

VIRGINIA BOARD OF DENTISTRY  
**BOARD BUSINESS MEETING AGENDA**  
DECEMBER 8, 2023

<u>TIME</u>		<u>PAGE</u>
9:00 a.m.	<b>Call to Order – Dr. Nathaniel C. Bryant, President</b>	--
	<b>Public Comment – Dr. Bryant</b>	--
	<b>Approval of Minutes</b>	
	• June 16, 2023, Board Meeting	1-5
	• June 30, 2023, Formal Hearing	6-7
	• July 28, 2023, Formal Hearing	8-10
	• September 15, 2023, Telephone Conference Special Session	11-12
	• September 28, 2023, Formal Hearing	13-14
	<b>DHP Director’s Report – Arne W. Owens</b>	--
	<b>Board Counsel Report – Mr. Rutkowski</b>	--
	<b>Liaison &amp; Committee Reports</b>	
	• Nominating Committee- Dr Bryant	--
	• ADEX 2023 Meeting – Dr. Bryant	
	• CODA Review – Dr. Bryant	
	• CLEAR Conference – Ms. Sacksteder	
	• AADA & AADB Meetings – Ms. Sacksteder	
	• Board of Health Professions Meeting – Ms. Lemaster	
	• Upcoming Southern Deans and Dental Examiners Annual Conference – Ms. Sacksteder / Dr. Bryant	
	<b>Legislation and Regulation - Ms. Barrett</b>	
	• Status Report on Regulatory Actions Chart	15-16
	• <b>Regulatory Meeting for SB 1539 Dentistry: botulinum toxin injections for cosmetic purposes: Proposed Regulations</b>	17-24
	• <b>Proposed revised public participation guidelines – 18VAC60-11</b>	25-33
	• <b>Proposed revised electronic participation revised policy -Virginia Code § 2.2-3708.3</b>	34-39
	• <b>Guidance Document Updates</b>	
	○ 60-17	40-45
	○ 60-25 and 60-26	46-60

**Board Discussion Action**

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- **Consideration of Public Comments**
- **Presentation of Dental Licensure Compact**
- **CSG Presentation with Q and A – Matt Shafer**
- **AADB Presentation with Q and A**

**Deputy Executive Director’s Report – Ms. Weaver**

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- **Disciplinary Report**

**Executive Director’s Report – Ms. Sacksteder**

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- **FY 2023 Ending Budget**
- **Workgroup for HB 2251 – Licensure by Endorsement – Ms. Sacksteder**

**VIRGINIA BOARD OF DENTISTRY  
BUSINESS MEETING MINUTES  
June 16, 2023**

- TIME AND PLACE:** The meeting of the Virginia Board of Dentistry was called to order at 9:00 a.m., on June 16, 2023, at the Perimeter Center, 9960 Mayland Drive, in Board Room 4, Henrico, Virginia 23233.
- PRESIDING:** Nathaniel C. Bryant, D.D.S., President
- MEMBERS PRESENT:** Jamiah Dawson, D.D.S., Vice-President  
J. Michael Martinez de Andino, J.D., Secretary-Treasurer  
Sidra Butt, D.D.S.  
Sultan E. Chaudhry, D.D.S.  
Alf Hendricksen, D.D.S.  
Margaret F. Lemaster, R.D.H.  
Emelia H. McLennan, R.D.H.  
Dagoberto Zapatero, D.D.S.
- MEMBERS ABSENT:** William C. Bigelow, D.D.S
- STAFF PRESENT:** Jamie C. Sacksteder, Executive Director  
Donna Lee, Discipline Case Manager  
Sarah Moore, Executive Assistant  
James Jenkins, Deputy Director, Department of Health Professions  
Matthew Novak, Policy and Economic Analyst, Department of Health Professions
- COUNSEL PRESENT:** James E. Rutkowski, Assistant Attorney General
- ESTABLISHMENT OF A QUORUM:** With nine members of the Board present, a quorum was established.  
Ms. Sacksteder read the emergency evacuation procedures.
- PUBLIC COMMENT:** Dr. Bryant explained the parameters for public comment and opened the public comment period. Correspondence received from Association of Dental Support Organizations (ADSO) was distributed to the Board prior to the meeting regarding the 'Dentists and Dental Hygienists Compact'.  
  
Dr. Bryant advised no one registered for public comments prior to the meeting.

**APPROVAL OF MINUTES:** Dr. Bryant asked for a motion to approve the minutes in a block. Mr. Martinez made the motion, it was seconded and passed unanimously.

The June 2, 2023, Special Session – Telephone conference Call Minutes were distributed prior to start of the meeting.

Dr. Bryant asked if there were any edits or corrections to the March 3, 2023, Board Meeting Minutes; the March 8, 2023, Special Session – Telephone Conference Call Minutes; the April 28, 2023, Formal Hearing Minutes; the May 26, 2023, Special Session – Telephone Conference Call Minutes; and the June 2, 2023, Special Session – Telephone Conference Call Minutes. Hearing none, Dr. Hendricksen moved to approve the minutes as presented. The motion was seconded and passed unanimously.

**DHP DIRECTOR'S REPORT**

James Jenkins, Deputy DHP Director, updated the Board regarding the Governor's office's planning stage with all Commonwealth Secretaries for next year. Healthcare will be a significant component with multiple health bills in progress. With a comprehensive analysis of the healthcare workforce, the plan is to provide an improvement of availability of services to patients and resources to health care providers. He also thanked the Board for all their work.

**LIAISON & COMMITTEE REPORTS:**

**HOSA Conference Report** – Ms. Sacksteder reported on this great experience, the good partnership, and the excitement of the future for these students in the healthcare workforce. Dr. Bryant explained that they judged the students from various localities. The next step for the students is a national competition in Dallas, TX, with a chance to win prizes and scholarships.

**VDHA Conference** – Ms. Sacksteder commented that the update regarding Healthcare Workforce of Dental Hygienist at this conference went well.

**CDCA/WREB/CITA Meeting Report** – Ms. Lemaster reported that the committee included four examiners and two staff at Danville Community College. There were collaborations and discussions prior to the exam. Three sets of 7 to 8 students participated. The experience went very smoothly, and she would like to attend again in the future.

**Upcoming ADEX 2023 Meeting Report** – Dr. Bryant remarked that he would represent the Board at the upcoming ADEX meeting on July 21 – 22, 2023, in Aurora, Colorado.

**LEGISLATION, REGULATION, AND GUIDANCE:**

**Status Report on Regulatory Actions Chart** - Mr. Novak reviewed the updated Regulatory Actions chart of the seven ongoing regulatory actions as of May 16, 2023, included in the agenda packet. A synopsis of the progress of the bills was provided.

**BOARD DISCUSSION  
TOPICS:**

**Consideration of Public Comment** – Dr. Bryant advised a discussion of the Public Comment received regarding the ‘Dentist and Dental Hygienist Compact’ received by the Association of Dental Support Organization (ADSO) would follow under the Licensure Compact Discussion.

**2024 Board Calendar** - Ms. Sacksteder presented the proposed 2024 BOD Calendar. Mr. Martinez made a motion to adopt the 2024 Calendar. The motion was seconded and passed unanimously.

**Licensure Compact Discussion** – Ms. Sacksteder reviewed the Department of Defense funded ‘Dentist and Dental Hygienist Compact’ information included in the agenda packet. She referenced the map of the states that already have legislation in place or are pending legislation to be part of the Compact. The Compact becomes effective when seven states have enacted into law the Compact Statute. The Compact has lower license requirements than the current Licensure requirements in Virginia.

Dr. Bryant led a Board discussion of the Compact including the public comment received from ADSO regarding being in favor of the Compact. The Board’s concern is that allowing vastly lower standards to license dentists would put the public at risk and would increase disciplinary cases. The barriers to enacting the Compact in Virginia include requiring a background check. Virginia currently does not require background checks for dentists and dental hygienists. This would be an extreme additional staffing cost to Virginia’s Department of Health Professions. The Compact also does not present clear language about denying licensure. Further, the Compact allows for any clinical assessment, the Board has worked for the last 4 years to show that not all clinical assessments are clinically equivalent, and Virginia currently only accepts the ADEX. There is also an unknown fee for the Board to join the Compact. The biggest concern is allowing dentists who graduate from a non-CODA accredited school to be licensed in Virginia. Virginia currently requires graduation from a CODA accredited school, which is a standard. The Board also expressed concerns about the oversight and control by the Commission of the Compact.

The Board stated that they did not believe that allowing for the Compact would draw more people to work within the state of Virginia. The Board felt in turn it may make more licensees leave the state because of the ease of portability. The Board recognized that the major disparities were in the Southwest region of the state and that having the Compact will not solve this issue. The issue of increasing licensees within the Southwest region of the state is more due economics and the Compact would further negatively impact this issue.

Ms. Sacksteder read a response from the VDA that the VDA has not taken a position on the Compact and has taken no steps to advocate for its adoption in Virginia. The whole purpose of the study is to examine the Compact and currently there is a lack of alignment with Virginia’s requirements for licensure. The VDA looks forward to working closely

with the Board regarding this study.

Ms. Sacksteder stated that she asked for a response and opinion from the VDHA but did not receive one prior to the Board Meeting.

After Board discussion, a poll of the Board was taken and was unanimously not in favor of Virginia joining the Compact due to the current standards written in the presented Compact

**BOARD COUNSEL  
REPORT:**

Mr. Rutkowski updated the Board on one appeal, Dr. Sheta, where DHP prevailed in Circuit Court with no further appeal from the defendant. There are no other pending legal issues at the current date.

**EXECUTIVE DIRECTOR'S  
REPORT:**

**Disciplinary Report** – Ms. Sacksteder reviewed the Disciplinary Report for February 1, 2023, to May 15, 2023.

**Update on HB2251** – Ms. Sacksteder advised a workgroup will take place on July 21, 2023, with representatives from the ADSO, ADA, and VDHA, as well as Dr. Bigelow, Dr. Hendricksen, and Ms. Lemaster to analyze licensure requirements by endorsement for Dentists and Dental Hygienists and provide results to the Board. The Board will report on the outcome of this workgroup in October 2023.

**Update on SB1539** – Ms. Sacksteder advised that the SB1539 Legislation for cosmetic purpose botulinum toxin injections takes effect July 1, 2023. However, dentists are still not allowed to administer botulinum toxin injections cosmetically until the Board promulgates regulations which will be a minimum of 18 months but may be delayed further due to the regulation process. The Board will first establish workgroups consisting of experts in the field of cosmetic injections of botulinum toxin to ensure public safety. The Board will then draft regulations utilizing the expert information. The draft regulations will then be presented to the regulatory committee. The recommendations from the regulatory committee will be presented to the full Board for review. Once the full Board reviews and accepts the regulations the regulations will be proposed for public comment. Ms. Sacksteder stressed that this legislation does not include dermal fillers.

