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**IDAPA 19
TITLE 01
CHAPTER 01**

IDAPA 19 - BOARD OF DENTISTRY

19.01.01 - RULES OF THE IDAHO STATE BOARD OF DENTISTRY

000. LEGAL AUTHORITY (RULE 0).

This Chapter is adopted under the legal authority of Chapter 9, Title 54, Idaho Code. (7-1-93)

001. TITLE AND SCOPE (RULE 1).

These rules shall be cited as IDAPA 19.01.01, "Rules of the Idaho State Board of Dentistry." These rules constitute the minimum requirements for licensure and regulation of dentists and dental hygienists. (7-1-93)

002. WRITTEN INTERPRETATIONS (RULE 2).

There are no written interpretations to these rules. (7-1-93)

003. ADMINISTRATIVE APPEALS (RULE 3).

All contested cases shall be governed by the provisions of IDAPA 04.11.01, "Idaho Rules of Administrative Procedure of the Attorney General," and the Idaho Administrative Procedure Act, Chapter 52, Title 67, Idaho Code. (3-15-02)

004. INCORPORATION BY REFERENCE (RULE 4).

Pursuant to Section 67-5229, Idaho Code, this chapter incorporates by reference the following documents: (7-1-93)

01. Documents. (7-1-93)

a. American Association of Oral and Maxillofacial Surgeons, Office Anesthesia Evaluation Manual, 6th Edition, 2000. (3-15-02)

b. American Dental Association, Council on Dental Education, Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry, October 2003. (4-11-06)

c. American Dental Association, Council on Dental Education, Guidelines for Use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists, October 2003. (4-11-06)

d. Centers for Disease Control and Prevention, DHHS, Guidelines for Infection Control in Dental Health-Care Settings, 2003. (4-6-05)

e. American Dental Association, Principles of Ethics, Code of Professional Conduct and Advisory Opinions (ADA Code), January 2003(as amended). (3-20-04)

f. American Dental Hygienists' Association, Code of Ethics for Dental Hygienists (ADHA Code), 1995. (4-6-05)

02. Availability. These documents are available for public review at the Idaho State Board of Dentistry, 350 North 9th Street, Suite M-100, Boise, Idaho 83720, or the Idaho State Law Library, Supreme Court Building, 451 W. State Street, Boise, Idaho 83720. (3-15-02)

005. OFFICE INFORMATION (RULE 5).

The Board of Dentistry office is located at 350 North 9th Street, Suite M-100, Boise, Idaho. The mailing address is P.O. Box 83720, Boise, Idaho 83720-0021. The telephone number of the Board is (208) 334-2369, the fax number is (208) 334-3247. (3-30-07)

006. PUBLIC RECORDS ACT COMPLIANCE (RULE 6).

Board of Dentistry records are subject to the provisions of the Idaho Public Records Act, Title 9, Chapter 3, Idaho

Code. (3-15-02)

007. -- 009. (RESERVED).

010. EXAMINATIONS (RULE 10).

Examinations may be completed solely by the Board or, at its discretion, the Board may participate in and accept an examining agent. Examination results will be valid for Idaho licensure for a period of five (5) years from the date of successful completion of the examination. (3-18-99)

011. APPLICATIONS (RULE 11).

Applications for license to practice dentistry or dental hygiene must be filed in the office of the Board of Dentistry, Boise, Idaho. The application must be accompanied by an unmounted photograph, bust only, taken within the year preceding the date of examination, and attested before a notary public. (3-18-99)

012. LICENSE AND APPLICATION FEES (RULE 12).

The license fees and application fees shall be as follows: (3-30-07)

01. Application Fees for Dentists: (7-1-91)

a. General: (3-18-99)

i. By examination -- one hundred dollars (\$100). (3-18-99)

ii. By credentials -- six hundred dollars (\$600). (3-18-99)

b. Specialty: (7-1-91)

i. By examination -- one hundred dollars (\$100). (7-1-91)

ii. By credentials -- six hundred dollars (\$600). (3-18-99)

02. Application Fees for Dental Hygienists: (7-1-91)

a. By examination -- fifty dollars (\$50). (7-1-91)

b. By credentials -- one hundred and fifty dollars (\$150). (7-1-92)

03. Biennial License Fees for Dentists: (3-30-07)

a. Active -- three hundred dollars (\$300). (3-30-07)

b. Inactive -- one hundred and fifty dollars (\$150). (3-30-07)

c. Specialty -- three hundred dollars (\$300). (3-30-07)

04. Biennial License Fees for Hygienists: (3-30-07)

a. Active -- one hundred and forty dollars (\$140). (3-30-07)

b. Inactive -- eighty dollars (\$80). (3-30-07)

05. Application Fees for General Anesthesia and Conscious Sedation Permits: (4-2-03)

a. Initial Application -- three hundred dollars (\$300). (4-2-03)

b. Renewal Application -- three hundred dollars (\$300). (4-2-03)

- c. Reinstatement Application -- three hundred dollars (\$300). (4-2-03)

013. FEES -- GENERAL (RULE 13).

A license shall not be issued or renewed unless the fee is paid. Application fees are not refunded. License fees shall be prorated from date of licensure to the next successive license renewal date. (3-30-07)

014. EXAMINATION FOR GENERAL DENTAL LICENSES (RULE 14).

Pursuant to Section 54-918, Idaho Code, the Board shall conduct both written and clinical examinations of such duration and character and upon such subjects in dentistry as the Board shall determine to thoroughly test the fitness and ability of the applicant to practice dentistry in the state of Idaho. The Board may accept as meeting this requirement successful completion of an examination administered by the Board or its agent, and completion of supplementary examinations as the Board deems necessary to determine the competency of the applicant for licensure. Any exam conducted by the Board may include: (7-1-93)

01. Written Examination. Evidence of passing the National Board examination may be required of all candidates applying for a license to practice dentistry. Any other written examination will be specified by the Board. (7-1-93)

02. Clinical Examination. All applicants for license to practice general dentistry shall be required to take a clinical examination. (7-1-93)

015. EXAMINATION FOR DENTAL HYGIENE LICENSES (RULE 15).

Pursuant to Section 54-918, Idaho Code, the Board shall conduct both written and clinical examinations, which shall be of such duration and character and upon such subjects in dental hygiene as the Board shall determine to thoroughly test the fitness and ability of the applicants to practice dental hygiene in the state of Idaho. The Board may accept as meeting this requirement successful completion of an examination administered by the Board or its agent, and completion of supplementary examinations as the Board deems necessary to determine the competency of the applicant for licensure. Any examination conducted by the Board may include: (7-1-93)

01. Written Examination. Evidence of passing the National Board examination may be required of all candidates applying for a dental hygiene license. Any other written examination will be specified by the Board. (7-1-93)

02. Clinical Examination. All applicants for license to practice dental hygiene shall be required to take a clinical examination including local anesthesia. (7-1-93)

016. REQUIREMENTS FOR DENTAL LICENSURE (RULE 16).

The Idaho State Board of Dentistry will approve for licensure only graduates of dental schools accredited by the Commission on Dental Accreditation of the American Dental Association at the time of graduation. (3-18-99)

017. REQUIREMENTS FOR DENTAL HYGIENE LICENSURE (RULE 17).

Applicants for license to practice dental hygiene must furnish proof of graduation from a school of dental hygiene accredited by the Commission on Dental Accreditation of the American Dental Association at the time of applicant's graduation. (10-1-65)

018. REQUIREMENT FOR CPR (RULE 18).

Applicants for initial or renewal licensure as a dentist, dental specialist, or dental hygienist shall provide written verification of current cardiopulmonary resuscitation (CPR) certification as a requirement for licensure. (4-2-03)

019. (RESERVED).

