

IN THE MATTER OF

KASHYAP D. PATEL, D.D.S.

Respondent

License Number: 15582

\* BEFORE THE MARYLAND  
\* STATE BOARD OF DENTAL  
\* EXAMINERS  
\* Case Number: 2022-096

\* \* \* \* \*

**CONSENT ORDER**

In or around January 2022, the Maryland State Board of Dental Examiners (the “Board”) opened an investigation of **KASHYAP D. PATEL, D.D.S.** (the “Respondent”), License Number 15582. Based on its investigation, the Board determined that it has grounds to charge the Respondent with violating the Maryland Dentistry Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 16-101 *et seq.* (2021 Repl. Vol.).

The pertinent provisions of the Act provide:

**Health Occ. § 4-315**

- (a) *License to practice dentistry.* – Subject to the hearing provisions of § 4-318 of this subtitle, the Board may ... reprimand any licensed dentist, place any licensed dentist on probation, or suspend or revoke the license of any licensed dentist, if the ... licensee:
  - (16) Behaves dishonorably or unprofessionally, or violates a professional code of ethics pertaining to the dentistry profession;
  - (30) Except in an emergency life-threatening situation where it is not feasible or practicable, fails to comply with the Centers for Disease Control’s guidelines on universal precautions[.]

Prior to the Board issuing disciplinary charges, the Respondent agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

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### III. INFECTION CONTROL INSPECTION

4. Due to allegations of potential infection control issues at the Office, on or about May 6, 2022, a Board-assigned infection control inspector (the "Board Inspector"), along with a Board investigator, visited the Office and conducted an infection control inspection.

5. The Respondent was present during the inspection, as was another dentist, an associate dentist (the "Associate Dentist"), the office manager (the "Office Manager"), a dental hygienist (the "Dental Hygienist"), three dental assistants ("Dental Assistant 1", "Dental Assistant 2" and "Dental Assistant 3") and two front desk employees. One of the front desk employees was a receptionist (the "Receptionist") and one was an insurance coordinator.

6. As part of the inspection, the Board Inspector utilized the publicly available Centers for Disease Control and Prevention Infection Prevention Checklist for Dental Settings. Based on the inspection, the Board Inspector made the following findings regarding the Office's compliance with the CDC Guidelines:

#### **CDC Update Covid Recommendations**

**Maryland State Board of Dental Examiners ("MSBDE")/Health Department Notification** – COVID-19 Order requirements were submitted and notification was posted.

**Personal Protective Equipment ("PPE") Inventory** – PPE inventory was sufficient to support scheduled patients for treatment for approximately two weeks.

**N95 Fit Test** – The required N95 Fit Test documentation could not be verified.

review. The Office did not have hand hygiene protocol posted in any of the treatment operatories, the instrument processing area, staff lounge or restrooms.

**I.6 Personal Protective Equipment (PPE)** - The Office did not have an infection control manual available for review. There was no practice-specific protocol for donning, doffing, disposing or use of PPE.

**I.7 Respiratory Hygiene/Cough Etiquette** – The Office had no practice-specific protocol available for inspection. “Cover Your Cough” protocol was posted for patients to view prior to entry. Hand sanitizer was available for patients to use upon check in. The Board’s “We Take Precautions For You” was not posted for patients to view. Screening of patients was not verified or performed prior to the inspector’s request for proof of policy or documentation. After the request, the Office Manager directed the Receptionist to perform patient screening.

**I.8 Sharps Safety** – Practice-specific written protocol for the handling and disposal of sharps was not available for review.

**I.9 Safe Injection Practices** - The Office did not have practice-specific written protocol for the safe handling and preparation of injectables used for patient treatment.

**I.10 Sterilization and Disinfection of Patient Care Items and Devices** - The Office did not have practice-specific written protocol for sterilization and/or disinfection for the reuse of patient care items or equipment. The Office did not have documentation of policy or staff training regarding the sterilization and/or disinfection for the reuse of patient care items or equipment.

**I.11 Environmental Infection Prevention and Control** - The Office did not have documentation of policy or staff training regarding the disinfection of environmental, touch and clinical contact surfaces in the patient treatment area. Barriers were placed on touch surfaces, dental light handles, dental unit control pads, and on the headrest covers of the dental chairs. Barriers were also placed on the x-ray imaging exposure button, but they were not changed after patient treatment.

**I.12 Dental Unit Water Quality** - The Office did not have practice-specific written protocol for monitoring dental unit water quality.

