The President’s Message—Positive Changes!
James Goldsmith, DMD

I’m James Goldsmith, DMD, Immediate Past President of the Maryland State Board of Dental Examiners. I am privileged to have held this position through May 2007. I am a pediatric dentist practicing full time in Laurel.

Most readers of the President’s Message are accustomed to seeing warnings about what dentists and dental hygienists should do to avoid the disciplinary process. It is clear that we must adhere to CDC guidelines, do the best dentistry we can, communicate clearly with our patients by giving them the benefit of our knowledge, allow patients the opportunity to voice their concerns, refer our patients when their dental needs exceed our capabilities, and keep current with our CE responsibilities.

However, this message will not be about any of those things. For a change, I’d like to discuss some of the positive steps the Board is taking to enhance service to all of our licensees as well as to the citizens of Maryland.

First, on-line license renewal has become a reality instead of a promise. This is largely due to the efforts of our new executive director, Mr. H. Robert Hergenroeder, Jr. The first year of the program has been very well received with 90% of our licensees rating the online renewal as “good” or “excellent.” Paper work has been markedly reduced, efficiency has been enhanced, and licenses were mailed within 48 hours. Second, your Board sponsored a continuing education course on infection control in April 2006 at the Patapsco Arena in Baltimore. This was a sincere attempt by your Board to help our licensees get their infection control CE credits and also gain an insight into the disciplinary process for CDC violations. Third, most of the Board staff vacancies have been filled. This has allowed us to handle all Board functions and duties in a more efficient fashion. Fourth, Board members and staff continue to volunteer to conduct seminars at the University of Maryland School of Dentistry. These seminars provide examples of common disciplinary problems that the Board faces so that new graduates learn how these problems might be avoided. Finally, on-line license renewal for dental radiation technologists began in January 2007 with 99% of those renewing rating the new renewal procedure as “excellent.”

Like any organization, the Board constantly seeks to improve its service. If I have learned anything from being a Board member, it is that there are always new challenges to face and problems to solve. We genuinely welcome your input and suggestions.

Sincerely,
James Goldsmith

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Continuing Education Credits

Continuing education course requirements must be completed by December 31 for a license expiring on June 30 of the following year. If an extension is requested to allow you to fulfill CE requirements after December 31, credits earned during the extension will apply only to the upcoming renewal. You may not “double dip” for the renewal period following the upcoming renewal. CE records must be kept for five years. Be sure to print a copy of your completed renewal form for your records.

When listing CE courses on your renewal form, include the date of the course, the course title (not the course number), and credit hours received. The course title is not synonymous with the name of the Board approved sponsor of the course. Up to 15 hours of self study courses may be accepted for CE credit. CE courses must enhance the licensee’s clinical knowledge and ability to treat dental patients.

*Please note that some course sponsors state that their course has been approved by the Board for CE credit toward licensure. This is not always true. Contact the Board in writing with the course title, description, date of course, and CE hours offered to verify that the course will be accepted toward licensure. It is your responsibility to ensure that the credit hours you earn will count toward your CE credit.*

Answer Questions Accurately

Answer questions accurately on the renewal application. For example, Section IV Character and Fitness, question “O” asks, “Have you ever failed a state, jurisdictional, or regional dental exam for licensure?” If the NERB was taken prior to the Curriculum Integrated Format and a failing grade was received in any section requiring a retake of that section, the answer to Question “O” is “Yes.” If a failing grade was received in the new CIF format of NERB and the failed section was retaken resulting in a passing grade within the CIF series of 12 months, the answer to Question “O” is “No.” If a failed section of the CIF NERB was retaken and passed in the following years of other CIF series’, the answer to Question “O” is “Yes.”

Renewal of your license is your responsibility. Know its expiration date and submit your renewal application in a timely fashion.

For more information on renewal of licenses and continuing education requirements go to the Board’s website at www.dhmh.state.md.us/dental, click “Statutes and Regulations;” under “Quick Links,” click “Regulations;” click “10.44.10” for renewal of licenses and “10.44.22” for CE information.

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Thank you to the following individuals for their contributions to the newsletter.