020. DENTAL HYGIENE LICENSURE BY CREDENTIALS (RULE 20).

Applications for dental hygiene licensure by credentials must be filed with the Board along with the following: (3-18-99)

01. Graduation. Proof of graduation from a school of dental hygiene accredited by the Commission on Dental Accreditation of the American Dental Association at the time of applicant's graduation. (7-1-92)

02. National Board Examination. Evidence of successful completion of the National Board of Dental Hygiene. Any other written examinations will be specified by the Board. (3-18-99)

03. Cardiopulmonary Resuscitation. Evidence of current CPR certification. (7-1-92)

04. Local Anesthesia. Applicants who are currently licensed in another jurisdiction to practice local anesthesia must submit evidence of satisfactory completion of a Board-approved examination and attest to the regular practice of local anesthesia. (3-18-99)

05. Provisional License. Applicants who meet all the requirements to be licensed by credentials, but who have not completed a Board-approved local anesthesia examination, may be provisionally licensed to practice without local anesthesia for a period of not more than one (1) year. Within that year, the applicant must pass a local anesthesia examination approved by the Board. (3-18-99)

06. Interview. At the Board's discretion, applicants may be required to appear for a personal interview conducted by the Board. (3-18-99)

021. -- 024. (RESERVED).

025. PROVISIONAL LICENSURE (RULE 25).

This type of license may be granted at the Board's discretion to applicants who meet the following requirements: (3-18-99)

01. Active Practice. Active practice within the previous two (2) years. (7-1-93)

02. Current Licensure. Current licensure in good standing in another state. (7-1-93)

03. Evidence. Evidence that the applicant has not failed an exam given by the Board or its agent. (3-18-99)

04. Provisional License. The provisional license shall be valid for the period of time specified on the provisional license which shall not exceed one (1) year from the date of issuance. (4-2-03)

05. Additional. Any additional requirements as specified by the Board. (3-18-99)

026. -- 027. (RESERVED).

028. VOLUNTEER DENTAL HYGIENE SERVICES (RULE 28).

A person holding an unrestricted active status dental hygienist's license issued by the Board may provide dental hygiene services in an extended access oral health care program without being issued an extended access dental hygiene license endorsement under the following circumstances: (3-30-07)

01. Extended Access Oral Health Care Program. The dental hygiene services must be performed in an extended access oral health care program under the supervision of a dentist who is employed or retained by or is a volunteer for the program; (3-30-07)

02. Dental Hygiene Services Performed. The dental hygiene services performed shall be limited to oral health screening, preparation of health history, fluoride treatment, non-surgical periodontal treatment, oral prophylaxis, the application of caries preventative agents, the application of pit and fissure sealants with recommendation that patient will be seen by a dentist and preventive dental health instruction; (3-30-07)

03. Volunteers. The dental hygienist must perform the dental hygiene services on a volunteer basis and shall not accept any form of remuneration for providing the services; and (3-30-07)

04. Volunteer Time Limit. The dental hygienist may not provide dental hygiene services under this provision for more than five (5) days within any calendar month. (3-30-07)

029. DENTAL HYGIENISTS - LICENSE ENDORSEMENTS (RULE 29).

Subject to the provisions of the Dental Practice Act, Chapter 9, Title 54, Idaho Code, and these rules, the Board may grant license endorsements to qualified dental hygienists as follows: (4-6-05)

01. Extended Access Dental Hygiene Endorsement. Upon application, the Board may grant an extended access dental hygiene endorsement to a person holding an unrestricted active status dental hygienist's license issued by the Board who provides satisfactory proof that the following requirements are met: (4-6-05)

a. The person has been licensed as a dental hygienist during the two (2) year period immediately prior to the date of application for an extended access dental hygiene endorsement; (4-6-05)

b. For a minimum of one thousand (1000) total hours within the previous two (2) years, the person has either been employed as a dental hygienist in supervised clinical practice or has been engaged as a clinical practice educator in an approved dental hygiene school; (4-6-05)

c. The person has not been disciplined by the Board or another licensing authority upon grounds that bear a demonstrable relationship to the ability of the dental hygienist to safely and competently practice under general supervision in an extended access oral health care program. (4-6-05)

d. Any person holding an unrestricted active status dental hygienist's license issued by the Board who is employed as a dental hygienist in an extended access oral health care program in this state shall be granted an extended access dental hygiene endorsement without being required to satisfy the experience requirements specified in this rule. (3-30-07)

02. Extended Access Dental Hygiene Restorative Endorsement. Notwithstanding any other provision of these rules, a qualified dental hygienist holding an extended access dental hygiene restorative endorsement may perform specified restorative functions under the direct supervision of a dentist in an extended access oral health care program. Permissible restorative functions under this endorsement shall be limited to the placement of a restoration into a tooth prepared by a dentist and the carving, contouring and adjustment of the contacts and occlusion of the restoration. Upon application, the Board may grant an extended access dental hygiene restorative endorsement to a person holding an unrestricted active status dental hygienist's license issued by the Board who provides satisfactory proof that the following requirements are met: (3-30-07)

a. The person has successfully completed the Western Regional Examining Board's restorative examination or an equivalent restorative examination approved by the Board; or (3-30-07)

b. The person holds an equivalent restorative permit in another state as of the date of endorsement application which required successful completion of the Western Regional Examining Board's restorative examination or an equivalent restorative examination approved by the Board for its issuance; and (3-30-07)

c. The person has not been disciplined by the Board or another licensing authority upon grounds that bear a demonstrable relationship to the ability of the dental hygienist to safely and competently practice under in an extended access oral health care program. (3-30-07)

03. Renewal. Upon payment of the appropriate license fee and completion of required continuing education credits specified for a dental hygiene license endorsement, a person meeting all other requirements for renewal of a license to practice dental hygiene shall also be entitled to renewal of a dental hygiene license endorsement for the effective period of the license. An endorsement shall immediately expire and be cancelled at such time as a person no longer holds an unrestricted active status dental hygienist's license issued by the Board or upon a person's failure to complete the required continuing education credits. (3-30-07)

030. DENTAL HYGIENISTS - PRACTICE (RULE 30).

Subject to the provisions of the Dental Practice Act, Chapter 9, Title 54, Idaho Code, dental hygienists are hereby authorized to perform the activities specified below: (4-6-05)

01. General Supervision. A dental hygienist may perform specified duties under general supervision

as follows: (4-6-05)

