a scientific meeting of the dental society for the purpose of advancing the professional knowledge of members of the dental profession or members of the student body of a dental school.

6.2. Temporary Permit. The Board of Dental Examiners may issue a temporary permit to practice dentistry or dental hygiene to graduates of schools of dentistry or dental hygiene approved by the Board who are certified to the board of directors of dental clinics established by law, by the chief executive of any hospital or sanitarium licensed or operated by the State or by the chief dental officer of the health department of the State. The permits terminate sixty days after the date that the first examination required for a license to practice dentistry is administered or when the holder of the permit ceases to be employed by the person certifying him or her.

6.3. Dental Intern or Dental Residency Permit. The Board of Dental Examiners may issue a dental intern or dental residency permit to graduates of dental schools approved by the Board who are not licensed to practice dentistry in this State and who have not failed an examination for a license to practice dentistry in this State. An applicant for a permit shall be certified to the Board by the director or a hospital operated or licensed by the State which maintains a dental intern or residency program. The permit shall authorize the holder of the permit to serve as a dental intern or a dental resident for a period of not more than one year in any hospital licensed or operated by the State which maintains an established dental department under the supervision of a licensed dentist. The holder of a permit shall function under the supervision of the dental staff of the hospital and shall limit his or her practice to patients selected by the hospital. The holder of a permit is not entitled to receive any fee or other compensation other than the salary paid by the hospital. Permits may be revoked by the Board for cause and expire at the end of one year or on the date the dental internship or residency is discontinued, whichever first occurs.

6.4. Teaching Permits. The Board of Dental Examiners may issue teaching permits to persons who are graduates of a school of dentistry or dental hygiene approved by the Board where those persons are not licensed to practice dentistry or dental hygiene in this State. The permit shall be issued only upon the certification of the dean of a dental school located in this State that the applicant is a bona fide member of the staff of that school. The permits are valid for one year and may be reissued by the Board in its discretion. The holder of a permit may perform all operations which a person licensed to practice dentistry or dental hygiene in this State may perform, but only within the facilities of the dental school and as an adjunct to his or her teaching functions in the school.

§5-1-7. Suspension or revocation of a license.

7.1. Board Meeting. Prior to the suspension or revocation of a license, a majority of the Board shall meet with a quorum voting for revocation or suspension of the license.

7.2. Notice. The Board shall notify the licensee concerning a revocation or suspension at least thirty (30) days prior to the hearing. The notice shall contain grounds for the revocation or suspension and notify the licensee that he or she may appear with witnesses and be heard in person, by counsel, or by both. The notice shall also contain the time and place of the hearing concerning the suspension or revocation. The notice shall also contain a statement informing the licensee that the Board will receive any evidence the licensee may wish to offer, that the licensee will be given the opportunity to cross-examine any witnesses appearing before the Board, and that the Board will receive any statement the licensee may desire to make to them.

7.3. Publicity. The Board shall give no advance publicity prior to the hearing, during the hearing or prior to its decision concerning a licensee's suspension or revocation of a license.

7.4. Service of Notice. The Board may serve notice by delivering a copy of the notice in writing to the party in person; or if he or she cannot be found, by delivering the copy at his or her usual place of abode, and

giving information of its purport, to the spouse, or to any other person found there who is a member of the licensee's family and above the age of sixteen years; or if neither the spouse nor any other person is found there, and the licensee is not found, leaving the copy posted at the front door of the place of abode. Any sheriff or constable shall serve a notice within his or her county and make return of the manner and time of service; for a failure to do so he or she shall forfeit twenty dollars. The return, or a similar return by any other person who verified it by affidavit, is evidence of the manner and time of service.

7.5. Service by Publication. Any notice to a person not residing in this State may be served by the publication of the notice once a week for three successive weeks in a newspaper published in this State.

7.6. Hearing. The Board may compel the attendance of witnesses and administer oaths. A stenographic report of a proceeding to suspend or revoke a license shall be made at the expense of the Board and a transcript of the hearing retained in the Board's file. The Board shall make a written report of its findings, which constitute part of the record and a copy of the findings shall be filed with the Secretary of State.

7.7. Review by Circuit Court and Supreme Court of Board's Decision on Suspension and Revocation of License. A person having his or her license suspended or revoked may, within thirty days after the decision of the Board, present a petition in writing to the circuit court of the county in which the person resides, or to the judge of the court in vacation, praying for the review and reversal of the decision. Before presenting his or her petition to the court or judge, the petitioner shall mail copies of the petition to the president and secretary, respectively, of the Board. Upon receipt of the copy, the secretary shall immediately transmit to the clerk of the court the record of the proceedings before the Board. The court or judge shall fix a time for the review of the proceedings at his or her earliest convenience. Notice in writing of the time and place of the hearing shall be given to the president and secretary of the Board at least ten days before the date set for the hearing. The court or judge shall, without a jury, hear and determine the case upon the record of the proceedings before the Board. The court or judge may enter an order affirming, revising, or reversing the decision of the Board if it appears that the decision was clearly wrong. Prior to the entry of the order, no order shall be made or entered by the court to stay or supersede any suspension, revocation or cancellation of any certificate, license, registration or authority. The judgement of the Circuit Court may be reviewed upon appeal in the Supreme Court of Appeals.