H. Robert Hergenroeder, Jr., Executive Director
Murray Sherman, Assistant Executive Director
Richard Bloom, Esq., Board Counsel
Fred Magaziner, DDS, Dental Compliance Officer
Desiree DeVoe, Dental Compliance Secretary
Deborah Welch, Licensing Coordinator
James Goldsmith, DMD, President
J. Timothy Modic, DDS, Secretary-Treasurer
Elaine Miginsky, DDS
Barry Lyon DDS, Newsletter Editor

The Maryland State Board of Dental Examiners encourages you to submit questions or comments regarding the Board or the newsletter.

Please send them to:

H. Robert Hergenroeder, Jr.
Executive Director
Maryland State Board of Dental Examiners
Spring Grove Hospital Center
Benjamin Rush Building
55 Wade Avenue
Catonsville, Maryland 21228
Spa Dentistry
Elaine Miginsky, DDS

Many trendy spas, nail salons, cruise ships, and hair styling businesses now offer tooth whitening services to the general public. Although spa dentistry began in foreign countries where dental bleaching is done in shopping mall kiosks by trained lay persons, dentists in Maryland who elect to perform this service should be aware that tooth whitening is considered by the Board to be a dental procedure and dentists must therefore comply with the Maryland dental laws when performing tooth whitening. In short, those persons receiving tooth whitening are your patients regardless of the setting in which the tooth whitening is performed. HIPAA and CDC compliance must exist. Dental records for each patient must be kept and the appropriate standard of care followed. A medical history should be taken and a dental examination performed and charted prior to bleaching. Risks, options, and benefits of tooth bleaching should be discussed with the patient and informed consent obtained and charted. Dates of visits and services performed should be recorded. Patient records are confidential and should be stored in a locked cabinet in a locked office.

A dental hygienist may perform tooth bleaching under the general supervision of a dentist if the requirements of general supervision are first met. If a dental assistant qualified in general duties or a dental assistant qualified in orthodontics is assigned the tooth bleaching task, the bleaching must be done under the direct supervision of a dentist who must be on the premises during the bleaching procedure, and who must personally evaluate the performance of the dental assistant before the patient is dismissed. A dental assistant that is not qualified in general duties or orthodontics may not perform the bleaching. Note that internal tooth bleaching or laser bleaching is a duty that cannot be delegated to any auxiliary personnel.

Although the Board recognizes that the practice of dentistry continues to evolve, it must maintain its commitment to assure that the citizens of Maryland receive quality dental care.

Accountability and Responsibility
Timothy Modic, DDS Secretary-Treasurer

There is a custom in the Navy that if a ship runs aground it is the captain who is held accountable and relieved of command regardless of which crew member is responsible for the accident. In this area, a dental practice is much like a ship and the owner-dentist much like the captain.

The issue of responsibility and accountability is often a topic of conversation at the Board. One area that is repeatedly discussed is the simple requirement that dentists renew their licenses in a timely manner. In past newsletters we have addressed the dentists’ need to be aware of their license renewal dates.

In most practices there are a number of individuals-dentists, dental hygienists, and dental radiation technologists who are required to maintain a current license or certificate and who individually are responsible for doing so. However, it is also the owner-dentist who is ultimately responsible that all individuals working in their office who require licenses or certificates have current ones.

If a hygienist or dental radiation technologist allows his or her license or certificate to expire yet continues to practice, the dentist is in violation of the dental laws even if the dentist claims to be unaware of the infraction. Dental hygienists and dental radiation technologists work for dentists and a dentist may be sanctioned for allowing the unauthorized practice to occur. The captain of the ship that ran aground may not have been able to prevent it but the dentist very easily can.

Make certain that each new employee has the appropriate license and that it is current. With existing employees, be aware of when the license or certificate expires.

Unfortunately, the Board has become aware that some individuals have presented dentists with fraudulent licenses and certificates. Look at the document carefully. If a license or certificate does not look authentic or you merely wish to confirm licensure, you are encouraged to call the Board at 410-402-8500. Ask for the licensing unit and they will gladly assist.

Finally, never rely on your office manager or other auxiliary personnel to remind you of the need to renew your license. After each renewal period the Board hears the same excuse from a number of dentists. “I relied on my office manager and assistant to tell me but they didn’t” or “I relied on my office manager or assistant and they left the office abruptly to take another job and they didn’t tell me.” I do not wish to sound trite but the answer is simple. When you are finished reading this article take a look at your license. Note and calendar the expiration date. Remind yourself of that date in whatever way works.