- a.** Oral prophylaxis (including removal of supragingival and subgingival calculus, stains and plaque biofilm from teeth); (4-11-06)
- b.** Medical history assessments and intra-oral and extra-oral assessments (including charting of the oral cavity and surrounding structures, taking case histories and periodontal assessment); (4-11-06)
- c.** Developing patient care plans for prophylaxis, non-surgical periodontal therapy and supportive and evaluative care in accordance with the treatment parameters set by supervising dentist; (4-11-06)
- d.** Root planing; (4-11-06)
- e.** Non-surgical periodontal therapy; (4-11-06)
- f.** Closed subgingival curettage; (4-11-06)
- g.** Administration of local anesthesia; (4-6-05)
- h.** Removal of marginal overhangs (use of high speed handpieces or surgical instruments is prohibited); (4-6-05)
- i.** Application of topical antibiotics or antimicrobials (used in non-surgical periodontal therapy); (4-6-05)
- j.** Instructing patients in techniques of oral hygiene and preventive procedures; (4-6-05)
- k.** Placement of antibiotic treated materials pursuant to written order and site specific; (4-6-05)
- l.** All duties which may be performed by a dental assistant; and (4-11-06)
- m.** Such other duties as approved by the Board. (4-11-06)

02. Indirect Supervision. A dental hygienist may perform specified duties under indirect supervision as follows: (4-6-05)

- a.** Administration and monitoring of nitrous oxide; (4-6-05)
- b.** All dental hygienist duties specified under general supervision; and (4-6-05)
- c.** Such other duties as approved by the Board. (4-11-06)

03. Direct Supervision. A dental hygienist may perform specified duties under direct supervision as follows: (4-6-05)

- a.** Use of a laser restricted to gingival curettage and bleaching; (4-6-05)
- b.** All dental hygienist duties specified under general and indirect supervision; and (4-6-05)
- c.** Such other duties as approved by the Board. (4-11-06)

031. DENTAL HYGIENISTS - PROHIBITED PRACTICE (RULE 31).
Subject to the provisions of the Dental Practice Act, Chapter 9, Title 54, Idaho Code, and these rules, a dental hygienist may not perform certain specified duties. (4-6-05)

01. Prohibited Duties. A dental hygienist is prohibited from performing the duties specified below: (4-6-05)

- a. Definitive diagnosis and dental treatment planning; (4-6-05)
- b. The operative preparation of teeth for the placement of restorative materials; (4-6-05)
- c. The placement or carving of restorative materials; (4-6-05)
- d. Administration of any general anesthesia or conscious sedation; (4-6-05)
- e. Final placement of any fixed or removable appliances; (4-6-05)
- f. Final removal of any fixed appliance; (4-6-05)
- g. Cutting procedures utilized in the preparation of the coronal or root portion of the tooth; (4-6-05)
- h. Cutting procedures involving the supportive structures of the tooth; (4-6-05)
- i. Placement of the final root canal filling; (4-6-05)
- j. Final impressions of any tissue-bearing area, whether hard or soft tissue; (4-6-05)
- k. Occlusal equilibration procedures for any prosthetic restoration, whether fixed or removable; (4-6-05)
- l. Final placement of prefabricated or cast restorations or crowns; and (4-6-05)
- m. Such other duties as specifically prohibited by the Board. (4-6-05)

032. -- 034. (RESERVED).

035. DENTAL ASSISTANTS - PRACTICE (RULE 35).

01. Direct Supervision. A dental assistant may perform specified activities under direct supervision as follows: (4-6-05)

- a. Recording the oral cavity (existing restorations, missing and decayed teeth); (4-6-05)
- b. Placement of topical anesthetic agents (prior to administration of a local anesthetic by a dentist or dental hygienist); (4-6-05)
- c. Removal of excess bonding material from temporary and permanent restorations and orthodontic appliances (using hand instruments or contra-angle handpieces with disks or polishing wheels only); (4-6-05)
- d. Expose and process radiographs; (4-6-05)
- e. Take impressions for preparation of diagnostic models, bleach trays, fabrication of night guards, temporary appliances, temporary crowns or bridges; (4-6-05)
- f. Record diagnostic bite registration; (4-6-05)
- g. Record bite registration for fabrication of restorations; (4-6-05)
- h. Provide patient education and instruction in oral hygiene and preventive services; (4-6-05)
- i. Placement of cotton pellets and temporary restorative materials into endodontic access openings; (4-6-05)

- j. Placement and removal of arch wire; (4-6-05)
 - k. Placement and removal of orthodontic separators; (4-6-05)
 - l. Placement and removal of ligature ties; (4-6-05)
 - m. Cutting arch wires; (4-6-05)
 - n. Removal of loose orthodontic brackets and bands to provide palliative treatment; (4-6-05)
 - o. Adjust arch wires; (4-6-05)
 - p. Etching of teeth prior to placement of restorative materials; (4-6-05)
 - q. Etching of enamel prior to placement of orthodontic brackets or appliances by a Dentist; (4-6-05)
 - r. Placement and removal of rubber dam; (4-6-05)
 - s. Placement and removal of matrices; (4-6-05)
 - t. Placement and removal of periodontal pack; (4-6-05)
 - u. Removal of sutures; (4-6-05)
 - v. Application of cavity liners and bases; (4-6-05)
 - w. Placement and removal of gingival retraction cord; (4-6-05)
 - x. Application of topical fluoride agents; and (4-6-05)
 - y. Performing such other duties as approved by the Board. (4-6-05)
- 02. Prohibited Duties.** Subject to other applicable provisions of these rules and of the Act, dental assistants are hereby prohibited from performing any of the activities specified below: (7-1-93)
- a. Definitive diagnosis and treatment planning. (4-6-05)
 - b. The placement or carving of permanent restorative materials in any manner. (7-1-93)
 - c. Any procedure using lasers. (4-6-05)
 - d. The administration of any general anesthetic, infiltration anesthetic or any injectable nerve block procedure. (4-6-05)
 - e. Any oral prophylaxis. Oral prophylaxis is defined as the removal of plaque, calculus, and stains from the exposed and unexposed surfaces of the teeth by scaling and polishing. (7-1-93)
 - f. Any intra-oral procedure using a highspeed handpiece, except to the extent authorized by a Certificate of Registration or certificate or diploma of course completion issued by an approved teaching entity. (4-6-05)
 - g. The following expanded functions, unless authorized by a Certificate of Registration or certificate or diploma of course completion issued by an approved teaching entity and performed under direct supervision: (4-6-05)
 - i. Fabrication and placement of temporary crowns; (4-6-05)

- ii. Perform the mechanical polishing of restorations; (7-1-93)
- iii. Initiating, regulating and monitoring the administration of nitrous oxide analgesia to a patient; (4-11-06)
- iv. Application of pit and fissure sealants; (7-1-93)
- v. Coronal polishing, unless authorized by a Certificate of Registration; this refers to the technique of removing soft substances from the teeth with pumice or other such abrasive substances with a rubber cup or brush. This in no way authorizes the mechanical removal of calculus nor is it to be considered a complete oral prophylaxis. This technique (coronal polishing) would be applicable only after examination by a dentist and removal of calculus by a dentist or dental hygienist. (7-1-93)
- vi. Use of a highspeed handpiece restricted to the removal of orthodontic cement or resin. (4-6-05)