§5-1-8. Expanded duties of dental hygienists and dental assistants.

8.1. General. Licensed dentists may assign to their employed dental hygienists or assistants intraoral tasks as set out in this section for dental hygienists or assistants, subject to the following conditions:

(a) The performance of intraoral tasks by dental hygienists or assistants shall be under the direct supervision of the employer-dentist;

(b) The following procedures may not be assigned to a dental hygienist or assistant or to any other person not licensed to practice dentistry:

(1) Diagnosis, treatment planning and prescription (including prescriptions for drugs and medicaments or authorizations for restorative, prosthodontic or orthodontic appliances); or

(2) Surgical procedures on hard and soft tissue within the oral cavity or any other intraoral procedure that contributes to or results in an irremediable alteration of the oral anatomy; and

(c) The licensed dentist assigning expanded duties to a dental hygienist or assistant is solely responsible for evaluating the dental hygienist or assistant to determine that he or she is competent to handle assigned duties. Further, no licensed dentist shall assign additional duties to a dental hygienist or assistant until he or she is assured that the dental hygienist or assistant is fully competent and completely qualified to perform the assigned expanded duty or duties.

8.2. Expanded duties of dental assistants. The following duties and/or intra-oral tasks may be assigned by a licensed dentist to a dental hygienist and/or assistant in the licensed dentist's employment, provided that under no circumstances can an assistant use a power-driven instrument of any type intra-orally except as specifically set forth hereinafter:

- (a) Placing, exposing, developing, and mounting dental radiographs;
- (b) Placing and removing rubber dams;
- (c) Charting existing restorations and missing teeth;
- (d) Holding and removing materials, trays, strips, and sutures previously placed in the patient's mouth by the dentist;
- (e) Removing excess cement from coronal surfaces of teeth without the use of rotating, power-driven or scaling instruments;
- (f) Taking impressions for study cast and pouring models;
- (g) Recording medical and dental histories for interpretation by the supervising dentist;
- (h) Providing pre- and post-treatment instructions;
- (i) Viewing the oral cavity and reporting the symptoms/problems to the supervising dentist;
- (j) Performing pulp vitality testing (thermal or electrical) with a final evaluation by the supervising dentist;
- (k) Inserting and adjusting athletic mouth guards and bleaching trays with a final evaluation by the supervising dentist;
- (l) Removing periodontal dressings with a final evaluation by the supervising dentist;
- (m) Placing and removing matrices after a final evaluation by the supervising dentist;
- (n) Applying topical anesthetic agents with prior approval by the supervising dentist;
- (o) Applying topical anticariogenic agents after successful completion of a board-approved course and examination and with prior approval of the supervising dentist;
- (p) Applying pit and fissure sealants after successful completion of a board-approved course and examination and with a final evaluation by the supervising dentist;

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- (q) Applying cavity liners and bases with a final evaluation by the supervising dentist;
- (r) Removing soft tissue dressings with a final evaluation by the supervising dentist;
- (s) Fabricating and cementing temporary crowns and bridges with a final evaluation by the supervising dentist;
- (t) Placing and removing temporary restorations by a non power-driven method with a final evaluation by the supervising dentist;
- (u) Taking intra- and extra-oral photographs;
- (v) Chemical conditioning of the tooth to accept a restoration and/or bracket by topical application after successful completion of a board-approved course and examination;
- (w) Using a power-driven hand piece with rubber cup and/or brush only for preparing a tooth for accepting a restoration and/or appliance, which shall in no way be represented to the patient as a prophylaxis, after successful completion of a board-approved course and examination;
- (x) Placing retraction cords for crown impressions after successful completion of a board-approved course and examination and with prior approval of the supervising dentist;
- (y) Taking final impressions for fixed or removable prosthesis and/or appliance with a final evaluation by the supervising dentist;
- (z) Checking for loose orthodontic appliances with a final evaluation by the supervising dentist;
 - (aa) Taking orthodontic measurements with a final evaluation by the supervising dentist;
 - (bb) Fitting bands and brackets prior to final cementation and/or bonding by the supervising dentist;
 - (cc) Bending archwires with a final evaluation by the supervising dentist at the time of placement;
 - (dd) Placing or removing temporary space maintainers, orthodontic separating devices, ligatures, brackets and bands with a final evaluation by the supervising dentist at the time of placement or removal, after completion of a board-approved course and examination;
 - (ee) Removing loose or broken bands, brackets or archwires when directed by the supervising dentist; and
 - (ff) Visually monitoring a nitrous oxide analgesia unit. Two years after the effective date of this rule, a dental assistant or hygienist must have successfully completed a board-approved course and examination in order to perform this duty. Thereafter, the assistant or hygienist must maintain current certification in accordance with the American Red Cross' or the American Heart Association's Cardio-Pulmonary Resuscitation (CPR) program.