**Update on CE Broker** – Ms. Sacksteder discussed that CE Broker went live on May 19, 2023, with much positive feedback and no negative feedback responses. CE Broker is available for free to licensees and the Board. She also updated the Board on the current CE audit in progress since May 15, 2023, for 1% of dentists and dental hygienists. She reported that the audit is going well.

**Nominating Committee** – Ms. Sacksteder advised the Nominating Committee meeting will take place in August for open executive offices.

**ADJOURNMENT:** With all business concluded, the Board adjourned at 10:19 a.m.

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Nathaniel C. Bryant, D.D.S., President

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Jamie C. Sacksteder, Executive Director

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Date

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Date

**VIRGINIA BOARD OF DENTISTRY  
FORMAL HEARING MINUTES  
June 30, 2023**

**TIME AND PLACE:** The meeting of the Virginia Board of Dentistry was called to order at 9:07 a.m., on June 30, 2023, in Board Room 4 at the Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia, 23233.

**PRESIDING:** Jamiah Dawson, D.D.S., Vice President

**MEMBERS PRESENT:** William C. Bigelow, D.D.S.  
Sidra Butt, D.D.S.  
J. Michael Martinez de Andino, J.D.  
Emelia H. McLennan, R.D.H.

**MEMBERS ABSENT:** Nathaniel C. Bryant, D.D.S., President  
Sultan E. Chaudhry, D.D.S.

**STAFF PRESENT:** Debbie Southall, Discipline Case Specialist  
Sarah Moore, Executive Assistant

**COUNSEL PRESENT:** James Rutkowski, Assistant Attorney General

**OTHERS PRESENT:** Sean Murphy, Assistant Attorney General  
Shevaun Roukous, Adjudication Analyst  
Juan Ortega, Court Reporter  
Rodney S. Dillman, Esquire, Respondent's Council

**ESTABLISHMENT OF A PANEL:** With five Board members present, a panel was established.

**Adam Foleck, D.D.S.  
Case No.: 199509, 202011** Dr. Foleck was present with legal counsel, Rodney S. Dillman, Esquire, in accordance with the Notice of the Board dated November 2, 2022.

Dr. Dawson swore in the witnesses.

Upon request, and with no objections by Mr. Dillman, the witnesses were not sequestered.

Following Ms. Murphy's opening statement, Dr. Dawson admitted into evidence Commonwealth's Exhibits 1 – 6.

Following Mr. Dillman's opening statement, Dr. Dawson admitted into evidence the Respondent's Exhibits A – E.

The following witness testified on behalf of the Commonwealth:

- Ms. Wendy Ashworth, DHP Senior Inspector
- Dr. Francisco Limon, D.D.S.



Dr. Adam Foleck testified on his own behalf.

Mr. Murphy and Mr. Dillman provided closing statements.

**Closed Meeting:**

Mr. Martinez moved that the Board enter into a closed meeting pursuant to §2.1-311(A)(27) and Section 2.2-3712(F) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Adam Foleck, D.D.S. Additionally, he moved that Board staff, Ms. Southall, Ms. Moore and the Board Counsel, James Rutkowski attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded and passed unanimously.

**Reconvene:**

Mr. Martinez moved to certify that the Board heard, discussed, or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and passed unanimously.

The Board reconvened in open session pursuant to §2.2-3712(D) of the code.

**Decision:**

Mr. Rutkowski reported that Dr. Foleck has been issued a reprimand and ordered to pay a monetary penalty of \$5,000.00, seven (7) hours in the continuing education subject of 'Sedation Recordkeeping', seven (7) hours in the continuing education subject of 'Drug Control Management'.

Mr. Martinez moved to accept the Board's decision as read by Mr. Rutkowski. The motion was seconded and passed unanimously.

**ADJOURNMENT:**

The Board adjourned at 11:37 a.m.

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Jamiah Dawson, D.D.S., Vice- President

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Deborah Southall, Discipline Case Specialist

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Date

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Date

**VIRGINIA BOARD OF DENTISTRY  
FORMAL HEARING MINUTES  
July 28, 2023**

**TIME AND PLACE:** The meeting of the Virginia Board of Dentistry was called to order at 9:04 a.m., on July 28, 2023, in Board Room 4 at the Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia, 23233.

**PRESIDING:** Nathaniel C. Bryant, D.D.S., President

**MEMBERS PRESENT:** Jamiah Dawson, D.D.S., Vice-President  
J. Michael Martinez de Andino, J.D., Secretary-Treasurer  
Alf Hendricksen, D.D.S.  
Emelia H. McLennan, R.D.H.  
Dagoberto Zapatero, D.D.S.

**MEMBERS ABSENT:** Sidra Butt, D.D.S.

**STAFF PRESENT:** Jamie C. Sacksteder, Executive Director  
Sarah Moore, Executive Assistant

**COUNSEL PRESENT:** James E. Rutkowski, Assistant Attorney General

**OTHERS PRESENT:** David Robinson, Assistant Attorney General  
Rebecca Smith, Adjudication Specialist  
Ramona Brooks, Court Reporter  
Dirk McClanahan, Esquire, Respondent's Council

**ESTABLISHMENT OF A QUORUM:** With six Board members present, a quorum was established.

**Isabel Kelly, D.D.S.  
Case No.:204364** Dr. Kelly was present with legal counsel, Dirk McClanahan, Esquire, in accordance with the Notice of the Board dated June 12, 2023.

Dr. Bryant swore in the witnesses.

Following Ms. Smith's opening statement, Dr. Bryant admitted into evidence Commonwealth's Exhibits 1-3.

Testifying on behalf of the Commonwealth:

- Ms. Cheryl Strait, DHP Senior Investigator - NOVA
- Ms. Suzanne Cox, Psychiatric Nurse Practitioner, Neuro Psych Wellness Center

Following Mr. McClanahan's opening statement, Dr. Bryant admitted into evidence Respondent's Exhibits A – B.

Testifying on behalf of the Dr. Kelly:

- Ms. Suzanne Cox, Psychiatric Nurse Practitioner, Neuro Psych Wellness Center

Dr. Kelly testified on her own behalf.

During the testimony of Suzanne Cox and Dr. Isabel Kelly, the Board went into a closed meeting to discuss Dr. Kelly's medical and mental health records.

**Closed Meeting:**

Dr. Dawson moved that the Board convene a closed meeting pursuant to §2.1-311(A)(16) of the Code of Virginia for the purpose of consideration and discussion of Dr. Kelly's medical and mental health records that are excluded from the Freedom of Information Act by Virginia Code Section 2.2-3705.5 in the matter of Isabel Kelly, D.D.S. Additionally, he moved that Board staff, Ms. Sacksteder and Ms. Moore, Board Counsel, Mr. Rutkowski, Mr. Robinson, Ms. Smith, Dr. Kelly, Mr. McClanahan, and the court reporter attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its discussions. The motion was seconded and passed.

Dr. Dawson moved to certify that the Board heard, discussed, or considered only matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and passed.

**Reconvene:**

The Board reconvened in open session pursuant to §2.2-3712(D) of the code.

Mr. Robinson and Mr. McClanahan provided closing arguments.

**Closed Meeting:**

Dr. Dawson moved that the Board enter into a closed meeting pursuant to §2.1-311(A)(27) and Section 2.2-3712(F) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Isabel Kelly, D.D.S. Additionally, he moved that Board staff, Ms. Sacksteder, and Ms. Moore and the Board Counsel, Mr. Rutkowski attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded and passed.

Dr. Dawson moved to certify that the Board heard, discussed, or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and passed.

**Reconvene:**

The Board reconvened in open session pursuant to §2.2-3712(D) of the code.

**Decision:**

Mr. Rutkowski read the Board's Decision that Dr. Isabel Kelly's Case #204364 is dismissed. Dr. Dawson moved to accept the Decision as presented by the Commonwealth and read by Mr. Rutkowski. Following a second, the motion passed unanimously.

The Board adjourned at 1:27 p.m.

**ADJURNMENT:**

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Nathaniel C. Bryant, D.D.S., President

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Jamie C. Sacksteder, Executive Director

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Date

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Date

**UNAPPROVED**  
**VIRGINIA BOARD OF DENTISTRY**  
**MINUTES**  
**SPECIAL SESSION**

**CALL TO ORDER:** The Board of Dentistry convened by telephone conference call on September 15, 2023 at 5:15 p.m.

**PRESIDING:** Nathaniel C. Bryant, D.D.S., President

**MEMBERS PRESENT:** William C. Bigelow, D.D.S.  
Jamiah Dawson, D.D.S.  
Alf Hendricksen, D.D.S.  
J. Michael Martinez de Andino  
Emelia H. McLennan, R.D.H.

**MEMBERS ABSENT:** Sidra Butt, D.D.S.  
Sultan E. Chaudhry, D.D.S.  
Margaret F. Lemaster, R.D.H.  
Dagoberto Zapatero, D.D.S.

**QUORUM:** With six members present, a quorum was established.

**STAFF PRESENT:** Jamie C. Sacksteder, Executive Director  
Erin T. Weaver, Deputy Executive Director  
Donna M. Lee, Discipline Case Manager

**OTHERS PRESENT:** James E. Rutkowski, Assistant Attorney General, Board Counsel  
Sean Murphy, Assistant Attorney General  
Scott Pearl, Adjudication Specialist

**Richard Taliaferro, D.D.S.**  
**Case No.: 229427** The Board received information from Mr. Murphy in order to determine if Dr. Taliaferro's mental incompetence constitutes a substantial danger to public health and safety. Mr. Murphy reviewed the case and responded to questions.

**Closed Meeting:** Dr. Dawson moved that the Board convene a closed meeting pursuant to § 2.2-3711(A)(27) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Richard Taliaferro. Additionally, Dr. Dawson moved that Ms. Sacksteder, Ms. Weaver, Ms. Lee, and Mr. Rutkowski attend the closed meeting because their presence in the closed meeting was deemed necessary and their presence would aid the Board in its deliberations. The motion was seconded and passed.

**Reconvene:** Dr. Dawson moved that the Board certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and passed.

**DECISION:**

Dr. Dawson moved that the Board summarily suspend Dr. Taliaferro's license to practice dentistry in the Commonwealth of Virginia in that he is unable to practice dentistry safely due to mental incompetence, and to schedule the matter for a formal hearing; offer Dr. Taliaferro a consent order for the permanent voluntary surrender of his right to renew his license to practice dentistry in the Commonwealth of Virginia in lieu of proceeding with a formal hearing. The motion was seconded and passed unanimously.

**ADJOURNMENT:**

With all business concluded, the Board adjourned at 5:34 p.m

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Nathaniel C. Bryant, D.D.S., Chair

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Jamie C. Sacksteder, Executive Director

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Date

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Date

**VIRGINIA BOARD OF DENTISTRY  
FORMAL HEARING MINUTES  
September 28, 2023**

**TIME AND PLACE:** The meeting of the Virginia Board of Dentistry was called to order at 9:02 a.m., on September 28, 2023, in Board Room 4 at the Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia, 23233.