03. Expanded Functions Qualifications. A dental assistant may be considered Board qualified in expanded functions, authorizing the assistant to perform any or all of the expanded functions described in Subsection 035.02.g. upon satisfactory completion of the following requirements: (4-6-05)

a. Completion of Board-approved training in each of the expanded functions with verification of completion of the training to be provided to the Board upon request by means of a Certificate of Registration or other certificate evidencing completion of approved training. The required training shall include adequate training in the fundamentals of dental assisting, which may be evidenced by: (4-6-05)

- i. Current certification by the Dental Assisting National Board; or (7-1-93)
- ii. Successful completion of a Board-approved course in the fundamentals of dental assisting; or (3-18-99)
- iii. Successfully challenging the fundamentals course. (7-1-93)

b. Successful completion of a Board-approved competency examination in each of the expanded functions. There are no challenges for expanded functions. (3-18-99)

04. Course Approval. Any school, college, institution, university or other teaching entity may apply to the Board to obtain approval of its courses of instruction in expanded functions. Before approving such course, the Board may require satisfactory evidence of the content of the instruction, hours of instruction, content of examinations or faculty credentials. (3-18-99)

05. Other Credentials. Assistants, who have completed courses or study programs in expanded functions that have not been previously approved by the Board, may submit evidence of the extent and nature of the training completed, and, if in the opinion of the Board the same is at least equivalent to other Board-approved courses, and demonstrates the applicant's fitness and ability to perform the expanded functions, the Board may consider the assistant qualified to perform any expanded function(s). (3-18-99)

036. -- 039. (RESERVED).

040. UNPROFESSIONAL CONDUCT (RULE 40).

A dentist or hygienist shall not engage in unprofessional conduct in the course of his practice. Unprofessional conduct by a person licensed under the provisions of Title 54, Chapter 9, Idaho Code, is defined as, but not limited to, one (1) of the following: (7-1-93)

01. Fraud. Obtaining fees by fraud or misrepresentation, or over-treatment either directly or through an insurance carrier. (7-1-93)

02. Unlicensed Practice. Employing directly or indirectly any suspended or unlicensed dentist or dental hygienist to practice dentistry or dental hygiene as defined in Title 54, Chapter 9, Idaho Code. (7-1-93)

- 03. Unlawful Practice.** Aiding or abetting licensed persons to practice dental hygiene or dentistry unlawfully. (7-1-93)
- 04. Dividing Fees.** A dentist shall not divide a fee for dental services with another party, who is not a partner or associate with him in the practice of dentistry, unless: (7-1-93)
- a.** The patient consents to employment of the other party after a full disclosure that a division of fees will be made; (7-1-93)
- b.** The division is made in proportion to the services performed and responsibility assumed by each dentist or party. (7-1-93)
- 05. Controlled Substances.** Prescribing or administering controlled substances not reasonably necessary for, or within the scope of, providing dental services for a patient. In prescribing or administering controlled substances, a dentist shall exercise reasonable and ordinary care and diligence and exert his best judgment in the treatment of his patient as dentists in good standing in the state of Idaho, in the same general line of practice, ordinarily exercised in like cases. A dentist may not prescribe controlled substances for or administer controlled substances to himself. A dentist shall not use controlled substances as an inducement to secure or maintain dental patronage or aid in the maintenance of any person's drug addiction by selling, giving or prescribing controlled substances. (3-18-99)
- 06. Harassment.** The use of threats or harassment to delay or obstruct any person in providing evidence in any possible or actual disciplinary action, or other legal action; or the discharge of an employee primarily based on the employee's attempt to comply with the provisions of Title 54, Chapter 9, Idaho Code, or the Board's Rules, or to aid in such compliance. (7-1-93)
- 07. Discipline in Other States.** Conduct himself in such manner as results in a suspension, revocation or other disciplinary proceedings with respect to his license in another state. (3-18-99)
- 08. Altering Records.** Alter a patient's record with intent to deceive. (7-1-93)
- 09. Office Conditions.** Unsanitary or unsafe office conditions, as determined by the customary practice and standards of the dental profession in the state of Idaho and current recommendations of the American Dental Association and the Centers for Disease Control as referred to in Section 004. (7-1-93)
- 10. Abandonment of Patients.** Abandonment of patients by licensees before the completion of a phase of treatment, as such phase of treatment is contemplated by the customary practice and standards of the dental profession in the state of Idaho, without first advising the patient of such abandonment and of further treatment that is necessary. (7-1-93)
- 11. Use of Intoxicants.** Practicing dentistry or dental hygiene while under the influence of an intoxicant or controlled substance where the same impairs the dentist's or hygienist's ability to practice dentistry or hygiene with reasonable and ordinary care. (7-1-93)
- 12. Mental or Physical Illness.** Continued practice of dentistry or dental hygiene in the case of inability of the licensee to practice with reasonable and ordinary care by reason of one (1) or more of the following: (7-1-93)
- a.** Mental illness; (7-1-93)
- b.** Physical illness, including but not limited to, deterioration through the aging process, or loss of motor skill. (7-1-93)
- 13. Consent.** Revealing personally identifiable facts, data or information obtained in a professional capacity without prior consent of the patient, except as authorized or required by law. (3-18-99)

14. Scope of Practice. Practicing or offering to practice beyond the scope permitted by law, or accepting and performing professional responsibilities that the licensee knows or has reason to know that he or she is not competent to perform. (3-18-99)

15. Delegating Duties. Delegating professional responsibilities to a person when the licensee delegating such responsibilities knows, or with the exercise of reasonable care and control should know, that such a person is not qualified by training or by licensure to perform them. (3-18-99)

16. Unauthorized Treatment. Performing professional services that have not been authorized by the patient or his legal representative. (3-18-99)

17. Supervision. Failing to exercise appropriate supervision over persons who are authorized to practice only under the supervision of a licensed professional. (7-1-93)

18. Legal Compliance. Failure to comply with any provisions of federal, state or local laws, statutes, rules, and regulations governing or affecting the practice of dentistry. (3-30-07)

19. Exploiting Patients. Exercising undue influence on a patient in such manner as to exploit a patient for the financial or personal gain of a practitioner or of a third party. (7-1-93)

20. Misrepresentation. Willful misrepresentation of the benefits or effectiveness of dental services. (7-1-93)

21. Disclosure. Failure to advise patients or their representatives in understandable terms of the treatment to be rendered, alternatives, and disclosure of reasonably anticipated fees relative to the treatment proposed. (3-18-99)

22. Sexual Misconduct. Making suggestive, sexual or improper advances toward a patient or committing any lewd or lascivious act upon or with a patient. (7-1-93)

23. Patient Management. Use of unreasonable and/or damaging force to manage patients, including but not limited to hitting, slapping or physical restraints. (7-1-93)

24. American Dental Association Compliance. Failure by a dentist to comply with the American Dental Association, Principles of Ethics, Code of Professional Conduct and Advisory Opinions (ADA Code), as incorporated by reference in this chapter. (3-20-04)

25. American Dental Hygienists' Association Compliance. Failure by a dental hygienist to comply with the American Dental Hygienists' Association, Code of Ethics for Dental Hygienists (ADHA Code), as incorporated by reference in this chapter. (4-6-05)

041. -- 044. (RESERVED).