8.3. Expanded duties of dental hygienists. In addition to and including those duties set forth in subsection 8.2 of this section, the following duties and/or intraoral tasks may be assigned by a licensed dentist to a dental hygienist in the licensed dentist's employment:

- (a) Supra- and subgingival scaling of teeth;
- (b) Polishing of coronal and/or exposed surfaces of teeth;
- (c) Dental health education;
- (d) Nutritional counseling;
- (e) Examining and recording periodontal findings;
- (f) Scaling excessive cement from the surfaces of teeth and restorations;
- (g) Performing clinical examinations and diagnostic tests of teeth and surrounding tissues and recording findings for interpretation by a supervising dentist (including such procedures as restorative chartings, caries activity test, cytology smears, salivary analysis and smears, endodontic cultures, vitality test, etc.);
- (h) Placing of subgingival medicaments, fibers, chips, etc.;
- (i) Finishing and polishing restorations with a slow speed hand piece;
- (j) Debridement and/or root planing of teeth;
- (k) Applying bleaching agents after successful completion of a board-approved course;
- (l) Placing periodontal dressings with a final evaluation by the supervising dentist; and
- (m) Administration of infiltration and block anesthesia after successful completion of a board-approved course and of a regional board examination and under the direct supervision of a licensed dentist.

§5-1-9. Designation of testing bodies.

9.1 The Board designates for dental and dental hygiene license testing the following Boards:

- (1) The Joint Commission on National Dental Examinations for the written examination; and
- (2) The North East Regional Board of Dental Examiners for the clinical examination or any other state and/or regional clinical examination.

§5-1-10. Continuing education requirements.

10.1. Hours Required Biennially. Each licensed dentist shall complete biennially not less than ~~twenty~~ thirty five (35) hours of continuing education. Each licensed dental hygienist shall complete biennially not less than ~~twelve (12)~~ twenty (20) hours of continuing education.

10.2. Approved Providers.

(a) The Continuing Education course must be offered by a Board approved provider.

(b) The Board approves any course or program sponsored by the following providers, or their constituent or component organizations for credit:

- (1) An accredited dental or dental hygiene school;
- (2) The American Dental Association;
- (3) A National Dental Association;
- (4) The American Dental Hygienists' Association;
- (5) The National Dental Hygiene Association;
- (6) The American Medical Association;
- (7) The American Hospital Association;
- (8) The American Red Cross;
- (9) The American Heart Association;
- ~~(9)~~ (10) American Dental Association recognized specialty societies;
- ~~(10)~~ (11) The Academy of General Dentistry;
- ~~(11)~~ (12) The Veteran's Administration;
- ~~(12)~~ (13) The United States Uniformed Services;
- ~~(13)~~ (14) The U. S. Department of Health and Human Services;
- ~~(14)~~ (15) The W. Va. Department of Health and Human Resources;
- ~~(15)~~ (16) The W. Va. Dental Association;
- ~~(16)~~ (17) The W. Va. Dental Hygienists' Association; and
- ~~(17)~~ (18) Study Clubs: "Study Club" means a group of at least five (5) dentists or dental hygienists who do the following:
 - (i) Organize for the purpose of scientific study;
 - (ii) Operate under the direction of elected officers;
 - (iii) Maintain written by-laws;

(iv) Conduct regular meetings; and

(v) Maintain written attendance records of all meetings.

(c) Providers not identified in subdivision (b) of this subsection may petition the Board for approval of continuing education that they offer. The Board may approve other sponsors of continuing education credits. The Board's approval expires after two consecutive years and must be renewed. The course or program must be designed to enhance the licensee's clinical knowledge and ability to treat dental patients.

(d) Courses or programs that are not approved for continuing education credit for license renewal include, but are not limited to, those on the subjects of money management, personal finance, personal business matters, cultural subjects, personal health and recreation, politics, memory training, and speed reading.

10.3. Record Keeping, Reporting, & Monitoring:

(a) It is the responsibility of each dentist and dental hygienist to maintain and compile accurate records relating to all continuing education courses he or she has successfully completed.

(b) The records and information pertaining to each year shall be maintained for a period of six (6) years.

(c) A licensee shall report all continuing education courses on the form provided by the Board. The licensee shall submit records relating to continuing education courses to the Board at the time of license renewal.

(d) The Board shall randomly audit the continuing education records maintained by each dentist and dental hygienist.

(e) Each dentist and dental hygienist shall submit to the Board by February 1, 1996, and every two years thereafter documentation of satisfactory completion of the required hours of continuing education during the previous two years.