**PRESIDING:** Nathaniel C. Bryant, D.D.S., President

**MEMBERS PRESENT:** William C. Bigelow, D.D.S.  
Sidra Butt, D. D.S.  
Sultan Chaudhry, D.D.S.  
Emelia H. McLennan, R.D.H.

**STAFF PRESENT:** Tonya Parris-Wilkins, D.D.S.  
Sarah Moore, Executive Assistant

**COUNSEL PRESENT:** James E. Rutkowski, Senior Assistant Attorney General

**OTHERS PRESENT:** Anne Joseph, Adjudication Consultant  
Michael Goodman, Esquire, Respondent's Council  
Nora T. Ciancio, Esquire, Respondent's Council

**ESTABLISHMENT OF A QUORUM:** With five Board members present, a panel was established.

**Carlos Privette  
Case No.:221532** Mr. Privette was present with legal counsel, Michael Goodman, Esquire, and Nora T. Ciancio, Esquire, in accordance with the Notice of the Board dated August 2, 2023.

Dr. Bryant swore in the witnesses.

Following Ms. Joseph's opening statement, Dr. Bryant admitted into evidence Commonwealth's Exhibits 1-3.

Testifying on behalf of the Commonwealth:

- Kimberly Hyler, DHP Senior Investigator

Following Mr. Goodman's opening statement, Dr. Bryant admitted into evidence Respondent's Exhibits A – I.

Testifying on behalf of the Mr. Privette:

- Dr. Tonya Ashe, D.D.S.

Dr. Privette testified on his own behalf.

Dr. Ashe testified via phone conference. Dr. Bryant swore in the witness.

Ms. Joseph and Mr. Goodman provided closing arguments.

**Closed Meeting:**

Dr. Chaudhry moved that the Board enter into a closed meeting pursuant to §2.1-311(A)(27) and Section 2.2-3712(F) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Carlos Privette. Additionally, he moved that Board staff, Dr. Parris-Wilkins, and Ms. Moore and the Board Counsel, Mr. Rutkowski attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded and passed.

**Reconvene:**

Dr. Chaudhry moved to certify that the Board heard, discussed, or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and passed.

The Board reconvened in open session pursuant to §2.2-3712(D) of the code.

**Decision:**

Mr. Rutkowski read the Board's Decision that Mr. Carlos Privette's Case #221532 request for reinstatement of his dental license is denied. Dr. Dawson moved to accept the decision as presented by the Commonwealth and read by Mr. Rutkowski. Following a second, the motion passed unanimously.

**ADJURNMENT:**

The Board adjourned at 11:08 p.m.

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Nathaniel C. Bryant, D.D.S., President

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Tonya Parris-Wilkins, D.D.S.

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Date

\_\_\_\_\_  
Date



**Board of Dentistry**  
**Current Regulatory Actions**  
**As of November 9, 2023**

**In the Governor's Office**

VAC	Stage	Subject Matter	Date submitted	Office; time in office	Notes
18VAC60-21	Proposed	Elimination of restriction on advertising dental specialties	9/15/2019	Governor 1516 days (4.2 years)	Adopted on advice of Board counsel

**In the Secretary's Office**

VAC	Stage	Subject Matter	Date submitted	Office; time in office	Notes
18VAC60-21 18VAC60-25	NOIRA	Expansion and clarification of refresher courses required for reinstatement	6/24/2022	Secretary 503 days	In response to a petition for rulemaking, the Board will consider amendments to expand the types of refresher courses reinstatement applicants may take and clarify the number of course hours and type of training required for courses.
18VAC60-21 18VAC60-30	Final	Training in infection control	7/5/2022	Secretary 492 days	Amendments require specific training in infection control for dental assistants. Promulgated in response to a petition for rulemaking.
18VAC60-21 18VAC60-25	NOIRA	Continuing education requirements for jurisprudence	7/12/2022	Secretary 485 days	Board is considering amendments to Chapters 21 and 25 to require jurisprudence continuing education for dentists and dental hygienists.

18VAC60-21	Proposed	Digital Scan Technicians	Withdrawn: 5/19/2022 Re-Proposed: 8/18/2022	Secretary 448 days	Regulations for the training of digital scan technicians to practice under a licensed dentist
18VAC60-30	Proposed	Elimination of direct pulp-capping as a delegable task	7/22/2022	Secretary 441 days	Eliminates direct pulp-capping as a delegable task for a DAII.

**At DPB/OAG**

VAC	Stage	Subject Matter	Date submitted	Office; time in office	Notes
18VAC60-21; 18VAC60-25; 18VAC60-30	Fast-Track	Implementation of amendments identified during 2022 periodic review of Chapters 21, 25, and 30	12/19/2023	OAG 325 days	The Board adopted amendments to delete outdated, redundant, or duplicative provisions and clarify others consistent with current practice.

**Agenda Item: Adoption of emergency regulations for dentists to provide cosmetic botox**

**Included in your agenda packet:**

- Chapter 413 of the 2023 Acts of Assembly
- Budget amendment
- Minutes of the October 27, 2023 Regulatory Committee
- Draft emergency regulations as required by Ch. 413 and the budget amendment, and as approved by the Committee

**Action Needed:**

- Motion to adopt emergency regulations and NOIRA as presented or amended.

# VIRGINIA ACTS OF ASSEMBLY -- 2023 SESSION

## CHAPTER 413

*An Act to amend the Code of Virginia by adding a section numbered 54.1-2711.2, relating to practice of dentistry; botulinum toxin injections.*

[S 1539]

Approved March 23, 2023

**Be it enacted by the General Assembly of Virginia:**

**1. That the Code of Virginia is amended by adding a section numbered 54.1-2711.2 as follows:**

***§ 54.1-2711.2. Botulinum toxin injections.***

*In addition to the possession and administration of botulinum toxin injections for dental purposes, a dentist may possess and administer botulinum toxin injections for cosmetic purposes, provided that the dentist has completed training and continuing education in the administration of botulinum toxin injections for cosmetic purposes, as deemed appropriate by the Board.*

**2. That the Board of Dentistry, in consultation with the Board of Medicine, shall amend its regulations to establish training and continuing education requirements for dentists related to the administration of botulinum toxin injections for cosmetic purposes. The Board of Dentistry shall amend its regulations related to cosmetic certifications for oral and maxillofacial surgeons to remove from such regulations subdivision B 9 of 18VAC60-21-350.**

# VIRGINIA STATE BUDGET

2023 Special Session I

## Budget Bill - HB6001 (Chapter 1)

Bill Order » Office of Health and Human Resources » Item 301

Department of Health Professions

Item 301	First Year - FY2023	Second Year - FY2024
<b>Regulation of Professions and Occupations (56000)</b>	<b>\$37,784,871</b>	<b>\$38,153,945</b>
Technical Assistance to Regulatory Boards (56044)	\$37,784,871	\$38,153,945
<b>Fund Sources:</b>		
Trust and Agency	\$1,450,565	\$1,450,565
Dedicated Special Revenue	\$36,334,306	\$36,703,380

Authority: Title 54.1, Chapter 25, Code of Virginia.

A. Nurse practitioners licensed in the Commonwealth of Virginia, except those licensed in the category of Certified Registered Nurse Anesthetists, with two or more years of clinical experience may continue to practice in the practice category in which they are certified and licensed and prescribe without a written or electronic practice agreement until the termination of a declared state of emergency due to the COVID-19 pandemic.

B. Notwithstanding any other provision of this Act or any other provision of law, a pharmaceutical processor license shall permit such licensee to cultivate and manufacture out of a single establishment location, except that a cannabis establishment changing its cultivation and manufacturing location may operate at both the former and new location during the site transition process which shall last no more than the life of this Act. Prior to operating an additional cultivation and manufacturing establishment at a different location, a licensee shall be inspected by the Board of Pharmacy in accordance with this Act.

C. That the regulations the Board of Dentistry is required to promulgate pursuant to Chapter 413, 2023 Acts of Assembly, shall be promulgated to be effective within 280 days of its enactment.



**VIRGINIA BOARD OF DENTISTRY  
REGULATORY MEETING MINUTES  
October 27, 2023**

- TIME AND PLACE:** The meeting of the Virginia Board of Dentistry was called to order at 10:01 a.m., on October 27, 2023, at the Perimeter Center, 9960 Mayland Drive, in Board Room 4, Henrico, Virginia 23233.
- PRESIDING:** Jamiah Dawson, D.D.S.
- MEMBERS PRESENT:** William C. Bigelow, D.D.S.  
Alf Hendricksen, D.D.S.
- STAFF PRESENT:** Jamie C. Sacksteder, Executive Director  
Erin Weaver, Deputy Executive Director  
Sarah Moore, Executive Assistant  
Erin Barrett, Director of Legislative and Regulatory Affairs
- OTHERS PRESENT:** Dr. William Harp, Executive Director, Board of Medicine  
Dr. Cindy Southern, Virginia Dental Association (VDA)  
Dr. Robert A. Straus, VCU Medical Center  
Dr. Reza Mirali, Plastic Surgery and Dermatology Associates  
Kelsey Wilkinson, Medical Society of Virginia
- QUORUM:** With three members of the Board present, a quorum was established.
- Ms. Sacksteder read the emergency evacuation procedures.
- PUBLIC COMMENT:** Dr. Dawson explained the parameters for public comment and opened the public comment period.
- Scott Frey, D.D.S., from Hampton Roads area signed up for Public Comment and spoke regarding the need for dentists' approval for use of Botulinum toxin injections.
- Dr. Dawson closed the Public Comment Period.
- APPROVAL OF MINUTES:** Dr. Dawson asked for a motion to approve the October 14, 2022, Regulatory Meeting Minutes. Dr. Bigelow made the motion, it was seconded and passed unanimously.
- LEGISLATION, REGULATION AND GUIDANCE:** **Senate Bill 1539** - Ms. Barrett discussed the passing of SB1539 during the 2023 Commonwealth of Virginia General Assembly, and the subsequent passed budget bill amendment which calls for emergency regulations to be established by the Board for the use of Botulinum toxin injections by dentists for cosmetic purposes. The Board is to establish specific recommendations for training and education requirements to be approved during the December 2023, Board Meeting. These requirements will be used to establish permanent regulations to be included in the Regulations Governing the Practice of Dentistry.

**COMMITTEE DISCUSSION  
TOPICS:**

**Consideration of Public Comments** – Dr. Dawson asked for any Board Member’s wanting to discuss the Public Comments and none were requested.  
**Review of educational requirements of a Dentist vs. and OMS – Dr. Strauss**

Dr. Strauss advised on educational requirements of Dentists and Oral and maxillofacial surgeons (OMS).

**Review of different states training requirements for botulinum toxin injections – Ms. Sacksteder**

Ms. Sacksteder presented a chart of different states requirements for the administration of cosmetic botulinum toxin for the Board’s reference during discussion.