045. LICENSURE OF DENTAL SPECIALISTS (RULE 45).

01. Qualifications. Each applicant shall have a general license for the practice of dentistry in the state of Idaho or another state. Any applicant who desires to be licensed in one (1) of the Board recognized specialties, which include and are limited to Dental Public Health, Endodontics, Oral and Maxillofacial Pathology, Oral and Maxillofacial Radiology, Oral and Maxillofacial Surgery, Orthodontics, Pediatric Dentistry, Periodontics, and Prosthodontics, must be a graduate of and hold a certificate from both a dental school and a Graduate Training Program that are accredited by the Commission on Dental Accreditation of the American Dental Association. Any dentist licensed in Idaho who has met the educational requirements and standards approved by the Board, and who has practiced in a Board recognized specialty prior to February 1, 1992, may be granted a specialty license by the Board without undergoing examination. (4-6-05)

02. Application. Application for license to practice a recognized dental specialty must be filed in the office of the Board of Dentistry, Statehouse Mail, Boise, Idaho. The application must be attested before a notary

public. (7-1-93)

03. Examination. Specialty licensure in those specialties recognized may be granted solely at the discretion of the Idaho State Board of Dentistry. An examination covering the applicant's chosen field may be required and, if so, will be given by the Idaho State Board of Dentistry or its agent. Candidates who are certified by the American Board of that particular specialty as of the date of application for speciality licensure, and who meet the qualifications set forth in the Board's Rules, may be granted specialty licensure by Board approval. (3-20-04)

04. Limitation of Practice. No dentist shall announce or otherwise hold himself out to the public as a specialist unless he has first complied with the requirements established by the Idaho State Board of Dentistry for such specialty and has been issued a specialty license authorizing him to do so. Any individual granted a specialty license must limit his practice to the specialty(s) in which he is licensed. (3-20-04)

046. ADVERTISING (RULE 46).

Dentists and dental hygienists licensed to practice in Idaho may advertise in any medium or by other form of public communication so long as any such advertising is not false, deceptive, misleading or not readily subject to verification. In addition to any other applicable grounds, a violation of this advertising rule shall constitute and be considered as unethical and unprofessional conduct pursuant to the Idaho Dental Practice Act and this chapter. (3-20-04)

01. General Advertising Provisions. (3-20-04)

a. "Advertisement" shall mean any public communication, made in any form or manner whatsoever, about a licensee's professional services or qualifications for the purpose of soliciting business. "Advertising" or "advertise" shall mean holding out, broadcasting, mailing, publishing, transmitting, announcing, distributing or otherwise disseminating any advertisement, whether directly or indirectly through the efforts of another person or entity. Any sign soliciting business, whether at the location of the dental practice or otherwise, shall be considered as an advertisement. A licensee who engages or authorizes another person or entity to advertise for or on the licensee's behalf is responsible for the content of the advertisement unless the licensee can prove that the content of the advertisement was contrary to the licensee's specific directions. (3-20-04)

b. If the form or manner of advertising consists of or contains verbal communication to the public by television, radio, or other means, the advertisement shall be prerecorded and approved for broadcast by the licensee and a recording of the actual advertisement shall be retained by the licensee for a period of two (2) years. Upon receipt of a written request from the Board, a licensee shall provide any such recorded advertisement to the Board within five (5) working days. (3-20-04)

c. Any advertisement made under or by means of a fictitious or assumed business name or in the name of a professional service corporation shall be the responsibility of all licensees who are owners of the business or corporation. (3-20-04)

02. Prohibited Advertising. A licensee shall not advertise in any form or manner which is false, misleading or deceptive to the public or which is not readily susceptible to verification. False, misleading or deceptive advertising or advertising that is not readily susceptible to verification includes, but is not limited to, advertising that: (3-20-04)

a. Makes a material misrepresentation of fact or omits a material fact; (3-20-04)

b. Makes a representation likely to create an unjustified expectation about the results of a dental procedure; (3-20-04)

c. Compares a licensee's services with another licensee's services unless the comparison can be factually substantiated; (3-20-04)

d. Makes a representation that is misleading as to the credentials, education, or the licensing status of a licensee; (3-20-04)

e. Represents that the benefits of a dental insurance plan will be accepted as full payment when deductibles or copayments are required; (3-20-04)

f. Makes a representation that is intended to take advantage of the fears or emotions of a particularly susceptible type of patient; and (3-20-04)

g. Refers to benefits of dental procedures or products that involve significant risks without including realistic assessments of the safety and efficacy of those procedures or products. (3-20-04)

03. Specialty Advertising. The Board recognizes and licenses the following specialty areas of dental practice: Dental Public Health; Endodontics; Oral and Maxillofacial Pathology; Oral and Maxillofacial Radiology; Oral and Maxillofacial Surgery; Orthodontics; Pediatric Dentistry; Periodontics; and Prosthodontics. The specialty advertising rules are intended to allow the public to be informed about recognized dental specialties and specialization competencies of licensees and to require appropriate disclosures to avoid misperceptions on the part of the public. (4-6-05)

a. An advertisement shall not state that a licensee is a specialist, or specializes in a recognized specialty area of dental practice, or limits his practice to any recognized specialty area of dental practice unless the licensee has been issued a license or certification in that specialty area of dental practice by the Board. Use of words or terms in advertisements such as "Endodontist," "Pedodontist," "Pediatric Dentist," "Periodontist," "Prosthodontist," "Orthodontist," "Oral and Maxillofacial Pathologist," "Oral Pathologist," "Oral and Maxillofacial Radiologist," "Oral Radiologist," "Oral and Maxillofacial Surgeon," "Oral Surgeon," "Specialist," "Board Certified," "Diplomate," "Practice Limited To," and "Limited To Specialty Of" shall be prima facie evidence that the licensee is announcing or holding himself out to the public as a specialist or that the licensee specializes in a recognized area of dental practice. (4-6-05)

b. A licensee who has not been licensed or certified by the Board in a recognized specialty area of dental practice may advertise as being qualified in a recognized specialty area of dental practice so long as each such advertisement, regardless of form, contains a prominent disclaimer that the licensee is "licensed as a general dentist" or that the specialty services "will be provided by a general dentist." Any disclaimer in a written advertisement shall be in the same font style and size as that in the listing of the specialty area. (3-20-04)

c. A licensee shall not advertise as being a specialist in or as specializing in any area of dental practice which is not a Board recognized and licensed specialty area unless the advertisement, regardless of form, contains a prominent disclaimer that the advertised area of dental practice is not recognized as a specialty area of dental practice by the Idaho Board of Dentistry. Any disclaimer in a written advertisement shall be in the same font style and size as that in the listing of the specialty area. (3-20-04)

047. -- 049. (RESERVED).