10.4. Criteria.

(a) The Board shall not give continuing education credit for identical courses taken during the same continuing education reporting period.

(b) The Board shall give one hour of credit for each hour of attendance and an hour of attendance is defined as fifty (50) minutes.

(c) At least ~~three (3)~~ two (2) hours of continuing education shall be related to ~~infection control~~ any one or combination of the following subjects during each continuing education reporting period :

(1) infection control and/or occupational hazards;

(2) oral effects of tobacco use; or

(3) oral effects of substance abuse.

(d) A current certification for a Health Care Provider/Basic Life Support course recognized by the American Heart Association or American Red Cross shall be required each continuing education period, and such certification will count as continuing education credits.

10.5. Categories of Credit. The licensee may select areas of study within the following categories, not to exceed the maximum number of hours in each category.

(a) Educational and scientific courses - One hundred percent (100%) of the requirement may be obtained by Educational and scientific courses given by permanent or Board-approved biennial sponsors.

(b) Supervised self-instruction - Fifty percent (50%) of the requirement may be obtained in this category. Supervised self-instruction shall include a testing mechanism supplied by a permanent or Board approved biennial sponsor. The licensee shall complete a test and demonstrate a level of comprehension before the Board will award credit. Tests shall be graded by the sponsor and results returned to the licensee. Supervised self-instruction includes, but is not limited to:

- (1) Graded audio/video courses;
- (2) Graded correspondence courses; and
- (3) Graded computer courses.

(c) Non-supervised self-instruction - A maximum of ten percent (10%) of the requirement may be obtained in the category. Non-supervised self-instruction includes, but is not limited to:

- (1) Home study - journals and publications;
- (2) Correspondence programs;
- (3) Educational television;
- (4) Audio/video programs;
- (5) Scientific exhibits; and
- (6) Study clubs other than biennial sponsors.

(d) Scientific papers, publications, and scientific presentations - A maximum of ten percent of the requirement may be obtained in the category of papers, publications, and scientific presentations; A maximum of ten percent (10%) may also be obtained for original scientific papers authored by the licensee and published in a scientific professional journal, and the original presentation of papers, essays, or formal lectures to recognized groups of fellow professionals.

(e) Teaching and research appointments - A maximum of ten percent (10%) of the requirement may be obtained in this category. Licensees involved in teaching or research activities at an accredited institution, or a part time faculty or research appointment may also receive a maximum ten percent (10%) of the requirement.

5CSR1

(f) Original table clinics and scientific exhibits - A maximum of ten percent (10%) of the requirement may be obtained in the category of original table clinics and scientific exhibits.

(g) The Board recognizes successful completion of the following written examinations as equivalent satisfying to twenty (20) the number of required hours of continuing education in the applicable reporting period:

(1) North East Regional Board's (NERB) Dental Hygiene Comprehensive Examination (for hygienists only);

(2) NERB's Diagnosis and Oral Radiology plus Comprehensive Treatment Planning Examinations;

(3) Academy of General Dentistry's Fellowship Examination;

(4) Examinations leading to recognized Specialty Boards' Diplomate status;

(5) National Board - All parts, successfully completed;

(6) Central Regional Dental Testing Agency's Written Examinations;

(7) ~~South East~~ Southern Regional Testing Agency's Written Examinations;

(8) Western Regional Examining Board's Written Examination; and

(9) any other written exam submitted to the Board for approval.

(h) Compliance: Compliance with this rule is required for all licensees seeking license renewal beginning February 1, 1994, and biennially thereafter.

10.6. Dental Committee and Indigent Care Participation

(a) The Board recognizes those individuals that are serving, (as elected, or appointed members), on national, state and local dental, or dental hygiene boards, councils or committees and allows one (1) hour of continuing education credit for every four (4) hours of meeting time to those individuals. This amount cannot exceed more than Five (5) hours of the total biennial requirement for each classification of licensee.

(b) Dentists may earn up to five (5) hours and Dental Hygienists may earn up to three (3) hours of continuing education credit requirements, per biennial period, for providing dental care to indigent patients. One-half (.5) hour credit will be allowed for every hour of documented treatment.

~~10.6~~10.7. Recent graduates licensed within one (1) year of a continuing education reporting period are not required to fulfill continuing education requirements for the first continuing education reporting period. Retired or disabled dentists or dental hygienists are not required to fulfill continuing education requirements.

~~10.7~~10.8. Penalties for Violation.

(a) The Board shall not renew the license of any licensee who fails to meet the requirements of this section.

(b) A licensee who has been found to have not fulfilled the continuing education requirements of the Board shall be required to pay a fine as set by the Board and has six (6) months in which to satisfy the requirements.

(c) A false statement on a renewal form constitutes unprofessional conduct and may result in disciplinary action against the licensee as set forth in W. Va. Code §30-4-20.