**Discussion of recommended requirements for regulation and training – Ms. Sacksteder**

Ms. Sacksteder led the Board in discussion of 16 topic points for consensus of recommendation for the regulations and training of Dentists prior to their certification to provide botulinum toxin injections for cosmetic purposes. She stressed that these regulations are for cosmetic purposes only and not for therapeutic purposes. The Board discussed and confirmed training requirements, recommended hours of training, continuing education requirements and universal precautions to be upheld for the purpose of public safety. The draft regulatory language will be presented at the December Board Meeting.

**ACTION:**

Ms. Sacksteder and Ms. Barrett will use the topic points approved by the regulatory committee to create the emergency regulations to be approved during the December 2023, Board Meeting. Erin Barrett, Director of Legislative and Regulatory Affairs, will then submit the Notice of Intended Regulatory Action (NOIRA), along with the description of the changes being considered, to be published. The Board will subsequently receive comments from the public. If comments are received, this can be used to amend the proposed regulations, if needed, prior to the proposed and final regulations being completed.

**ADJOURNMENT:**

With all business concluded, the panel adjourned at 12:11 p.m.

\_\_\_\_\_  
Jamiah Dawson, D.D.S., Vice-President

\_\_\_\_\_  
Jamie C. Sacksteder, Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Project 7739 - Emergency/NOIRA**

**Board of Dentistry**

**Training requirements for botulinum toxin injections for cosmetic purposes**

**18VAC60-21-55. Training requirements for administration of botulinum toxin injections for cosmetic purposes.**

A. A dentist may possess and administer botulinum toxin injections for cosmetic purposes provided that the dentist has completed 12 hours of training in the subjects listed in subsection C. Training must include a minimum of four hours of clinical, in-person training on at least two live patients, which shall include patient follow-up post-procedure. Eight of the 12 hours of training may be didactic and may be obtained online or in-person.

B. To satisfy the requirements of this section, training must be provided by a dental program or advanced dental education program accredited by CODA, the ADA or its constituent or branch associations, or the Academy of General Dentistry.

C. Training to possess and administer botulinum toxin injections for cosmetic purposes shall include the following subjects:

1. Assessing patients for use of botulinum toxin injections:
2. Screening of patient expectations and psychological motivations:
3. Diagnosis, planning, and treatment:
4. Informed consent, including off-label use of botulinum toxins:
5. Anatomy and neurophysiology of the head and neck:
6. Indications and contraindications for the use of botulinum toxin injections, including off-label and approved product uses:



7. Pharmacology of neurotoxins and botulinum toxins;

8. Safety and risks associated with use of botulinum toxins, including the recognition and management of adverse reactions and complications;

9. Preparation and administration of botulinum toxins; and

10. Evaluation of patient outcomes.

**18VAC60-21-350. Certification to perform cosmetic procedures; applicability.**

A. In order for an oral and maxillofacial surgeon to perform aesthetic or cosmetic procedures, he shall be certified by the board pursuant to § 54.1-2709.1 of the Code. Such certification shall only entitle the licensee to perform procedures above the clavicle or within the head and neck region of the body.

B. Based on the applicant's education, training, and experience, certification may be granted to perform the following procedures for cosmetic treatment:

1. Rhinoplasty and other treatment of the nose;
2. Blepharoplasty and other treatment of the eyelid;
3. Rhytidectomy and other treatment of facial skin wrinkles and sagging;
4. Submental liposuction and other procedures to remove fat;
5. Laser resurfacing or dermabrasion and other procedures to remove facial skin irregularities;
6. Browlift (either open or endoscopic technique) and other procedures to remove furrows and sagging skin on the upper eyelid or forehead;
7. Platysmal muscle plication and other procedures to correct the angle between the chin and neck;

8. Otoplasty and other procedures to change the appearance of the ear; and
9. ~~Application of injectable medication or material for the purpose of treating extra-oral cosmetic conditions.~~ Administration of dermal filler.

**Agenda Item: Initiation of periodic review of public participation guidelines contained in 18VAC60-11**

**Included in your agenda packet:**

- 18VAC60-11

**Staff Note:** Agencies are required to conduct periodic reviews of regulatory chapters every 4 years. Although this particular chapter is only changed when the Department of Planning and Budget provides new model language, the Board is still required to conduct a periodic review.

**Action Needed:**

- Motion to initiate periodic review of 18VAC60-11.

*Commonwealth of Virginia*



# **PUBLIC PARTICIPATION GUIDELINES**

## **VIRGINIA BOARD OF DENTISTRY**

**Title of Regulations: 18 VAC 60-11-10 et seq.**

**Statutory Authority: §§ 54.1-2400 and 2.2-4007  
of the *Code of Virginia***

**Revised Date: December 15, 2016**

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## **Part I**

### **Purpose and Definitions**

#### **18VAC60-11-10. Purpose.**

The purpose of this chapter is to promote public involvement in the development, amendment or repeal of the regulations of the Board of Dentistry. This chapter does not apply to regulations, guidelines, or other documents exempted or excluded from the provisions of the Administrative Process Act (§2.2-4000 et seq. of the Code of Virginia).

#### **18VAC60-11-20. Definitions.**

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Administrative Process Act" means Chapter 40 (§2.2-4000 et seq.) of Title 2.2 of the Code of Virginia.

"Agency" means the Board of Dentistry, which is the unit of state government empowered by the agency's basic law to make regulations or decide cases. Actions specified in this chapter may be fulfilled by state employees as delegated by the agency.

"Basic law" means provisions in the Code of Virginia that delineate the basic authority and responsibilities of an agency.

"Commonwealth Calendar" means the electronic calendar for official government meetings open to the public as required by §2.2-3707 C of the Freedom of Information Act.

"Negotiated rulemaking panel" or "NRP" means an ad hoc advisory panel of interested parties established by an agency to consider issues that are controversial with the assistance of a facilitator or mediator, for the purpose of reaching a consensus in the development of a proposed regulatory action.

"Notification list" means a list used to notify persons pursuant to this chapter. Such a list may include an electronic list maintained through the Virginia Regulatory Town Hall or other list maintained by the agency.

"Open meeting" means any scheduled gathering of a unit of state government empowered by an agency's basic law to make regulations or decide cases, which is related to promulgating, amending or repealing a regulation.

"Person" means any individual, corporation, partnership, association, cooperative, limited liability company, trust, joint venture, government, political subdivision, or any other legal or commercial entity and any successor, representative, agent, agency, or instrumentality thereof.

"Public hearing" means a scheduled time at which members or staff of the agency will meet for the purpose of receiving public comment on a regulatory action.

"Regulation" means any statement of general application having the force of law, affecting the rights or conduct of any person, adopted by the agency in accordance with the authority conferred on it by applicable laws.

"Regulatory action" means the promulgation, amendment, or repeal of a regulation by the agency.

"Regulatory advisory panel" or "RAP" means a standing or ad hoc advisory panel of interested parties established by the agency for the purpose of assisting in regulatory actions.

"Town Hall" means the Virginia Regulatory Town Hall, the website operated by the Virginia Board of Planning and Budget at [www.townhall.virginia.gov](http://www.townhall.virginia.gov), which has online public comment forums and displays information about regulatory meetings and regulatory actions under consideration in Virginia and sends this information to registered public users.

"Virginia Register" means the Virginia Register of Regulations, the publication that provides official legal notice of new, amended and repealed regulations of state agencies, which is published under the provisions of Article 6 (§2.2-4031 et seq.) of the Administrative Process Act.

## **Part II**

### **Notification of Interested Persons**

#### **18VAC60-11-30. Notification list.**

A. The agency shall maintain a list of persons who have requested to be notified of regulatory actions being pursued by the agency.

B. Any person may request to be placed on a notification list by registering as a public user on the Town Hall or by making a request to the agency. Any person who requests to be placed on a notification list shall elect to be notified either by electronic means or through a postal carrier.

C. The agency may maintain additional lists for persons who have requested to be informed of specific regulatory issues, proposals, or actions.

D. When electronic mail is returned as undeliverable on multiple occasions at least 24 hours apart, that person may be deleted from the list. A single undeliverable message is insufficient cause to delete the person from the list.

E. When mail delivered by a postal carrier is returned as undeliverable on multiple occasions, that person may be deleted from the list.

F. The agency may periodically request those persons on the notification list to indicate their desire to either continue to be notified electronically, receive documents through a postal carrier, or be deleted from the list.

**18VAC60-11-40. Information to be sent to persons on the notification list.**

A. To persons electing to receive electronic notification or notification through a postal carrier as described in 18VAC60-11-30, the agency shall send the following information:

1. A notice of intended regulatory action (NOIRA).
2. A notice of the comment period on a proposed, a repropoed, or a fast-track regulation and hyperlinks to, or instructions on how to obtain, a copy of the regulation and any supporting documents.
3. A notice soliciting comment on a final regulation when the regulatory process has been extended pursuant to §2.2-4007.06 or 2.2-4013 C of the Code of Virginia.

B. The failure of any person to receive any notice or copies of any documents shall not affect the validity of any regulation or regulatory action.

### **Part III Public Participation Procedures**

**18VAC60-11-50. Public comment.**

A. In considering any nonemergency, nonexempt regulatory action, the agency shall afford interested persons an opportunity to (i) submit data, views, and arguments, either orally or in writing, to the agency; and (ii) be accompanied by and represented by counsel or other representative. Such opportunity to comment shall include an online public comment forum on the Town Hall.

1. To any requesting person, the agency shall provide copies of the statement of basis, purpose, substance, and issues; the economic impact analysis of the proposed or fast-track regulatory action; and the agency's response to public comments received.
2. The agency may begin crafting a regulatory action prior to or during any opportunities it provides to the public to submit comments.

B. The agency shall accept public comments in writing after the publication of a regulatory action in the Virginia Register as follows:

1. For a minimum of 30 calendar days following the publication of the notice of intended regulatory action (NOIRA).



2. For a minimum of 60 calendar days following the publication of a proposed regulation.
3. For a minimum of 30 calendar days following the publication of a repropoed regulation.
4. For a minimum of 30 calendar days following the publication of a final adopted regulation.
5. For a minimum of 30 calendar days following the publication of a fast-track regulation.
6. For a minimum of 21 calendar days following the publication of a notice of periodic review.
7. Not later than 21 calendar days following the publication of a petition for rulemaking.

C. The agency may determine if any of the comment periods listed in subsection B of this section shall be extended.

D. If the Governor finds that one or more changes with substantial impact have been made to a proposed regulation, he may require the agency to provide an additional 30 calendar days to solicit additional public comment on the changes in accordance with § 2.2-4013 C of the Code of Virginia.

E. The agency shall send a draft of the agency's summary description of public comment to all public commenters on the proposed regulation at least five days before final adoption of the regulation pursuant to § 2.2-4012 E of the Code of Virginia.