050. CONTINUING EDUCATION FOR DENTISTS (RULE 50).

Effective October 1994, renewal of any active dental license will require evidence of completion of continuing education or volunteer dental practice that meets the following requirements. (4-6-05)

01. Requirements: (3-18-99)

a. All active dentists must hold a current CPR card. (7-1-93)

b. All active dentists shall acquire thirty (30) credits of continuing education in each biennial renewal period. One (1) credit is defined as one (1) hour of instruction. (3-30-07)

c. Continuing education must be oral health/health-related for the professional development of a dentist. The thirty (30) credits shall be obtained through continuing education courses, correspondence courses, college credit courses, and viewing of videotape or listening to other media devoted to dental education. (3-30-07)

d. A dentist holding an active status license issued by the Board shall be allowed one (1) credit of continuing education for every two (2) hours of verified volunteer dental practice performed during the biennial

renewal period up to a maximum of ten (10) credits. (3-30-07)

e. Any person who becomes licensed as an active dentist during any biennial renewal period shall be required at the time of the next successive license renewal to report a prorated amount of continuing education credits as specified by the Board. (3-30-07)

02. Documentation. In conjunction with license renewal, the dentist shall provide a list of continuing education credits obtained and verification of hours of volunteer dental practice performed and certify that the minimum requirements were completed in the biennial renewal period. (3-30-07)

051. CONTINUING EDUCATION FOR DENTAL HYGIENISTS (RULE 51).

Effective April 1994, renewal of any active dental hygiene license or dental hygiene license endorsement will require evidence of completion of continuing education or volunteer dental hygiene practice that meets the following requirements. (4-6-05)

01. Requirements for Renewal of an Active Status Dental Hygiene License: (4-6-05)

a. All active dental hygienists must hold a current CPR card. (6-2-92)

b. All active dental hygienists shall acquire twenty-four (24) credits of continuing education in each biennial renewal period. One (1) credit is defined as one (1) hour of instruction. (3-30-07)

c. Continuing education must be oral health/health-related education for the professional development of a dental hygienist. The twenty-four (24) credits shall be obtained through continuing education courses, correspondence courses, college credit courses, viewing of videotape or listening to other media devoted to dental hygiene education. (3-30-07)

d. A dental hygienist holding an active status license issued by the Board shall be allowed one (1) credit of continuing education for every two (2) hours of verified volunteer dental hygiene practice performed during the biennial renewal period up to a maximum of ten (10) credits. (3-30-07)

e. Any person who becomes licensed as an active dental hygienist during any biennial renewal period shall be required at the time of the next successive license renewal to report a prorated amount of continuing education credits as specified by the Board. (3-30-07)

02. Requirements for Renewal of an Extended Access Dental Hygiene License Endorsement. In addition to any other continuing education requirements for renewal of a dental hygiene license, a person granted an extended access dental hygiene license endorsement shall complete twelve (12) credits of continuing education in each biennial renewal period in the specific practice areas of medical emergencies, local anesthesia, oral pathology, care and treatment of geriatric, medically compromised or disabled patients and treatment of children. Any person who is issued an extended access dental hygiene license endorsement during any biennial renewal period shall be required at the time of the next successive license renewal to report a prorated amount of those continuing education credits required under this section as specified by the Board. (3-30-07)

03. Documentation. In conjunction with license and endorsement renewal, the dental hygienist shall provide a list of continuing education credits obtained and verification of hours of volunteer dental hygiene practice performed and certify that the minimum requirements were completed in the biennial renewal period. (3-30-07)

052. -- 053. (RESERVED).

054. DEFINITIONS (RULE 54).

For the purposes of these anesthesia rules, the following terms will be used, as defined below: (4-11-06)

01. Methods of Anxiety and Pain Control. (4-11-06)

a. Anxiolysis shall mean the process of the diminution or elimination of the patient's anxiety, apprehension or fear by the administration of a pharmacological agent that renders the patient relaxed but does not

impair the patient's ability to maintain normal mental abilities and vital functions. An oral sedative agent can be administered in the treatment setting or prescribed for patient dosage prior to the appointment. (4-11-06)

b. Conscious sedation shall mean a minimally depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command, and that is produced through the enteral or parenteral administration of a pharmacological or non-pharmacological method or a combination thereof. In accord with this particular definition, the drugs and/or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of conscious sedation. Oral sedative agents can be administered in the treatment setting or prescribed for patient dosage prior to the appointment. (4-11-06)

c. Deep sedation shall mean an induced state of depressed consciousness accompanied by partial loss of protective reflexes, including the inability to continually maintain an airway independently and/or to respond purposefully to physical stimulation or verbal command, and that is produced by a pharmacological or non-pharmacological method or a combination thereof. (4-11-06)

d. General anesthesia shall mean an induced state of unconsciousness accompanied by a partial or complete loss of protective reflexes, including the inability to continually maintain an airway independently and respond purposefully to physical stimulation or verbal command, and that is produced by a pharmacological or non-pharmacological method or a combination thereof. (4-11-06)

e. Local anesthesia shall mean the elimination of sensation, especially pain, in one (1) part of the body by the topical application or regional injection of a drug. (4-11-06)

f. Nitrous oxide inhalation analgesia shall mean an induced controlled state of minimally depressed consciousness, produced solely by the inhalation of a combination of nitrous oxide and oxygen, in which the patient retains the ability to independently and continuously maintain an airway and to respond purposefully to physical stimulation and to verbal command. (4-11-06)

02. Sedation Terms. (4-11-06)

a. Advanced Cardiac Life Support (ACLS) shall mean an advanced cardiac life support course offered by a recognized accrediting organization. (4-11-06)

b. Monitor or monitoring shall mean the direct clinical observation of a patient during the administration of anesthesia by a person trained to observe the physical condition of the patient and capable of assisting with emergency or other procedures. (4-11-06)

c. Operator shall mean the supervising dentist or another person who is authorized by these rules or holds a permit to induce and administer the proper level of anesthesia/sedation. (4-11-06)

d. Titration shall mean the administration of small incremental doses of a drug until a desired clinical effect is observed. (4-11-06)

03. Routes of Administration. (4-11-06)

a. Enteral. Any technique of administration in which the agent is absorbed through the gastrointestinal (GI) tract or oral mucosa (i.e., oral, rectal, sublingual). (4-11-06)

b. Inhalation. A technique of administration in which a gaseous or volatile agent is introduced into the pulmonary tree and whose primary effect is due to absorption through the pulmonary bed. (4-11-06)

c. Parenteral. A technique of administration in which the drug bypasses the gastrointestinal (GI) tract (i.e., intramuscular (IM), intravenous (IV), intranasal (IN), submucosal (SM), subcutaneous (SC), intraocular (IO)). (4-11-06)

d. Transdermal/transmucosal. A technique of administration in which the drug is administered by patch or iontophoresis. (4-11-06)