## **Section II: Direct Observation of Personnel and Patient-Care Practices**

**II.1 Hand Hygiene is Performed Correctly** – The Office did not have hand hygiene protocol posted at any of the treatment operator sinks, in the instrument processing area, staff lounge, or in the restrooms. Treatment operator sinks require touching of the faucet to turn the water on and off. The Associate Dentist was observed performing hand

recent entries. Benco Dental service receipts show that service was required for the Midmark sterilization unit in January and February of 2022. A spore test could not be verified. The spore test log did not contain any entries. Slow speed handpieces were not removed from the unit after patient treatment. Sterilization pouches were not identified as to date of processing. Sterilization pouches were not consistently packaged correctly; numerous pouches were not sealed at the perforation and there was evidence of torn sterilization pouches in storage. The implant drilling unit motor, irrigation tubing and the endo handpiece were still connected to the unit. An implant surgical cassette wrapped in a processing pouch was not sealed at the perforation and there was condensation in the package. The pouch was not identified as to date of processing. There were unwrapped cassettes in the treatment operatory cabinets. There were open sterilization pouches of implant cover screws and healing abutments located in the closed treatment operatory. Dental materials were stored in the same refrigerator as food in the staff lounge.

**II.7 Environmental Infection Prevention and Control** - The Office did not place barriers on the HVE/SVE handpiece or the air/water syringe. Disinfectant wipes were re-packaged in a clear canister and were not labeled. The canister lid was not secured. Barriers on the x-ray exposure button were not changed after exposure and patient dismissal. Based upon direct observation in the treatment operatory, the Office had inconsistent hand hygiene. Gloves were worn to remove contaminated items that were not changed before disinfecting the treatment room.

**II.8 Dental Unit Water Quality** – Based upon direct observation, the Office’s post-treatment protocol did not include flushing handpieces or the air/water waterlines after patient treatment. Treatment operatory units are supplied with self-contained water bottles. There was no evidence that waterline testing was performed; no reports or results were made available.

7. Based on the observations made by the Board Inspector, the Respondent failed to ensure compliance with CDC Guidelines at the Office. However, after being notified of violations, the Respondents immediately engaged a Board-approved infection control specialist in May 2022 to ensure the Office was in full compliance of CDC Guidelines. The infection control specialist has since issued a report, dated December 13, 2022, with photo attachments detailing corrective actions taken by the Office to ensure full compliance with CDC Guidelines.

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3. During the probationary period, the Respondent shall be subject to quarterly unannounced onsite inspections by a Board-assigned inspector;
4. The Board-assigned inspector shall provide inspection reports to the Board within ten (10) business days of the date of each inspection and may consult with the Board regarding the findings of the inspections;
5. The Respondent shall, at all times, practice dentistry in accordance with the Act, related regulations, and shall comply with CDC and Occupational Safety and Health Administration's ("OSHA") guidelines on infection control for dental healthcare settings, including enhanced COVID-19 related precautions; and
6. At any time during the period of probation, if the Board makes a finding that the Respondent is not in compliance with CDC and/or OSHA guidelines, the Respondent shall have the opportunity to correct the infractions within seven (7) days and shall be subject to a repeat inspection within seven (7) days to confirm that the violation has been remedied.
7. The Respondent is fined in the amount of **TWO THOUSAND FIVE HUNDRED DOLLARS (\$2500)**, due within sixty (60) days to the board;
8. Within three (3) months of the effective date of this Consent Order, the Respondent shall successfully complete a Board-approved in-person four (4) credit hour course(s) in infection control protocols, presented by a board-approved instructor, which may not be applied toward his license renewal.
9. Within three (3) months of the effective date of this Consent Order, the Respondent shall successfully complete a Board-approved in-person two (2) credit hour course(s) in ethics, presented by a board-approved instructor, which may not be applied toward his license renewal.
10. The Respondent may file a petition for early termination of his probation after one (1) year from the date of this Consent Order. After consideration of the petition, the Board, or a designated

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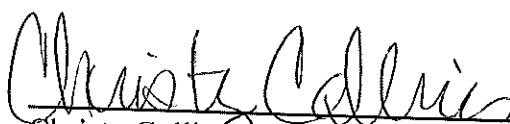
Respondent has failed to comply with any term or condition of probation or this Consent Order, the Board may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend or revoke the Respondent's license to practice dentistry in Maryland. The Board may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine upon the Respondent; and it is further

**ORDERED** that the Respondent shall be responsible for all costs incurred under this Consent Order; and it is further

**ORDERED** that the Effective Date of this Consent Order is the date on which the Consent Order is executed by the Board Executive Director, and it is further

**ORDERED** that this Consent Order is a public document pursuant to Md. Code Ann., Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2021 Repl. Vol.).

1/18/2023  
Date

  
\_\_\_\_\_  
Christy Collins, Ed.D., Executive Director  
Maryland State Board of Dental Examiners



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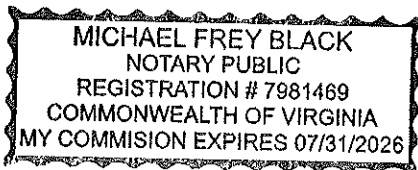
NOTARY PUBLIC

STATE OF Virginia

CITY/COUNTY OF: Fairfax


I HEREBY CERTIFY that on this 3 day of January, 2023, before me, a Notary Public of the State and County aforesaid, personally appeared Kashyap D. Patel, D.D.S., and gave oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.



Notary Public 

My commission expires: 07/31/2026

  
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