**18VAC60-11-60. Petition for rulemaking.**

A. As provided in §2.2-4007 of the Code of Virginia, any person may petition the agency to consider a regulatory action.

B. A petition shall include but is not limited to the following information:

1. The petitioner's name and contact information;
2. The substance and purpose of the rulemaking that is requested, including reference to any applicable Virginia Administrative Code sections; and
3. Reference to the legal authority of the agency to take the action requested.

C. The agency shall receive, consider and respond to a petition pursuant to §2.2-4007 and shall have the sole authority to dispose of the petition.

D. The petition shall be posted on the Town Hall and published in the Virginia Register.

E. Nothing in this chapter shall prohibit the agency from receiving information or from proceeding on its own motion for rulemaking.

**18VAC60-11-70. Appointment of regulatory advisory panel.**

A. The agency may appoint a regulatory advisory panel (RAP) to provide professional specialization or technical assistance when the agency determines that such expertise is necessary to address a specific regulatory issue or action or when individuals indicate an interest in working with the agency on a specific regulatory issue or action.

B. Any person may request the appointment of a RAP and request to participate in its activities. The agency shall determine when a RAP shall be appointed and the composition of the RAP.

C. A RAP may be dissolved by the agency if:

1. The proposed text of the regulation is posted on the Town Hall, published in the Virginia Register, or such other time as the agency determines is appropriate; or
2. The agency determines that the regulatory action is either exempt or excluded from the requirements of the Administrative Process Act.

**18VAC60-11-80. Appointment of negotiated rulemaking panel.**

A. The agency may appoint a negotiated rulemaking panel (NRP) if a regulatory action is expected to be controversial.

B. A NRP that has been appointed by the agency may be dissolved by the agency when:

1. There is no longer controversy associated with the development of the regulation;
2. The agency determines that the regulatory action is either exempt or excluded from the requirements of the Administrative Process Act; or
3. The agency determines that resolution of a controversy is unlikely.

**18VAC60-11-90. Meetings.**

Notice of any open meeting, including meetings of a RAP or NRP, shall be posted on the Virginia Regulatory Town Hall and Commonwealth Calendar at least seven working days prior to the date of the meeting. The exception to this requirement is any meeting held in accordance with §2.2-3707 D of the Code of Virginia allowing for contemporaneous notice to be provided to participants and the public.

**18VAC60-11-100. Public hearings on regulations.**

A. The agency shall indicate in its notice of intended regulatory action whether it plans to hold a public hearing following the publication of the proposed stage of the regulatory action.

B. The agency may conduct one or more public hearings during the comment period following the publication of a proposed regulatory action.

C. An agency is required to hold a public hearing following the publication of the proposed regulatory action when:

1. The agency's basic law requires the agency to hold a public hearing;
2. The Governor directs the agency to hold a public hearing; or
3. The agency receives requests for a public hearing from at least 25 persons during the public comment period following the publication of the notice of intended regulatory action.

D. Notice of any public hearing shall be posted on the Town Hall and Commonwealth Calendar at least seven working days prior to the date of the hearing. The agency shall also notify those persons who requested a hearing under subdivision C 3 of this section.

**18VAC60-11-110. Periodic review of regulations.**

A. The agency shall conduct a periodic review of its regulations consistent with:

1. An executive order issued by the Governor pursuant to §2.2-4017 of the Administrative Process Act to receive comment on all existing regulations as to their effectiveness, efficiency, necessity, clarity, and cost of compliance; and
2. The requirements in §2.2-4007.1 of the Administrative Process Act regarding regulatory flexibility for small businesses.

B. A periodic review may be conducted separately or in conjunction with other regulatory actions.

C. Notice of a periodic review shall be posted on the Town Hall and published in the Virginia Register.

**Agenda Item: Adoption of revised policy on meetings held with electronic participation pursuant to statutory changes**

**Included in your agenda package:**

- Proposed revised electronic participation policy;
- Virginia Code § 2.2-3708.3

**Action needed:**

- Motion to revise policy on meetings held with electronic participation as presented.

## **Virginia Department of Health Professions Meetings Held with Electronic Participation**

### **Purpose:**

To establish a written policy for allowing electronic participation of board or committee members for meetings of the health regulatory boards of the Department of Health Professions or their committees.

### **Policy:**

Electronic participation by members of the health regulatory boards of the Department of Health Professions or their committees shall be in accordance with the procedures outlined in this policy.

### **Authority:**

This policy for conducting a meeting with electronic participation shall be in accordance with [Virginia Code § 2.2-3708.3](#).

### **Procedures:**

1. One or more members of the Board or a committee may participate electronically if, on or before the day of a meeting, the member notifies the chair and the executive director that he/she is unable to attend the meeting due to:
  - a. a temporary or permanent disability or other medical condition that prevents the member's physical attendance;
  - b. a medical condition of a member of the member's family requires the member to provide care that prevents the member's physical attendance;
  - c. the member's principal residence is more than 60 miles from the meeting location identified in the required notice for such meeting; or
  - d. the member is unable to attend the meeting due to a personal matter and identifies with specificity the nature of the personal matter.

No member, however, may use remote participation due to personal matters more than two meetings per calendar year or 25% of the meetings held per calendar year rounded up to the next whole number, whichever is greater.

2. Participation by a member through electronic communication means must be approved by the board chair or president. The reason for the member's electronic participation shall

be stated in the minutes in accordance with Virginia Code § 2.2-3708.3(A)(4). If a member's participation from a remote location is disapproved because it would violate this policy, it must be recorded in the minutes with specificity.

3. The board or committee holding the meeting shall record in its minutes the remote location from which the member participated; the remote location, however, does not need to be open to the public and may be identified by a general description.

## § 2.2-3708.3. (Effective September 1, 2022) Meetings held through electronic communication means; situations other than declared states of emergency

A. Public bodies are encouraged to (i) provide public access, both in person and through electronic communication means, to public meetings and (ii) provide avenues for public comment at public meetings when public comment is customarily received, which may include public comments made in person or by electronic communication means or other methods.

B. Individual members of a public body may use remote participation instead of attending a public meeting in person if, in advance of the public meeting, the public body has adopted a policy as described in subsection D and the member notifies the public body chair that:

1. The member has a temporary or permanent disability or other medical condition that prevents the member's physical attendance;
2. A medical condition of a member of the member's family requires the member to provide care that prevents the member's physical attendance;
3. The member's principal residence is more than 60 miles from the meeting location identified in the required notice for such meeting; or
4. The member is unable to attend the meeting due to a personal matter and identifies with specificity the nature of the personal matter. However, the member may not use remote participation due to personal matters more than two meetings per calendar year or 25 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater.

If participation by a member through electronic communication means is approved pursuant to this subsection, the public body holding the meeting shall record in its minutes the remote location from which the member participated; however, the remote location need not be open to the public and may be identified in the minutes by a general description. If participation is approved pursuant to subdivision 1 or 2, the public body shall also include in its minutes the fact that the member participated through electronic communication means due to a (i) temporary or permanent disability or other medical condition that prevented the member's physical attendance or (ii) family member's medical condition that required the member to provide care for such family member, thereby preventing the member's physical attendance. If participation is approved pursuant to subdivision 3, the public body shall also include in its minutes the fact that the member participated through electronic communication means due to the distance between the member's principal residence and the meeting location. If participation is approved pursuant to subdivision 4, the public body shall also include in its minutes the specific nature of the personal matter cited by the member.

If a member's participation from a remote location pursuant to this subsection is disapproved because such participation would violate the policy adopted pursuant to subsection D, such

disapproval shall be recorded in the minutes with specificity.

C. With the exception of local governing bodies, local school boards, planning commissions, architectural review boards, zoning appeals boards, and boards with the authority to deny, revoke, or suspend a professional or occupational license, any public body may hold all-virtual public meetings, provided that the public body follows the other requirements in this chapter for meetings, the public body has adopted a policy as described in subsection D, and:

1. An indication of whether the meeting will be an in-person or all-virtual public meeting is included in the required meeting notice along with a statement notifying the public that the method by which a public body chooses to meet shall not be changed unless the public body provides a new meeting notice in accordance with the provisions of § 2.2-3707;
2. Public access to the all-virtual public meeting is provided via electronic communication means;
3. The electronic communication means used allows the public to hear all members of the public body participating in the all-virtual public meeting and, when audio-visual technology is available, to see the members of the public body as well;
4. A phone number or other live contact information is provided to alert the public body if the audio or video transmission of the meeting provided by the public body fails, the public body monitors such designated means of communication during the meeting, and the public body takes a recess until public access is restored if the transmission fails for the public;
5. A copy of the proposed agenda and all agenda packets and, unless exempt, all materials furnished to members of a public body for a meeting is made available to the public in electronic format at the same time that such materials are provided to members of the public body;
6. The public is afforded the opportunity to comment through electronic means, including by way of written comments, at those public meetings when public comment is customarily received;
7. No more than two members of the public body are together in any one remote location unless that remote location is open to the public to physically access it;
8. If a closed session is held during an all-virtual public meeting, transmission of the meeting to the public resumes before the public body votes to certify the closed meeting as required by subsection D of § 2.2-3712;
9. The public body does not convene an all-virtual public meeting (i) more than two times per calendar year or 25 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater, or (ii) consecutively with another all-virtual public meeting; and
10. Minutes of all-virtual public meetings held by electronic communication means are taken as required by § 2.2-3707 and include the fact that the meeting was held by electronic communication means and the type of electronic communication means by which the meeting was held. If a member's participation from a remote location pursuant to this subsection is disapproved because such participation would violate the policy adopted pursuant to subsection D, such disapproval shall be recorded in the minutes with specificity.

D. Before a public body uses all-virtual public meetings as described in subsection C or allows members to use remote participation as described in subsection B, the public body shall first



adopt a policy, by recorded vote at a public meeting, that shall be applied strictly and uniformly, without exception, to the entire membership and without regard to the identity of the member requesting remote participation or the matters that will be considered or voted on at the meeting. The policy shall:

1. Describe the circumstances under which an all-virtual public meeting and remote participation will be allowed and the process the public body will use for making requests to use remote participation, approving or denying such requests, and creating a record of such requests; and
2. Fix the number of times remote participation for personal matters or all-virtual public meetings can be used per calendar year, not to exceed the limitations set forth in subdivisions B 4 and C 9.

Any public body that creates a committee, subcommittee, or other entity however designated of the public body to perform delegated functions of the public body or to advise the public body may also adopt a policy on behalf of its committee, subcommittee, or other entity that shall apply to the committee, subcommittee, or other entity's use of individual remote participation and all-virtual public meetings.

2022, c. [597](#).

The chapters of the acts of assembly referenced in the historical citation at the end of this section(s) may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.