055. ANXIOLYSIS (RULE 55).

Persons licensed to practice dentistry in accordance with the Idaho Dental Practice Act and these rules may administer medication to patients for the purpose of relieving anxiety so long as the medication is given in a dosage that is within the current guidelines set forth for anxiolytic dosage on the manufacturer's package insert or other recognized drug reference and does not induce a state of depressed consciousness to the level of general anesthesia, deep sedation, or conscious sedation in the patient. (4-11-06)

01. Patient Safety. The administration of anxiolytics by means of titration or in combination with nitrous oxide inhalation analgesia is permissible so long as it does not produce an alteration of the state of consciousness in a patient to the level of conscious sedation, deep sedation or general anesthesia. A dentist must first qualify for and obtain the appropriate permit from the Board of Dentistry to be authorized to sedate patients to the level of conscious sedation, deep sedation or general anesthesia. Nitrous oxide inhalation analgesia shall not be used in combination with anxiolytic medication except during the limited period of time required to administer a local anesthetic. Notwithstanding any other provision in these rules, a dentist shall initiate and regulate the administration of nitrous oxide inhalation analgesia when used in combination with anxiolysis. (4-11-06)

02. Personnel. A patient sedated for anxiolytic purposes in the dental office shall be monitored by an assistant trained in basic life support to observe appropriate physiologic parameters and assist in any support or resuscitation measures required. (4-11-06)

056. LOCAL ANESTHESIA (RULE 56).

Persons licensed to practice dentistry and dental hygiene in accordance with the Idaho Dental Practice Act and these rules are not required to obtain a permit to administer local anesthesia to patients. Dental offices in which local anesthesia is administered to patients shall, at a minimum, have and maintain suction equipment capable of aspirating gastric contents from the mouth and pharynx, a portable oxygen delivery system including full face masks and a bag-valve mask combination capable of delivering positive pressure, oxygen-enriched ventilation to the patient, a blood pressure cuff of appropriate size and a stethoscope. (4-11-06)

057. NITROUS OXIDE INHALATION ANALGESIA (RULE 57).

Persons licensed to practice dentistry and dental hygiene and dental assistants certified in accordance with the Idaho Dental Practice Act and these rules are not required to obtain a permit to administer nitrous oxide inhalation analgesia to patients. Nitrous oxide inhalation analgesia when used in combination with other sedative agents may produce an alteration of the state of consciousness in a patient to the level of conscious sedation, deep sedation or general anesthesia. A dentist must first qualify for and obtain the appropriate permit from the Board of Dentistry to be authorized to sedate patients to the level of conscious sedation, deep sedation or general anesthesia. (4-11-06)

01. Patient Safety. In connection with the administration of nitrous oxide inhalation analgesia, a dentist shall: (4-11-06)

a. Evaluate the patient to insure that the patient is an appropriate candidate for nitrous oxide inhalation analgesia; (4-11-06)

b. Insure that any patient under nitrous oxide inhalation analgesia shall be monitored for such matters as response to verbal stimulation, oral mucosal color and vital signs; (4-11-06)

c. Insure that a second person shall be on the office premises who can immediately respond to any request from the person administering the nitrous oxide inhalation analgesia; and (4-11-06)

d. Insure that a qualified person is continuously monitoring the patient. (4-11-06)

02. Required Facilities and Equipment. Dental offices in which nitrous oxide sedation is administered to patients shall, at a minimum and in addition to emergency medications, maintain appropriate facilities and have equipment on site for immediate use as follows: (4-11-06)

- a.** A nitrous oxide delivery system with a fail-safe mechanism that will insure appropriate continuous oxygen delivery and a scavenger system; (4-11-06)
- b.** An operating room sufficiently large to accommodate the patient and allow for delivery of appropriate care in an emergency situation; (4-11-06)
- c.** Suction equipment capable of aspirating gastric contents from the mouth and pharynx; (4-11-06)
- d.** A portable oxygen delivery system including full face masks and a bag-valve mask device capable of delivering positive pressure, oxygen-enriched ventilation to the patient; and (4-11-06)
- e.** An appropriately sized measuring device for taking a patient's blood pressure. (4-11-06)
- 03. Personnel.** For nitrous oxide administration, personnel shall include: (4-11-06)

 - a.** An operator; and (4-11-06)
 - b.** An assistant trained in basic life support to monitor appropriate physiologic parameters and assist in any support or resuscitation measures required (the operator and the assistant may be the same person). (4-11-06)
 - c.** Auxiliary personnel must have documented training in basic life support, shall have specific assignments, and shall have current knowledge of the emergency cart inventory. The practitioner and all office personnel must participate in periodic reviews of office emergency protocol. (4-11-06)

058. -- 059. (RESERVED).

060. ADMINISTRATION OF CONSCIOUS SEDATION (RULE 60).

Dentists licensed in the state of Idaho cannot use conscious sedation in the practice of dentistry unless they have obtained the proper conscious sedation permit from the Idaho State Board of Dentistry. A conscious sedation permit may be either limited or comprehensive. A limited conscious sedation permit authorizes dentists to administer conscious sedation by either enteral or combination inhalation-enteral routes of administration. A comprehensive conscious sedation permit authorizes a dentist to administer conscious sedation by enteral, combination inhalation-enteral or parenteral routes of administration. A dentist shall not administer conscious sedation to children under eighteen (18) years of age unless they have qualified for and been issued a comprehensive conscious sedation permit. (4-11-06)

01. Requirements for a Limited Conscious Sedation Permit. To qualify for a limited conscious sedation permit, a dentist applying for a permit must complete training in the use and administration of conscious sedation drugs to a level consistent with that prescribed in Part I and Part III of the American Dental Association's "ADA Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry," as incorporated in Section 004 in these rules. The five (5) year requirement regarding the required training for a limited conscious sedation permit shall not be applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the application date. To obtain a limited conscious sedation permit, a dentist must provide certification of the following: (4-11-06)

- a.** Completion of an American Dental Association accredited post-doctoral training program within five (5) years of the date of application for a limited conscious sedation permit that included documented training of a minimum of eighteen (18) hours of didactic education plus twenty (20) clinically-oriented experiences which provided competency in enteral and combination inhalation-enteral conscious sedation. Clinically-oriented experiences may include either supervised administration or group observations on patients undergoing enteral or combination inhalation-enteral conscious sedation; or (4-11-06)

- b.** Completion of a Board of Dentistry approved course of instruction within five (5) years of the date of application for a limited conscious sedation permit that included documented training of a minimum of eighteen (18) hours of didactic education plus twenty (20) clinically-oriented experiences which provided competency in enteral and combination inhalation-enteral conscious sedation. Clinically-oriented experiences may include either supervised administration or group observations on patients undergoing enteral or combination inhalation-enteral

conscious sedation; and (4-11-06)

c. Proof of completion and current certification of Advanced Cardiac Life Support training or its equivalent. (4-11-06)