On or about May 1, 2007 the Board mailed, to the address on file with the Board, correspondence to those dentists and dental hygienists who were scheduled for license renewal by June 30, 2007. If your license expires on June 30, 2007 and you haven’t heard from the Board by now, call the Board immediately. Avoid the complications of an expired license-the wasted time, the paperwork, the additional costs, the loss of income, the disciplinary action, and the embarrassment of having the Board issue a Cease and Desist Order requiring you to close down your office until you are properly licensed. Please take just a few moments now to save yourself a lot of trouble later.
DO’S & DON’TS-AVOIDING THE POTENTIAL PROBLEM  
Fred Magaziner, DDS Dental Compliance Officer

The Maryland State Board of Dental Examiners has been asked on numerous occasions to comment on various services or procedures and who may perform them in the State of Maryland. Some of the most meaningful and frequent inquiries relate to the following:

Nitrous Oxide-Oxygen:

Only a dentist may administer, maintain, and monitor nitrous-oxide. The dentist must remain in the operatory and be able to directly observe the indicators showing the delivery of gasses.

Radiography:

Only licensed dentists, dental hygienists, and dental radiation technologists certified by the Maryland State Board of Dental Examiners may place or expose film or sensors for dental radiographs. Other auxiliary personnel may not place or expose radiographs.

An individual enrolled in an educational program recognized by the Maryland State Board of Dental Examiners for dental hygiene or dental assisting, who places or exposes dental radiographs pursuant to the educational program is not required to be certified. However, once the educational program has ended, the individual must not place or expose dental radiographs without first being certified by the Maryland State Board of Dental Examiners. Certification by any other Board or body is not sufficient.

The processing of radiographs, although a very important step in achieving viable diagnostic radiographs, does not require certification. However, it is imperative that the training of the person doing such processing include darkroom care and maintenance as well as the proper handling of film to avoid the need for retaking radiographs and having the patient undergo additional and avoidable x-ray exposure.

Bite Registration:

A dentist, dental hygienist, or dental assistant may record the occlusion of the teeth by a wax bite or silicone. Only a dentist may record the advanced complex myofunctional and temporo-mandibular joint activity and “bite” positioning.

Cosmetic Whitening

Only a dentist or dental hygienist may apply the initial and the incremental whitening materials to teeth used with coordinated light sources. (Zoom, Bright Smile, etc). The materials used, the concentration, time of the procedure and the time of each application should be well documented.

Home bleaching:

Home tray bleaching agents should only be dispensed by a dentist’s prescription. Documentation of the concentration and number of syringes dispensed should be recorded.

Lasers:

Lasers may be used only by a dentist whether for hard or soft tissues. The employment of lasers in the treatment should be well documented.

Botulinum Toxin:

The Board has received many inquiries related to the use of botulinum toxin (Botox) in dental offices for various procedures. The Board has determined that only an oral and maxillofacial surgeon may administer these products.
Over-treatment and Under-treatment
Barry Lyon, DDS

The Board regularly receives complaints alleging over-treatment or under-treatment. Under-treatment is failing to diagnose dental pathology, failing to address patient concerns, or ignoring clinical findings. Alternately, over-treatment is the treatment of non-existent pathology or providing services excessive to the true needs of the patient.

Patient complaints of over-treatment are usually a result of a patient receiving a diagnosis of significant pathology and being given a radically different treatment plan when a second opinion has been sought. In these situations, the Board will subpoena records from the original dentist and records from the subsequent treating dentist. Patient complaints regarding under-treatment are usually the result of a patient developing extensive dental problems after being under the care of a particular dentist for a long period of time.

Remember…

- Document all diagnostic information before beginning root canal therapy.
- All advertisements must include the name of a dentist who provides dental services at the location advertised.
- Be sure to verify the licenses or certificates of newly hired clinical personnel.
- Know when to refer.
- Indicate that the patient has given informed consent.
- Base your treatment on diagnostic and appropriate radiographs.
- Employees of an oral and maxillofacial surgery office who expose radiographs must have a dental radiation technologist certificate.
- Prescribe only for patients of record and only for dental conditions.
- Have written treatment plans.
- Explain all charges, insurance balances, and patient co-pays prior to beginning treatment.
- Do not allow patients to convince you to post-date insurance claims.
- You may not forgive a co-payment unless you disclose to the insurance company that the patient’s co-payment will not be collected.