**Agenda Item: Revision of Guidance Document 60-17**

**Included in your agenda packet:**

- Proposed changes to Guidance Document 60-17 in redline
- Proposed amended Guidance Document 60-17
- Virginia Code § 54.1-2708.2

**Staff Note:** The Board may want to consider repealing this guidance document. The Board is not required to issue a breakdown of disciplinary costs that may be imposed, and there is no such breakdown in the statute allowing recovery of costs.

**Action Needed:**

- Motion to amend or repeal Guidance Document 60-17.

## Virginia Board of Dentistry

### Policy on Recovery of Disciplinary Costs

~~On December 10, 2021, the Board voted to not assess administrative costs for the calendar years 2022 and 2023.~~

#### Applicable Law and Regulations

##### Under Virginia Code

~~§ 54.1-2708.2, the of the Code of Virginia.~~

~~The Board of Dentistry (the Board) may recover reasonable administrative costs from any licensee against whom disciplinary action has been imposed. The Board will recover such costs in accordance with this guidance document. reasonable administrative costs associated with investigating and monitoring such licensee and confirming compliance with any terms and conditions imposed upon the licensee as set forth in the order imposing disciplinary action. Such recovery shall not exceed a total of \$5,000. All administrative costs recovered pursuant to this section shall be paid by the licensee to the Board.~~

~~Such administrative costs shall be deposited into the account of the Board and shall not constitute a fine or penalty.~~

- ~~• 18VAC60-15-10 of the Regulations Governing the Disciplinary Process. The Board may assess:
  - ~~○ the hourly costs to investigate the case,~~
  - ~~○ the costs for hiring an expert witness, and~~
  - ~~○ the costs of monitoring a licensee's compliance with the specific terms and conditions imposed up to \$5,000, consistent with the Board's published guidance document on costs. The costs being imposed on a licensee shall be included in the order agreed to by the parties or issued by the Board.~~~~

#### Policy

1. Disciplinary costs will not be assessed for licensees receiving their first Board Order in which violations were found and sanctions were imposed.
2. The maximum cost assessment for a dentist is \$5,000.
3. The maximum cost assessment for a dental hygienist is \$1,250.
4. ~~In a second and any subsequent Order against a licensee, the Board will specify the administrative costs to be recovered from a licensee in each pre-hearing consent order offered and in each order and, in each order, entered following an administrative proceeding. These administrative costs are in addition to the sanctions imposed which might include a monetary penalty.~~

#### 5.4.

6. ~~The amount of administrative costs to be recovered will be calculated using the assessment of costs specified below and will be recorded on a Disciplinary Cost Recovery Worksheet (the worksheet). All applicable costs will be assessed as set forth in this guidance document. Board~~

~~7.5~~ staff shall complete the worksheet and assure that the cost to be assessed is included in Board orders. The completed worksheets shall be maintained in the case file. Assessed costs shall be paid within 45 days of the effective date of the ~~Order,~~ ~~unless~~ ~~Order unless~~ a payment plan has been requested and approved.

### Assessment of Costs

Based on the expenditures incurred in ~~the state's a state~~ fiscal year ~~which ended on June 30, 2018,~~ the following costs will be used to calculate the amount of funds to be specified in a ~~b~~Board ~~O~~order for recovery from a licensee ~~being~~ disciplined by the Board:

- \$103 per hour for an investigation multiplied by the number of hours the DHP Enforcement Division reports having expended to investigate and report case findings to the Board.
- \$182 per hour for an inspection conducted during ~~the course of~~ an investigation, multiplied by the number of hours the DHP Enforcement Division reports having expended to inspect the dental practice and report case findings to the Board.
- If applicable, the amount billed by an expert upon acceptance by the Board of his expert report.
- The applicable administrative costs for monitoring compliance with an order are as follows:
  - ~~\$-130.00~~ ~~B~~base cost to open, review and close a compliance case
  - ~~\$-68.00~~ ~~F~~for each ordered continuing education course ordered
  - ~~\$-19.00~~ ~~F~~for each monetary penalty and cost assessment payment
  - ~~\$-19.00~~ ~~F~~for each ordered practice inspection ordered
  - ~~\$-39.00~~ ~~f~~for each ordered records audit ordered
  - ~~\$-118.00~~ ~~F~~for passing a required clinical examination
  - ~~\$-75.00~~ ~~F~~for each ordered practice restriction ordered
  - ~~\$-55.00~~ ~~F~~for each required report ~~required.~~

### Inspection Fee

#### Inspection Fee

In addition to the assessment of administrative costs addressed above, a licensee shall be charged ~~\$350~~ for each Board-ordered inspection of his practice as permitted by 18VAC60-21-40 ~~of the Regulations Governing the Practice of Dentistry.~~

### References ~~Effective: November 21, 2012~~

Va. Code § 54.1-2708.2

18VAC60-15-10

18VAC60-21-40 ~~Last revised: December 8, 2023~~ ~~December 14, 2018; Effective February 6, 2020~~

## Virginia Board of Dentistry

### Policy on Recovery of Disciplinary Costs

Under Virginia Code § 54.1-2708.2, the Board may recover reasonable administrative costs from any licensee against whom disciplinary action has been imposed. The Board will recover such costs in accordance with this guidance document.

1. Disciplinary costs will not be assessed for licensees receiving their first Board Order in which violations were found and sanctions were imposed.
2. The maximum cost assessment for a dentist is \$5,000.
3. The maximum cost assessment for a dental hygienist is \$1,250.
4. In a second and any subsequent Order against a licensee, the Board will specify the administrative costs to be recovered from a licensee in each pre-hearing consent order offered and, in each order, entered following an administrative proceeding. These administrative costs are in addition to the sanctions imposed which might include a monetary penalty.
5. The amount of administrative costs to be recovered will be calculated using the assessment of costs specified below and will be recorded on a Disciplinary Cost Recovery Worksheet (the worksheet). All applicable costs will be assessed as set forth in this guidance document. Board staff shall complete the worksheet and assure that the cost to be assessed is included in Board orders. The completed worksheets shall be maintained in the case file. Assessed costs shall be paid within 45 days of the effective date of the Order unless a payment plan has been requested and approved.

#### Assessment of Costs

Based on the expenditures incurred in a state fiscal year, the following costs will be used to calculate the amount of funds to be specified in a Board Order for recovery from a licensee disciplined by the Board:

- \$103 per hour for an investigation multiplied by the number of hours the DHP Enforcement Division reports having expended to investigate and report case findings to the Board.
- \$182 per hour for an inspection conducted during an investigation, multiplied by the number of hours the DHP Enforcement Division reports having expended to inspect the dental practice and report case findings to the Board.
- If applicable, the amount billed by an expert upon acceptance by the Board of his expert report.
- The applicable administrative costs for monitoring compliance with an order are as follows:

- \$130 base cost to open, review, and close a compliance case
- \$68 for each ordered continuing education course
- \$19 for each monetary penalty and cost assessment payment
- \$19 for each ordered practice inspection
- \$39 for each ordered records audit
- \$118 for a required clinical examination
- \$75 for each ordered practice restriction
- \$55 for each required report

#### Inspection Fee

In addition to the assessment of administrative costs addressed above, a licensee shall be charged \$350 for each Board-ordered inspection of his practice as permitted by 18VAC60-21-40.

#### **References**

[Va. Code § 54.1-2708.2](#)

[18VAC60-15-10](#)

[18VAC60-21-40](#)

Code of Virginia

Title 54.1. Professions and Occupations

Subtitle III. Professions and Occupations Regulated by Boards within the Department of Health

Professions

Chapter 27. Dentistry

Article 1. Board of Dentistry

## § 54.1-2708.2. Recovery of monitoring costs

The Board may recover from any licensee against whom disciplinary action has been imposed reasonable administrative costs associated with investigating and monitoring such licensee and confirming compliance with any terms and conditions imposed upon the licensee as set forth in the order imposing disciplinary action. Such recovery shall not exceed a total of \$5,000. All administrative costs recovered pursuant to this section shall be paid by the licensee to the Board. Such administrative costs shall be deposited into the account of the Board and shall not constitute a fine or penalty.

2009, c. 89.

The chapters of the acts of assembly referenced in the historical citation at the end of this section(s) may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.

**Agenda Item: Revision of Guidance Documents 60-25 and 60-26, Clinical Competency Exams**

**Included in your agenda packet:**

- Draft Guidance Document 60-25 with proposed changes (clean version)
- Draft Guidance Document 60-26 with proposed changes (clean version)
- Redline of proposed changes for Guidance Document 60-25
- Redline of proposed changes for Guidance Document 60-26

**Action Needed:**

- Motion to amend Guidance Document 60-25.
- Motion to amend Guidance Document 60-26.



**Virginia Board of Dentistry**  
**Guidance on**  
**DENTAL CLINICAL COMPETENCY EXAMINATION REQUIREMENTS FOR**  
**LICENSURE**

**Acceptable Clinical Examinations Effective January 1, 2023**

**Effective January 1, 2023**, the Board only accepts the **ADEX Exam** from dental applicants who apply for licensure by examination. This applies to all examinations completed in calendar year 2023 and thereafter, regardless of the dates portions of the examination were taken. *See Va. Code § 54.1-2709(B)(iv).*

**Effective January 1, 2023**, the Board will only accept a clinical competency exam that is substantially equivalent to the clinical exam components from dental applicants who apply for licensure by credentials. This applies to all examinations completed regardless of the date or dates an examination was taken. The Board will only accept clinical exam components taken from one testing agency; the Board will not accept combined exam components from more than one testing agency.

**Definitions**

- **“Clinical competency exam”** means a formal test of knowledge and competence in the evaluation, diagnosis, and treatment of dental conditions and the prevention of dental diseases which includes live patient and mannequin-based testing methods to demonstrate the skills needed to safely provide care and treatment of patients.
- **“Compensatory scoring”** is a scoring methodology which allows for strong performance in one content area to compensate for poor performance in another content area as long as the overall score meets the performance standard.
- **“Conjunctive scoring”** is a scoring methodology which requires that performance standards be met for each specified content area.
- **“Substantially equivalent”** means any examination taken for another jurisdiction which is equivalent in content and degree of difficulty, respectively, to those requirements for licensure by examination.

**Dental Applications by Examination**

Pursuant to Virginia Code § 54.1-2709(B)(iv), the Board will accept passage of the ADEX exam with **each** individual component listed below scored using conjunctive scoring (not compensatory scoring) and with a **minimum passing score of 75%** for each of the following components:

- **Diagnostic skills examination;**
- **Endodontics**, including access opening of a posterior tooth and access, canal instrumentation, and obturation of an anterior tooth;
- **Fixed prosthodontics**, including an anterior crown preparation and two posterior crown preparations involving a fixed partial denture factor;

- **Periodontics**, including scaling and root planing; and
- **Restorative**, including a class II amalgam or composite preparation and restoration, and a class III composite preparation and restoration.

### **Dental Applications by Credentials/Endorsement**

For dental applicants who apply for licensure by credentials, the Board will accept a passing score of the clinical competency exam required in the state in which the dentist was originally licensed. The Board will accept clinical exam components from one testing agency. The Board will not accept combined clinical exam components from more than one agency. The Board will not accept certificates or Canadian exams.