§5-1-11. Practice of dentistry under trade name or firm name.

11.1. A person shall not practice, or offer or undertake to practice, dentistry under any firm name or trade name, or under any name other than his or her own true name: Provided, that nothing in this section prohibits the practice of dentistry by a partnership, corporation and/or professional limited liability company under a firm name containing nothing but the surname of every member who is a duly licensed dentist.

§5-1-12. Annual information and renewal notice; reinstatement; penalty fees; waiver of payment of fee on retirement or disability; change of address.

12.1. Annual information and renewal notice; reinstatement and penalty fees.

(a) On or before the first day of February of each year, every dentist licensed to practice dentistry in this state, and every dental hygienist licensed to practice dental hygiene in this state, shall transmit to the secretary of the board upon a form prescribed by the board, his or her signature, post-office address, office address, serial number of his or her license certificate, whether he or she has been engaged during the preceding year in the active and continuous practice of dentistry or dental hygiene, as the case may be, whether within or without this state, and any other information required by the board, together with an information and renewal fee.

(b) Upon receipt of the required information and the payment of the proper renewal fee, the board shall issue a renewal certificate authorizing him or her to continue the practice of dentistry or the practice of dental hygiene in this state for a period of one year from the first day of February.

(c) Upon failure of any licensee to submit the required information and pay the annual renewal fee as required by the statutory date, the board shall attempt to notify the licensee in writing by mailing to his or her last registered address a notice of the requirements of this section apprising him or her of the fact that his or her license to practice will be suspended on the statutory date: Provided, that the Board's failure to mail or receive the notice shall not affect the suspension of his or her license.

(d) A license to practice dentistry or dental hygiene granted under the authority of WV Code §30-4-1 et. seq. shall be suspended for failure to renew on the first day of May if the licensee fails to secure a current renewal certificate by that day. Any licensee whose license is suspended by reason of the failure, neglect or refusal to secure the proper renewal certificate may have his or her license reinstated by the board at any time within six months from the date of the suspension of the license upon the payment of the proper renewal fee and ~~an additional a penalty fee of twenty-five dollars as set by the board~~. If the licensee does not apply for renewal of his or her license as required by this section within six months, that person shall, at the discretion of the board, file an application for and take the examinations provided in W. Va. Code §30-4-1 et. seq. if he or she desires to practice dentistry or dental hygiene in this state.

12.2. Waiver of payment of fee on retirement or disability status.

(a) The board may waive the annual payment of the renewal fee required by this section, and issue a retired renewal certificate to any West Virginia licensee who is presently retired from active practice, or to any West Virginia licensee who has retired for reasons of physical disability, so long as the retirement continues: Provided, that the licensee shall provide the board with the information required by this section. Upon leaving a retired status the Board may require re-examination.

12.3. Change of Address.

(a) Every licensed dentist or dental hygienist within thirty days of changing their place of residence or their place of practice or establishing additional offices shall furnish the secretary of the board with his or her new addresses.

COMMENTS RECEIVED

1. Dr. Kevin Hoover
2. Jennifer D. Blaskovich
3. West Virginia Dental Association
4. West Virginia Dental Hygiene Association
5. Joan Gibson-Howell
6. Sharon S. Hinchman

Dr. Kevan Hoover, D.D.S.
P.O. Box 447
Franklin, W.V. 26007

W.V. Board of Dental Examiners
207 South Heber St.
Beckley, W.V. 25801

Dear Sirs,

I would like to say that I am opposed to the proposal to increase the required number of continuing education from 20 to 35 for dentists. I work five days a week and have a wife and children. If I take time off from work to attend CE courses, I lose money and have to reschedule patients. If I attend on weekends, I lose valuable time with my family.

I feel that 20 hours is enough CE, especially when I spend 40-50 hours a year reading dental journals. Please do not add this extra hardship to the hard-working dentists of West Virginia. Thank you very much for your time and consideration.

Sincerely,
Dr. Kevan Hoover, D.D.S.

JUL 06 2004

Jennifer D. Blaskovich, RDH, MA, MS
1578 Girty's Point Road
Wheeling, WV 26003

July 6, 2004

Dear Members of the West Virginia Board of Dental Examiners:

After a review of the proposed rule changes I have several concerns with the changes proposed for TITLE 5, SERIES 1.

I feel that section **10.6 Dental Committee and Indigent Care Participation** should be deleted entirely.

(a) While it is admirable to serve on professional related committees time served would be impossible to adequately monitor and reward with CE credit. Specifically, what types of committees are you referring to? Does someone on the refreshment committee get CE time for baking cookies? Continuing education should benefit our patients by enhancing our education and updating us in our field of expertise. Participation on committees is a voluntary and personal commitment and should not be considered a source of continuing education. Furthermore, many committee members on national, state, and even local levels are reimbursed (paid) for their committee participation.