COSMETIC DENTISTRY

Periodically the Board is asked whether general dentists may perform cosmetic surgery and/or cosmetic drug or chemical facial enhancement. The Board has consistently interpreted the Maryland Dentistry Act as limiting these procedures to oral and maxillofacial surgeons. In the Board’s view, general dentists or specialists other than oral and maxillofacial surgeons who perform these procedures are practicing outside of the scope of the practice of dentistry.
Cultural competency in health applies to all health care providers in every aspect of their work. It simply means that health care providers possess a set of behaviors, attitudes, and policies that are tailored to address the linguistic and cultural needs of their patients. Understanding and respect of the cultural, religious, and lived experience is key in every aspect of existence, but it is especially important in the health care arena. There is indisputable data that illustrates that increasing cultural competency of health care providers is associated with increased trust in the medical system, enhanced patient satisfaction, and greater adherence to treatment regimen.

In order to increase the cultural competency of health care providers, the United States Department of Health and Human Services, Office of Minority Health (OMH) developed and tested a curriculum on cultural competency training for health care providers entitled “A Family Physician’s Practical Guide to Culturally Competent Care.” The teaching module which leads to 9 free CME credits (Physicians), 9 CNE credits (Nurses), or 3 contact hours (0.3 CEUs) (Pharmacists) is interactive, free, and is based on the latest research in the area of cultural competence. It incorporates the CLAS (Culturally and Linguistically Appropriate Services) standards and can be accessed on the following site: http://thinkculturalhealth.org/cccm/.