Additionally, pursuant to 18VAC60-21-210(B)(4), an applicant must have been in continuous clinical practice in another jurisdiction of the United States or in federal civil or military service for five out of the six years immediately preceding application for licensure. Active patient care in another jurisdiction of the United States (i) as a volunteer in a public health clinic, (ii) as an intern, or (iii) in a residency program may be accepted by the Board to satisfy this requirement. Pursuant to 18VAC60-21-210(B)(4), one year of clinical practice consists of a minimum of 600 hours of practice in a calendar year.

### **Acceptable Score Cards and Reports for Dental Licensure**

- To satisfy the requirements of 18VAC60-21-190(A)(2), an applicant should mail one original and detailed score card or report from the testing agency which documents passage of a clinical competency examination, including passage of all components listed above using conjunctive scoring. Candidate score cards are not acceptable. In the alternative, the applicant may contact the testing agency to request that the test results be made available to the Virginia Board of Dentistry via online access portal. The Board will not accept certificates or Canadian exams.
- Applicants will submit score cards for each attempt of a clinical competency exam, including failure of any clinical competency exam.
- The Board can only accept score cards from a single testing agency which shows passage (equivalent to a score of at least 75% using conjunctive scoring) or failure of an exam. To satisfy the requirements of 18VAC60-21-210, the Board receives notification and documentation of each attempt at clinical competency examination, including failure, from applicants for licensure.
- 18VAC60-21-210(A)(3) states that applicants who successfully completed a clinical competency examination five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake an examination or take clinical continuing education (please see guidance document 60-12) as evidence of continuing competence that meets the requirements of 18VAC60-21-250 unless the applicant demonstrates maintenance of clinical, ethical, and legal practice in another jurisdiction of the United States or in federal civil or military service for 48 of the past 60 months immediately prior to submission of an application for licensure.

**References**

[Va. Code § 54.1-2709](#)

[18VAC60-21-190](#)

[18VAC60-21-210](#)

**Virginia Board of Dentistry**  
**Guidance on**  
**DENTAL HYGIENE CLINICAL COMPETENCY EXAMINATION**  
**REQUIREMENTS FOR LICENSURE**

**Acceptable Clinical Examinations Effective January 1, 2023**

**Effective January 1, 2023**, the Board only accepts the **ADEX** Exam from dental hygiene applicants who apply for licensure by examination. This applies to all examinations completed in calendar year 2023 and thereafter, regardless of the dates portions of the examination were taken. *See* Va. Code § 54.1-2722(B)(iv).

**Effective January 1, 2023**, the Board will only accept a clinical competency exam that is substantially equivalent to the clinical exam components listed below from dental hygiene applicants who apply for licensure by credentials. This applies to all examinations completed regardless of the date or dates an examination was taken. The Board will only accept clinical exam components taken from one testing agency; the Board will not accept combined exam components from more than one testing agency.

**Definitions**

- **“Clinical competency exam”** means a formal test of knowledge and competence in the evaluation, diagnosis, and treatment of dental conditions and the prevention of dental diseases which includes live patient and mannequin-based testing methods to demonstrate the skills needed to safely provide care and treatment of patients.
- **“Compensatory scoring”** is a scoring methodology which allows for strong performance in one content area to compensate for poor performance in another content area as long as the overall score meets the performance standard.
- **“Conjunctive scoring”** is a scoring methodology which requires that performance standards be met for each specified content area.
- **“Substantially equivalent”** means any examination taken for another jurisdiction which is equivalent in content and degree of difficulty, respectively, to those requirements for licensure by examination.

**Dental Hygiene Applications by Examination**

Pursuant to Virginia Code § 54.1-2722(B)(iv), the Board will accept passage of the ADEX exam with each individual component listed below scored using conjunctive scoring (not compensatory scoring) and with a minimum passing score of 75% for each of the following components:

- **Treatment clinical examination**, including calculus detection and removal, periodontal pocket depth measurements, and tissue management.
- **Computer simulated clinical examination**, including assessment of various levels of diagnosis and treatment planning knowledge, skills, and abilities.

**Dental Hygiene Applications by Credentials/Endorsement**

For dental hygiene applicants who apply for licensure by credentials, the Board will accept a passing score of the clinical competency exam required in the state in which the dental hygienist was originally licensed. The Board will accept clinical exam components from one testing agency. The Board will not accept combined clinical exam components from more than one agency. The Board will not accept certificates or Canadian exams.

Additionally, pursuant to 18VAC60-25-150(2), an applicant must be currently licensed to practice dental hygiene in another jurisdiction of the United States and have maintained clinical, ethical, and active practice for 24 of the past 48 months immediately preceding application for licensure.

### **Acceptable Score Cards and Reports for Dental Hygiene Licensure**

- To satisfy the requirements of 18VAC60-25-130(A)(2), an applicant should mail one original and detailed score card or report from the testing agency which documents passage of a clinical competency examination, including passage of all components listed above using conjunctive scoring. Candidate score cards are not acceptable. In the alternative, the applicant may contact the testing agency to request that the test results be made available to the Virginia Board of Dentistry via online access portal. The Board will not accept certificates or Canadian exams.
- Applicants will submit score cards for each attempt of a clinical competency exam, including failure of any clinical competency exam.
- The Board can only accept score cards from a single testing agency which shows passage (equivalent to a score of at least 75% using conjunctive scoring) or failure of an exam. To satisfy the requirements of 18VAC60-25-140, the Board receives notification and documentation of each attempt at clinical competency examination, including failure, from applicants for licensure.
- 18VAC60-25-140(C) states that applicants who successfully completed a clinical competency examination five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake an examination or take clinical continuing education (please see guidance document 60-12) as evidence of continuing competence that meets the requirements of 18VAC60-25-190 unless the applicant demonstrates maintenance of clinical, ethical, and legal practice in another jurisdiction of the United States or in federal civil or military service for 48 of the past 60 months immediately prior to submission of an application for licensure.

### **References**

[Va. Code § 54.1-2722](#)

[18VAC60-25-130](#)

[18VAC60-25-140](#)

[18VAC60-25-150](#)

**Virginia Board of Dentistry ~~Policy on~~**  
**Guidance on**  
**DENTAL CLINICAL COMPETENCY EXAMINATION REQUIREMENTS FOR**  
**LICENSURE**

**Notice of Policies on Acceptable Clinical Examinations Effective January 1,**  
**2023**

**Effective January 1, 2023**, the Board ~~will~~ only accepts the ADEX Exam from dental applicants who apply for licensure by examination, ~~the ADEX Exam, for dental applicants~~. This ~~policy~~ applies to all examinations completed in calendar year 2023 and thereafter, regardless of the dates portions of the examination were taken. See Va. Code § 54.1-2709(B)(iv). Applicants must have taken and passed the ADEX exam.

**Effective January 1, 2023**, the Board will only accept a clinical competency exam that is substantially equivalent to the clinical exam components listed below from dental applicants who apply for licensure by credentials, ~~a Clinical Competency Exam that is substantially equivalent to the required clinical exam components~~. This ~~policy~~ applies to all examinations completed regardless of the date or dates an examination was taken. The Board will only accept clinical exam components taken from one testing agency; the Board will not accept combined an applicant cannot combine exam components from more than one testing agency.

**Acceptable Clinical Examinations Effective March 19, 2021**

**Definitions to Applied Terms**

- “**Clinical Competency Exam**” means a formal test of knowledge and competence in the evaluation, diagnosis, and treatment of dental conditions and the prevention of dental diseases which includes live patient and ~~or~~ mannequin-based testing methods to demonstrate the skills needed to safely provide care and treatment of patients.
- “**Compensatory Scoring**” is a scoring methodology which allows for strong performance in one content area to compensate for poor performance in another content area as long as the overall score meets the performance standard.
- “**Conjunctive Scoring**” is a scoring methodology which requires that performance standards be met for each specified content area.
- “**Substantially Equivalent**” means any examination taken for another jurisdiction which is equivalent in content and degree of difficulty, respectively, to those requirements for licensure by examination.

**Dental Applications by Examination**

~~Every candidate must who examines with the ADEX exam and CDCA, CITA, CRDTS, SRFA, or WREB shall pass~~ Pursuant to Virginia Code § 54.1-2709(B)(iv), the Board will accept passage of the ADEX exam with each individual component listed below scored with- only using conjunctive scoring (not compensatory scoring) and with a minimum passing score of 75% for each of the following required components for an exam to be accepted by the

| **Board:**

- **Diagnostic Skills Examination;**
- **Endodontics**, including access opening of a posterior tooth and access, canal instrumentation, and obturation of an anterior tooth;
- **Fixed prosthodontics**, including an anterior crown preparation and two posterior crown preparations involving a fixed partial denture factor;
- **Periodontics**, including scaling and root planing; **and**
- **Restorative**, including a class II amalgam or composite preparation and restoration, and a class III composite preparation and restoration.

**Dental Applications by Credentials/Endorsement**

- For dental applicants who apply for licensure by credentials, the Board will accept a passing score of the ~~C~~clinical ~~C~~ompetency ~~E~~xam required in the state in which the dentist was originally licensed. ~~The Board will accept clinical exam components must be from one testing agency. The Board will not accept combined an applicant cannot combine clinical exam components from more than one agency. The Board does will not accept certificates or Canadian exams.~~

Additionally, ~~pursuant to 18VAC60-21-210(B)(4), an applicant must every candidate shall have~~ been in continuous clinical practice in another jurisdiction of the United States or in federal civil or military service for five out of the six years immediately preceding application for licensure ~~pursuant to this section~~. Active patient care in another jurisdiction of the United States (i) as a volunteer in a public health clinic, (ii) as an intern, or (iii) in a residency program may be accepted by the ~~b~~Board to satisfy this requirement. ~~Pursuant to 18VAC60-21-210(B)(4), One~~ year of clinical practice ~~shall consist~~ consists of a minimum of 600 hours of practice in a calendar year ~~as attested by the applicant. 18VAC60-21-210.B.4~~

**Acceptable Score Cards and Reports for Dental Licensure**

- ~~To satisfy the requirements of 18VAC60-21-190(A)(2), an applicant should mail~~ ~~One An~~ original and detailed score card or report ~~is required from the testing agency documenting which documents passage of a clinical competency examination, including passage of all components listed above using conjunctive scoring of all required components.~~ Candidate's score cards are not acceptable. All score cards or reports must be requested by the applicant. ~~The One original and detailed score card or report must be mailed to the Board. Or In the alternative, the applicant must may contact the testing agency to request that the test results be made available to the Virginia Board of Dentistry via online access portal. For WREB you must request an IPR detailed report. The Board does will not accept certificates or Canadian exams.~~
- ~~Score cards shall show conjunctive scoring of the required clinical competency exam components on one score card. Test scores cannot be combined from different testing agencies. The score cards must show a pass (equivalent to at least a score of 75%) or a fail.~~
- ~~Applicants shall will submit score cards for each attempt of a clinical competency exam, including failure of any clinical competency exam. If an applicant has failed any clinical competency exam, a score card is still required to be submitted. The applicant shall notify the Board of all previously failed attempts of any clinical competency exam.~~
- ~~The Board can only accept score cards from a single testing agency which shows passage equivalent to a score of at least 75% using conjunctive scoring or failure of an exam. To satisfy the requirements of 18VAC60-21-210, the Board receives notification and documentation of each attempt at clinical competency examination, including failure from~~



applicants for licensure.