(b) First, what is the Board's definition of "indigent"? Is this the person who cannot pay for dental services or is this a person who cannot pay the usual and customarily charged fee of the dentist? Who will be issuing the CE certificate for this? Will you allow the dentist to issue their own certificate since no one else may know, nor should they know, the indigent situation of the patient?

Secondly, **IF** Dentists can earn CE credit for treating indigent patients then why not Dental Hygienists? There are several areas within our state where Dental Hygienists donate their time and expertise to free clinics and have never ask for any reimbursement nor have they ask for CE credit.

I also feel this type of CE credit would be impossible to monitor with fairness and accuracy.

I feel the remaining proposed changes are well warranted, enhance the value of our education and benefit our patients. I must respectfully ask that the Board review and withdraw section 10.6.

Respectfully,

Jennifer D. Blaskovich, RDH, MA, MS

Jennifer D. Blaskovich, RDH, MA, MS

JUL 12 2004

WEST VIRGINIA DENTAL ASSOCIATION

2003 Quarrier Street • Charleston, WV 25311

FAX: (304) 344-5316

TEL: (304) 344-5246

July 12, 2004

WV Board of Dental Examiners
207 South Heber Street
Beckley, WV 25801

Via FAX: (304) 253-9454

Dear Members of the Board:

This letter is in response to your proposed rule on continuing education required of dentists and dental hygienists to maintain their license to practice in West Virginia.

After talking with a dentist who had scheduled a CPR course, I talked with the American Red Cross office in Charleston today regarding CPR courses they provide. I was told there are two courses. One course instructs participants in adult resuscitation, with the "mouth barrier" technique only. It is a four (4) hour course and requires certification every year. Red Cross charges \$25 for each participant.

The second is termed "professional rescuer" instructing participants in adult and children resuscitation. Part of the instruction includes use of automated exterior defibrillation equipment. It is a seven and one-half (7.5) hour course and requires certification every three (3) years. The charge is \$55 per participant.

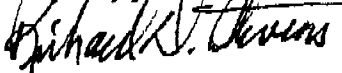
Please note this conflicts with your proposed rule for a three-hour (3) course every two (2) years and the above courses being either four (4) or seven and one-half (7.5) hours, requiring certification every year or every three years. There may be similar conflicts with the American Heart Association. Therefore, your Board is respectfully requested to delete from the proposed rule the language relating to any specific hours and period of time for certification. Deleting this language would eliminate any possible conflicts with American Health Association courses, or, changes the American Red Cross and American Heart Association may make in their courses in the future.

In accordance with the WVDA Executive Council's recommendations conveyed to your Board in a April 7 letter, a copy of which is enclosed, your Board is respectfully requested to change your proposed rule to allow dentists to complete at least three hours of continuing education in any one or combination of the following:

1. Training and certification in CPR;
2. Oral health effects of tobacco and other substance abuse; and
3. Infection control and/or occupational hazards.

Your consideration of the above recommendations in changing your Board's proposed rule is respectfully requested.

Very truly yours,



Richard D. Stevens
Executive Director

FAX

TO: West Virginia Board Of Dental Examiners

FAX #: 304-253-9454

FROM: West Virginia Dental Hygienists' Association

FAX#: 304-336-7770

2 pages plus cover sheet

MEMO:

To Whom It May Concern:

**Please see that this response is included toward the proposed rules changes made by the Board.
A hard copy will follow in the mail and there has also been an email sent.**

If you have any questions please contact me @ 304-336-7770.

Thank you!

**Jennifer Blaskovich RDH, MA, MS
WVDHA Legislative Chair**

West Virginia Dental Hygienists' Association

July 10, 2004

RE: 5CSR1 & 5CSR3

Dear Members of the West Virginia Board of Dental Examiners:

After a complete review of the proposed rule changes to Title 5, the West Virginia Dental Hygienists' Association (WVDHA) respectfully offers the following comments/proposals:

Title 5, Series 3 Fees Established By The Board

1. WVDHA suggests all RDH license fees (both in state and out-of state) be \$65.00.
2. WVDHA suggests dental assistants certified in restorative and orthodontic duties be assessed an annual fee of \$30.00 per year to maintain their certification. According to a letter from Board President, George D. Conard, Jr., DDS, dated July 1, 2003, the dental assistant position on the Board accounts for approximately 15% of the increase in salary and expense moneys for the Board. Dental assistants benefiting from this representation and certification should be assessed this fee to financially support the cost increases incurred by the Board. Recent information suggests the number of certified dental assistants is approximately 533. At a rate of \$30.00 per year that yields an average increase of revenue to the Board of approximately \$16,000.00 per year. These monies would also help offset the additional paperwork and mailing required to maintain the certificate process within the Board office.

Title 5, Series 1 Rule For The West Virginia Board Of Dental Examiners

3. WVDHA would like to have clarification of 10.6 (a) ... serving (as elected, or appointed members), on national, state, and local dental, or dental hygiene boards, councils or committees ... Specifically what types of committees, councils or boards would this include? Would this include service to committees for Dental and Dental Hygiene Associations?