It is important to note that the OMH training is accredited by the American Medical Association (AMA), Association of Family Physicians, and the American Nurses Credentialing Center's Commission on Accreditation.
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<th>LICENSEE NAME AND NUMBER</th>
<th>SUMMARY OF ACTION TAKEN</th>
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<tr>
<td>Raymond Marshall, D.D.S., Lic. # 6590</td>
<td>Consented to a six month stayed suspension and two-year probation with conditions for allowing a non-licensed individual to practice dentistry and behaving dishonorably or unprofessionally effective 4/5/2006.</td>
</tr>
<tr>
<td>David Hyde, D.D.S., Lic. # 8105</td>
<td>License Revoked effective 4/19/2006 for violating his Consent Order conditions.</td>
</tr>
<tr>
<td>Patrick Madden, DDS, Lic. # 7561</td>
<td>Consented to a one-year suspension, all but 15-days stayed beginning 5/26/2006 and ending on 6/10/2006, and 28-month probation for practicing dentistry in a professionally incompetent manner and behaving dishonorably or unprofessionally.</td>
</tr>
<tr>
<td>Maria Sevilla-Guevara, DDS, Lic. # 12374</td>
<td>Consented to a six months suspension, immediately stayed, and two-year probation, with conditions for permitting unauthorized individuals to practice dentistry under the supervision of the respondent, by allowing them to monitor patients under nitrous oxide effective 5/17/2006.</td>
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<tr>
<td>LICENSEE NAME AND NUMBER</td>
<td>SUMMARY OF ACTION TAKEN</td>
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<td>Steven Afsahi, DDS, Lic. # 9873</td>
<td>License revoked for one-year for being disciplined in Virginia for violating ethical boundaries effective 6/7/2006.</td>
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<tr>
<td>Michael Folk, RDH, Lic. # 3563</td>
<td>License revoked effective 6/28/2006 for engaging in sexual misconduct with patients.</td>
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<tr>
<td>Dezrie Smith, DDS, Lic. # 10897</td>
<td>Consented to a one-year suspension, all but 30-days stayed, and 36-months probation with conditions effective 7/19/2006 for practicing dentistry in a grossly incompetent manner; violating a professional code of ethics; and behaving dishonorably or unprofessionally.</td>
</tr>
<tr>
<td>Charles Bowie, Jr., DDS, Lic. # 4969</td>
<td>Consented to a one-year suspension and five years probation effective 8/16/2006 for practicing without a license for a three year period and allowing anesthesia to be administered without a facility permit.</td>
</tr>
<tr>
<td>Hassan Chehayeb, DDS, Lic. # 10921</td>
<td>Licensee Reprimanded with conditions for having been disciplined in another state effective 8/16/2006.</td>
</tr>
<tr>
<td>Daniel Placido, DDS, Lic. # 3286</td>
<td>Consented to a Reprimand and one-year probation effective 9/6/2006 for CDC violations, behaving dishonorably or unprofessionally and permitting unauthorized persons to perform unauthorized acts. Order of Suspension effective 1/10/2007 for failing to comply with the Consent Order.</td>
</tr>
<tr>
<td>Dewitt Fortenberry, DDS, Lic. # 7144</td>
<td>License Surrendered effective 9/6/2006 for failing to comply with a Board Order and failing to comply with CDC guidelines.</td>
</tr>
<tr>
<td>Anthony Schwartz, DDS, Lic. # 6435</td>
<td>Consented to a Reprimand and one-year probation with conditions dated 10/18/2006 for failing to comply with CDC guidelines. Probation terminated and license restored without conditions or restrictions effective 4/18/2007.</td>
</tr>
<tr>
<td>Deborah Caruso, DDS, Lic. # 10561</td>
<td>Consented to a Reprimand and conditions effective 10/18/2006 for practicing on an expired license.</td>
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<tr>
<td>Stephen Gentile, DDS, Lic. # 10473</td>
<td>License placed on a one-year suspension, immediately stayed, with conditions for practicing on an expired license.</td>
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<td>LICENSEE NAME AND NUMBER</td>
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<tr>
<td>John Law, DDS, Lic. # 4249</td>
<td>License revoked effective 11/15/2006 for behaving dishonorably or unprofessionally and failure to comply with a Board Order.</td>
</tr>
<tr>
<td>Charles P. Franz, DDS, Lic. # 7882</td>
<td>License Revoked effective 12/6/2006 for non compliance with the Well Being Committee contracts.</td>
</tr>
<tr>
<td>Sharon Keister, DDS, Lic. # 8840</td>
<td>Consented to a suspension of one year; all but 15-days stayed and 18-months probation with conditions for standard of care violations effective 12/6/2006.</td>
</tr>
<tr>
<td>Ronald Gravitz, DMD, Lic. #6317</td>
<td>Consented to a suspension of one year, all but 5-days stayed, two-years probation for allowing unlicensed persons to perform unauthorized duties and failure to comply with a Board Order effective 12/20/2006.</td>
</tr>
<tr>
<td>Elena Madariaga, DRT, Lic. # 12208</td>
<td>Consented to a suspension of one year, all but 5-days stayed, two-years probation for performing unauthorized duties and failure to comply with a Board Order effective 12/20/2006.</td>
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<tr>
<td>Noel Tait, DDS, Lic. # 6845</td>
<td>Consented to a probation for three-years with conditions for being having been disciplined by another state effective 12/20/2006.</td>
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<tr>
<td>Marva Herring, DDS, Lic. # 9986</td>
<td>License Summarily Suspended effective 1/3/2007 for failure to comply with CDC guidelines.</td>
</tr>
<tr>
<td>Anton Grobani, DDS, Lic. # 3313</td>
<td>Consented to a five days suspension and one year probation, with conditions, for his failure to comply with CDC guidelines.</td>
</tr>
<tr>
<td>Ernest Colvin, DDS, Lic. # 4553</td>
<td>Consented to a Reprimand and one-year probation with conditions for his failure to comply with CDC guidelines.</td>
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Board Staff

Executive Director- H. Robert Hergenroeder, Jr.
Assistant Executive Director- Murray Sherman

Board Counsel– Richard Bloom, Asst. Attorney General
Dental Compliance Officer– Frederick Magaziner, DDS
Fiscal Analyst– Sharon Gregg-Jones
Secretary to the Executive Director– Alexis McCamey
Dental Compliance Secretary– Desiree DeVoe
Health Occupations Investigator– Lisa Schafer
Health Occupations Investigator– Carlos Montoya
Health Occupations Investigator– Wayne Wilson

Case Manager– Gloria Byrd
Licensing Coordinator– Debbie Welch
Dental Hygienist Coordinator– Chenee Jefferson-El
Dental Assistant Coordinator– Patsy Sherwood
Verifications Coordinator– Rona Melton
Computer Network Specialist– Roger Matherly
Office Clerk– Mary Hope

Contact Us
Main Line: 410-402-8500
Administration: 410-402-8501
Licensing Unit: 410-402-8511   FAX: 410-402-8505
Discipline Unit: 410-402-8538   FAX: 410-402-8523

Check out our new and improved website- www.dhmh.state.md.us/dental

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