- ~~18VAC60-21-210(A)(3) states that Applicants who successfully completed a clinical competency examination five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake an examination or take clinical continuing education (please see guidance document 60-12) as evidence of continuing competence that meets the requirements of 18VAC60-21-250 unless they demonstrate that they have maintained the applicant demonstrates maintenance of clinical, ethical, and legal practice in another jurisdiction of the United States or in federal civil or military service for 48 of the past 60 months immediately prior to submission of an application for licensure. 18VAC60-21-210(B)(4).~~

### References

Va. Code § 54.1-2709

18VAC60-21-190

18VAC60-21-210

### Excerpts of Applicable Laws and Regulations Addressing Clinical Examinations

#### • ~~Dental Applicants~~

- ~~“An application for such license shall be made to the Board in writing and shall be accompanied by satisfactory proof that the applicant . . . has successfully completed a clinical examination acceptable to the Board.” Va. Code §54.1-2709(B)(iv).~~

Virginia Board of Dentistry  
Policy on  
**DENTAL HYGIENE CLINICAL COMPETENCY EXAMINATION**  
**REQUIREMENTS FOR LICENSURE**

**Notice of Policies on Acceptable Clinical Examinations Effective January 1, 2023**

**Effective January 1, 2023**, the Board ~~will~~ only accepts the ADEX Exam from dental hygiene applicants who apply for licensure by examination, ~~the ADEX Exam, for dental hygiene applicants.~~ This ~~policy~~ applies to all examinations completed in calendar year 2023 and thereafter, regardless of the dates portions of the examination were taken. See Va. Code § 54.1-2722(B)(iv). ~~Applicants must have taken and passed the ADEX exam.~~

**Effective January 1, 2023**, the Board will only accept a clinical competency exam that is substantially equivalent to the clinical exam components listed below from dental hygiene applicants who apply for licensure by credentials, ~~a Clinical Competency Exam that is substantially equivalent to the required clinical exam components (listed below).~~ This ~~policy~~ applies to all examinations completed regardless of the date or dates an examination was taken. The Board will only accept clinical exam components taken from one testing agency; the Board will not accept combined an applicant cannot combine exam components from more than one testing agency.

**Acceptable Clinical Examinations Effective March 19, 2021**

**Definitions to Applied Terms**

- “**Clinical ~~C~~ompetency ~~E~~xam**” means a formal test of knowledge and competence in the evaluation, diagnosis, and treatment of dental conditions and the prevention of dental diseases which includes live patient and/or manikin based testing methods to demonstrate the skills needed to safely provide care and treatment of patients.
- “**Compensatory ~~s~~Scoring**” is a scoring methodology which allows for strong performance in one content area to compensate for poor performance in another content area as long as the overall score meets the performance standard.
- “**Conjunctive ~~s~~Scoring**” is a scoring methodology which requires that performance standards be met for each specified content area.
- “**Substantially ~~E~~quivalent**” means any examination taken for another jurisdiction which is equivalent in content and degree of difficulty, respectively, to those requirements for licensure by examination.

**Dental Hygiene Applications by Examination**

~~Every candidate must who examines with the ADEX exam and CDCA, CITA, CRDTS, SRTA, or WREB shall pass.~~ Pursuant to Virginia Code § 54.1-2722(B)(iv), the Board will accept passage of the ADEX exam with each individual component listed below ~~with only scored using~~ conjunctive scoring (not compensatory scoring) and ~~with~~ a minimum passing score of 75% for each of the following ~~required~~ components ~~for an exam to be accepted by the Board:~~

- **Treatment ~~C~~linical ~~E~~xamination**, including calculus detection and removal, periodontal

pocket depth measurements, and tissue management.

- **Computer ~~s~~Simulated ~~C~~linical ~~E~~xamination**, including ~~assessing-assessment of~~ various levels of diagnosis and treatment planning knowledge, skills, and abilities.

**Dental Hygiene Applications by Credentials/Endorsement**

For dental hygiene applicants who apply for licensure by credentials, the Board will accept a passing score of the ~~C~~clinical ~~C~~ompetency ~~E~~xam required in the state in which the dental hygienist was originally licensed, ~~provided the applicant has taken all clinical components listed above. The applicant must have taken all clinical component required (see above).~~ ~~The Board will accept clinical exam components must be from one testing agency.~~ The Board will not accept combined ~~an applicant cannot combine~~ clinical exam components from more than one agency. ~~The Board does will not accept certificates or Canadian exams.~~

Additionally, ~~pursuant to 18VAC60-25-150(2),~~ an applicant must be currently licensed to practice dental hygiene in another jurisdiction of the United States and have ~~maintained~~ clinical, ethical, and active practice for 24 of the past 48 months immediately preceding application for licensure. ~~18VAC60-25-150.2~~

**Acceptable Score Cards and Reports for ~~Dental and~~ Dental Hygiene Licensure**

- ~~An~~ To satisfy the requirements of 18VAC60-25-130(A)(2), an applicant should mail ~~one~~ original and detailed score card or report ~~is required~~ from the testing agency ~~which documents documenting~~ passage of a clinical competency examination, ~~including passage of all required components listed above using conjunctive scoring.~~ Candidate's score cards are ~~not acceptable.~~ ~~All score cards or reports must be requested by the applicant. The original and detailed score card or report must be mailed to the Board.~~ ~~Or~~ In the alternative, the applicant ~~must~~ may contact the testing agency to request that the test results be made available to the Virginia Board of Dentistry via online access portal. ~~For WREB you must request an IPR detailed report.~~ The Board ~~does will~~ not accept certificates or Canadian exams.
- ~~Score cards shall show conjunctive scoring of the required clinical competency exam components on one score card. Test scores cannot be combined from different testing agencies. The score cards must show a pass (equivalent to at least a score of 75%) or a fail.~~
- ~~Applicants shall will~~ submit score cards for each attempt of a clinical competency exam, ~~including failure of any clinical competency exam.~~ If an applicant has failed ~~any~~ clinical competency exam, a score card is still required to be submitted. ~~The applicant shall notify the Board of all previously failed attempts of any clinical competency exam.~~
- ~~The Board can only accept score cards from a single testing agency which shows passage (equivalent to a score of at least 75% using conjunctive scoring) or failure of an exam. To satisfy the requirements of 18VAC60-25-140, the Board receives notification and documentation of each attempt at clinical competency examination, including failure, from applicants for licensure.~~
- ~~18VAC60-25-140(C) states that A~~ applicants who successfully completed a clinical competency examination five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake an examination or take clinical continuing education (~~please see guidance document 60-12~~) as evidence of continuing competence that meets the requirements of 18VAC60-25-190 unless ~~they demonstrate that they have maintained the applicant demonstrates maintenance of~~ clinical, ethical, and legal practice in another jurisdiction of the United States or in federal civil or military service for 48 of the past 60 months immediately prior to submission of an application for licensure. ~~18VAC60-25-140.C.~~



## References

Va. Code § 54.1-2722(B)(iv)

Va. Code § 54.1-2722(C)

18VAC60-25-140(C)

18VAC60-25-150(4)

## Excerpts of Applicable Laws and Regulations Addressing Clinical Examinations

- Dental Hygiene Applicants

- ~~○ An application for such license shall be made to the Board in writing and shall be accompanied by satisfactory proof that the applicant has successfully completed a clinical examination acceptable to the Board. §54.1-2722.B (iv)~~
- ~~○ The Board may grant a license to practice dental hygiene to an applicant licensed to practice in another jurisdiction if he meets other qualifications as determined in regulations promulgated by the Board. §54.1-2722. C (iv)~~
- ~~○ An applicant for dental hygiene licensure by credentials shall have successfully completed a clinical competency examination substantially equivalent to that required for licensure by examination. 18VAC60-25-150.4~~



Virginia Department of  
**Health Professions**

Board of Dentistry

Disciplinary Board Report

Today's report reviews the May 16, 2023 through November 13, 2023 case activity

**May 16, 2023 – November 13, 2023**

The table below includes all cases that have received Board action since May 16, 2023 through November 13, 2023.

Year 2023	Cases Received	Cases Closed No Violation	Cases Closed W/Violation	Total Cases Closed
May	40	16	1	26
June	44	30	5	35
July	50	54	7	61
August	48	48	6	54
September	43	53	5	58
October	45	35	5	40
November	13	5	0	5
<b>TOTALS</b>	<b>283</b>	<b>241</b>	<b>29</b>	<b>279</b>

**Closed Case with Violations consisted of the following:**

**Patient Care Related:**

- **15 Standard of Care: Diagnosis/Treatment:** Instances in which the diagnosis/treatment was improper, delayed, or unsatisfactory. Also, include failure to diagnose/treat& other diagnosis/treatment issues.
- **5 Business Practice Issues:** Recordkeeping
- **3 Unlicensed Activity:** Practicing a profession or occupation without holding a valid license as required by statute or regulations. (Allowing a DA-I to practice outside the scope)
- **2 Standard of Care: Medication or Prescription:** Prescribing, labeling, dispensing and administration errors and other medication/prescription related issues.
- **2 Inability to Safely Practice:** Impairment due to the use of alcohol, illegal substances, or prescription drugs or incapacitation due to mental, physical or medical conditions.
- **1 Fraud, Non-Patient Care:** Improper patient billing, falsification of licensing/renewal documents.
- **1 Reinstatement:** An application or request for licensure.

**CCA's**

There were **3** CCA's issued from May 16, 2023 through November 13, 2023. The CCA's issued consisted of the following violations:



Virginia Department of  
**Health Professions**  
Board of Dentistry

Disciplinary Board Report

- **1 Standard of Care: Diagnosis/Treatment:** Instances in which the diagnosis/treatment was improper, delayed, or unsatisfactory. Also, include failure to diagnose/treat& other diagnosis/treatment issues.
- **1 Business Practice Issues:** Recordkeeping
- **Fraud, Patient Care:** Performing unwarranted services or the falsification/alteration of patient records.

**Suspensions/Revocations**

There has been 1 Summary Suspensions issued from May 16, 2023 to November 13, 2023.





Virginia Department of  
**Health Professions**  
Board of Dentistry

FY 2023 (Ending June 30, 2023)

<u>Cash Balance</u>
<b>\$3,626,000</b>