4. WVDHA requests the words "and Dental Hygienists" be added after "Dentists" in 10.6 to read;
Dentists and Dental Hygienists may earn up to five (5) hours of continuing education credit requirements per biennial period....

5. WVDHA makes the following suggestions:

8.1. (a) Delete "dental hygienists or"

8.3. Delete "assigned by a licensed dentist to a dental hygienist in the licensed dentist's employment" and insert performed by a licensed dental hygienist under general supervision to read;

Expanded duties of dental hygienists. In addition to and including those duties set forth in subsection 8.2 of this section, the following duties and/or intraoral tasks may be performed by a licensed dental hygienist under general supervision in hospitals; schools; prisons; community clinics; long term care facilities; nursing homes; home health agencies; group homes for the elderly, handicapped, or youth; state institutions under department of health and human services; public health facilities; and private dental offices.

(l) Delete "with a final evaluation by the supervising dentist"

(m) Delete "under the direct supervision of a licensed dentist"

Add (n) Perform dental screenings.

Add (o) A dental hygienist shall refer any screened patients with possible oral abnormalities to a dentist for a comprehensive examination, diagnosis and treatment.

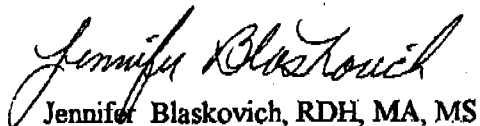
The Dental Practice Act shall be amended under Chapter 30 Section 3 subsection 4 to include a new (16) and read as follows;


"General supervision" means supervision of a dental hygienist by a licensed dentist who is not physically present.

Also, subsection 4 must then be renumbered.

The above proposed rules are submitted by the West Virginia Dental Hygienists' Association for your approval. If you have any questions please do not hesitate to contact us.

Sincerely,


 Jennifer Blaskovich, RDH, MA, MS
 WVDHA Legislative Chair
 304-336-7770


 Joan Gibson-Howell, RDH, MS, Ed D
 WVDHA President
 304-292-4775

Susan Combs

From: Joan Howell [jhowell@hsc.wvu.edu]
Sent: Monday, July 12, 2004 12:38 PM
To: wvbde@charterinternet.com
Subject: proposed rules changes & meeting minutes

Dear Mr. Parkulo:

I am responding to the Board's proposed changes on behalf of myself, a practicing dental hygienist.

1. Regarding CE, dental hygienist should be included along with dentist when awarding CE credit for treating indigent patients.
2. Regarding treating indigent patients - It would be more clear to describe what you mean by indigent patient. Also, it would be helpful to clarify if the dentist is getting paid or is a volunteer for this service.
3. The licensure fee for a dental hygienist for both out and in state should be the same - as proposed at \$65.00. There are many reasons why this must be consistent. We must not penalize the RDH who live out side of WV.
4. The certified dental assistants in restorative and orth should be paying a fee to the state for the state certification. This would allow the Bd. to recoup some monies spent by the bd. for person power time and supplies. It would also allow for improved monitoring and accountability.
5. Please clarify the propped change of earning credit for service on Boards, committees, associations, etc. How will you monitor this?

Thank you.

Joan Gibson-Howell

Sharon Stemple Hinchman, RDH
116 White Oak Lane
Elkins, WV 26241
July 8, 2004

WV Board of Dental Examiners
207 S. Herber St.
Beckley, WV 25801

This is in response to the proposed rule changes. I am **opposed** to the increase in the required continue education hours. There has been no evidence that continuing education increases proficiency. Registered Dental Hygienists typically schedule patients for hygiene recall 6-8 months in advance. CE courses are rarely announced that far in advance. To attend a CE course means canceling, rescheduling and inconveniencing patients. As a professional, I feel a responsibility to study my journals and keep up with new ideas and techniques however, increased CE hours will not increase the level of proficiency. I also feel a responsibility to my patients. Rescheduling of patients is often inconvenient for them.

Increasing the number of CE hours will have an economic impact on dental professionals due to loss of chair time due to attending even more courses. I work on straight commission. If I am not working, I lose money. The office loses money.

I don't feel that being a part of the governing body or attending association meetings necessarily fulfill the purpose of CE requirements. Again, there is no evidence that supports CE as an increase in competency. I am a past president of the WVDHA.

I agree with decreasing the number of required hours for blood bourn pathogens CE. There have been very minor changes in the information since the first few years. I feel that the professionals that truly took the information to heart and made necessary changes in the day-to-day procedures have done so. Others, primarily older professionals took the attitude that no one has been hurt all the years of their practice and aren't going to change no matter how many CE hours they sit through. The blood pathogen course has become so redundant, that attendees chat throughout the presentation, which is immature, rude and distracting to those of us that chose to actually give the presenter due attention.

I am also opposed to the extreme increases in fees. Registered Dental Hygienists have one representative on the Board of Dental Examiners compared to 6 Dentists. We are not being fairly represented yet the proposed fees are almost doubled. The cost for obtaining list of licensed professionals seems extremely high unless this is for the purpose of selling the lists to businesses for promotional purposes to make money. It is relatively cheap and not time consuming or labor intensive to run a computer list of names.

When are there going to be CE courses available for training Registered Dental Hygienists to administer local anesthesia? The original proposal was to allow the dentist/employer to show the RDH how to administer local anesthesia. RDHs responsibly demanded that the training be thorough and complete. Dental students are only required to give one block and one infiltration in practice before working on patients. The word is that RDHs would be required to do 70 injections. The oral anatomy is the same for hygiene and dental students.

Sincerely,

Sharon S. Hinchman
Sharon Stemple Hinchman, RDH

JUL 12 2004

STATEMENT OF AMENDMENTS

The following amendments were made, due to comments received, during the Board's meeting of July 14, 2004:

Upon motion by Dr. Bernard J. Grubler, and properly seconded by Dr. H. Richard Marshall, Jr., and unanimously passing to series 1 Section 10.4 (c) will read:

"At least two hours of continuing education shall be related to any one or combination of the following subjects during each continuing education reporting period 1) infection control and/or occupational hazards; 2) oral effects of tobacco use; or 3) oral effects of substance abuse."

Upon motion by Dr. Richard D. Smith and properly seconded by Dr. H. Richard Marshall, Jr., and unanimously passed Section 10.4 (d) will read:

"A current certification for a Health Care Provider/Basic Life Support course recognized by the American Heart Association or American Red Cross shall be required each continuing education period, and such certification will count as continuing education credits." and

Upon motion by Dr. H. Richard Marshall, Jr., and properly seconded by Mrs. Dina A. Vaughan, and unanimously passed Section 10.6 (b) will read:

"Dentists may earn up to five (5) hours and Dental Hygienists may earn up to three (3) hours of continuing education credit requirements, per biennial period, for providing dental care to indigent patients. One-half (.5) hour credit will be allowed for every hour of documented treatment."

FINDINGS, DETERMINATIONS AND REASONS

The Board received 6 written comments during the comment period. (The comments are specifically referenced in the index and numbered as received during said comment period.)

It should be noted that a few letters represent associations, societies and one or more individuals. However, the Board did not take a headcount for purposes of consideration, but did review the content of each written comment submitted.

Written comments were broken down as to "content only" for purposes of the Board's review and consideration, as follows:

Comment # 1 - generally objecting to increasing continuing education hours from 20 to 35.

Comment # 2 - (a) objecting to continuing education credits for service on dental related committees, (b) objecting to dental hygienists not being allowed to have credit for indigent services.

Comment # 3 - (a) objecting to number of hours set for CPR course certification, (b) requested changes to allow dentists to complete at least three hours of continuing education in any one or combination of the following: training and certification in CPR, Oral health effects of tobacco and other substance abuse and infection control and/or occupational hazards.

Comment # 4 - (a) requested dental hygienists be added to 10.6, (b) requested language be changed allowing for general supervision and allow dental hygienists to perform dental screenings.

Comment # 5 - requested dental hygienists be allowed credit for indigent services.

Comment # 6 - (a) general objection to increasing continuing education hours for dental hygienists, (b) objected to continuing education credits for attending association related meetings, (c) agrees to the decrease of infection control hours.

After the Board's review as to content, the Board addressed and put each one under consideration at it's meeting and made the following amendments based upon the written comments received.

AMENDMENTS

Upon motion by Dr. Bernard J. Grubler, and properly seconded by Dr. H. Richard Marshall, Jr., and unanimously passing to series 1 Section 10.4 (c) will read:

"At least two hours of continuing education shall be related to any one or combination of the following subjects during each continuing education reporting period 1) infection control and/or occupational hazards; 2) oral effects of tobacco use; or 3) oral effects of substance abuse."

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The Board, after reviewing all the written comments in their entirety, does hereinabove set forth only the above amendment changes after said review, as specifically stated and noted in the proposed rules and regulations. While the Board considered all materials presented to it's attention for review and consideration during the written comment period, any changes not made by the Board upon said review is based upon the fact that the Board considers the proposed rules and regulations as finalized at this time

are a move forward to elevate the practice of dentistry in the State of West Virginia to match the profession of dentistry in other states across the country.

Furthermore, the West Virginia Board of Dental Examiners is of the opinion with the passage of the new Dental Practice Act of July 2001 and in conjunction with the new proposed changes to the rules and regulations, that the profession of Dentistry in the State of West Virginia will be brought up to speed for the 21st century, advancing the health safety and welfare of residents, citizens and other persons needing such services in our Great State.