02. Requirements for a Comprehensive Conscious Sedation Permit. A dentist applying for a permit to administer comprehensive conscious sedation shall provide proof that the dentist has received formal training and certification in the use of conscious sedation drugs as described in the "Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry," published by the American Dental Association and incorporated by reference into these rules within the five (5) year period immediately prior to the date of application for a comprehensive conscious sedation permit. The five (5) year requirement shall not be applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the date of application. The formal training program shall: (4-11-06)

a. Be sponsored by or affiliated with a dental school accredited by the Commission on Dental Accreditation of the American Dental Association or a teaching hospital or facility approved by the Board of Dentistry; and (4-5-00)

b. Consist of a minimum of sixty (60) hours didactic education and twenty (20) hours patient contact. Patient contact includes the administration of the intravenous (IV) sedation and management by the participant from induction through emergence. (3-18-99)

c. Include the issuance of a certificate of successful completion that indicates the type, number of hours, and length of training received. (3-18-99)

d. In addition, the dentist must show proof of current certification of Advanced Cardiac Life Support training or its equivalent. (3-15-02)

03. General Requirements for Limited and Comprehensive Conscious Sedation Permits. (4-11-06)

a. Facility Requirements. The dentist must have a properly equipped facility for the administration of conscious sedation staffed with a dentist-supervised team of auxiliary personnel capable of reasonably handling procedures, problems, and emergencies incident thereto. Adequacy of the facility and competence of the anesthesia team will be determined by evaluators appointed by the Idaho State Board of Dentistry. (3-18-99)

b. Personnel. For conscious sedation, the minimum number of personnel shall be two (2) including: (10-1-87)

i. The operator; and (10-1-87)

ii. An assistant trained to monitor appropriate physiologic parameters and assist in any support or resuscitation measures required. (10-1-87)

iii. Auxiliary personnel must have documented training in basic life support, shall have specific assignments, and shall have current knowledge of the emergency cart inventory. The practitioner and all office personnel must participate in documented periodic reviews of office emergency protocol, including simulated exercises, to assure proper equipment function and staff interaction. (3-18-99)

c. Permit Renewal. Renewal of the permit will be required every five (5) years in conjunction with the routine dental licensure renewal. Proof of a minimum of twenty-five (25) credit hours continuing education in conscious sedation will be required to renew a permit. A fee shall be assessed to cover administrative costs. (4-2-03)

d. Reinstatement. A dentist may make application for the reinstatement of an expired or surrendered permit issued by the Board under this rule within five (5) years of the date of the permit's expiration or surrender. Applicants for reinstatement of a permit shall satisfy the facility and personnel requirements of this rule and shall be required to verify that they have obtained an average of five (5) credit hours of continuing education in conscious

sedation techniques for each year subsequent to the date upon which the permit expired or was surrendered. A fee for reinstatement shall be assessed to cover administrative costs. (4-2-03)

061. GENERAL ANESTHESIA AND DEEP SEDATION (RULE 61).

Dentists licensed in the state of Idaho cannot use general anesthesia or deep sedation techniques in the practice of dentistry unless they have obtained the proper permit from the Idaho State Board of Dentistry by conforming with the following conditions: (10-1-87)

01. General Requirements. A dentist applying for a permit to administer general anesthesia and deep sedation shall provide proof that the dentist: (10-1-87)

a. Has completed a minimum of one (1) year of advance training in anesthesiology and related academic subjects beyond the undergraduate dental school level within the five (5) year period immediately prior to the date of application for a permit. The five (5) year requirement shall not be applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the date of application. This training is described in Part II of the "Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry," as incorporated by reference in Section 004 of these rules; or (4-11-06)

b. Is a diplomate of the American Board of Oral and Maxillofacial Surgery; or (10-1-87)

c. Is a member of the American Association of Oral and Maxillofacial Surgeons; or (10-1-87)

d. Is a Fellow of the American Dental Society of Anesthesiology; and (4-5-00)

e. Has current Certification of Advanced Cardiac Life Support Training or its equivalent; and (3-15-02)

f. Has an established protocol or admission to a recognized hospital. (3-18-99)

02. Facility Requirements. The dentist must have a properly equipped facility for the administration of general anesthesia, staffed with a dentist-supervised team of auxiliary personnel capable of reasonably handling procedures, problems, and emergencies incident thereto. Adequacy of the facility and competence of the anesthesia team will be determined by evaluators appointed by the Board. The Board adopts the standards incorporated by reference in Section 004 of these rules, regarding approval of equipment within the facility as set forth by the American Association of Oral and Maxillofacial Surgeons in their office anesthesia evaluation manual. (4-11-06)

03. Personnel. For general anesthesia and deep sedation techniques, the minimum number of personnel shall be three (3) including: (10-1-87)

a. A qualified person to direct the sedation as specified in Section 061 of this rule; and (4-11-06)

b. A qualified person whose primary responsibilities are observation and monitoring of the patient and who has documented current CPR certification; and (3-18-99)

c. An assistant for the operator who has documented current CPR certification. (3-18-99)

04. Conscious Sedation. A dentist holding a permit to administer general anesthesia under this rule may also administer conscious sedation. (3-18-99)

05. Permit Renewal. Renewal of the permit will be required every five (5) years in conjunction with the routine dental licensure renewal. Proof of a minimum of twenty-five (25) credit hours of continuing education in general anesthesia and deep sedation techniques will be required to renew a permit. A fee shall be assessed to cover administrative costs. (4-2-03)

06. Reinstatement. A dentist may make application for the reinstatement of an expired or surrendered permit issued by the Board under this rule within five (5) years of the date of the permit's expiration or surrender. Applicants for reinstatement of a permit shall satisfy the facility and personnel requirements of this rule and shall be

required to verify that they have obtained an average of five (5) credit hours of continuing education in general anesthesia and deep sedation techniques for each year subsequent to the date upon which the permit expired or was surrendered. A fee for reinstatement shall be assessed to cover administrative costs. (4-2-03)

062. USE OF OTHER ANESTHESIA PERSONNEL (RULE 62).

Dentists performing dental procedures in a dental office who utilize the services of an anesthesiologist, a certified registered nurse anesthetist (CRNA), or another dentist with an anesthesia permit, must possess an anesthesia permit required under these rules for the level of anesthesia being provided to the patient. (4-5-00)

063. INCIDENT REPORTING (RULE 63).

Any anesthesia permit holder shall report to the Board, in writing, within seven (7) days after the death or transport to a hospital or emergency center for medical treatment for a period exceeding twenty-four (24) hours of any patient to whom conscious sedation or general anesthesia was administered. (3-18-99)

064. SUSPENSION, REVOCATION OR RESTRICTION OF ANESTHESIA PERMIT (RULE 64).

The Board may, at any time and for just cause, institute proceedings to revoke, suspend, or otherwise restrict an anesthesia a permit issued pursuant to Sections 060 and 061 of these rules. If the Board determines that emergency action is necessary to protect the public, summary suspension may be ordered pending further proceedings. Proceedings to suspend, revoke or restrict a permit shall be subject to applicable statutes and rules governing administrative procedures before the Board. (3-18-99)

065. DETERMINATION OF DEGREE OF SEDATION BY THE BOARD (RULE 65).

in any matter under review or in any proceeding being conducted in which the Board must determine the degree of sedation or level of consciousness of a patient, the Board may base its findings or conclusions on, among other matters, The following: (4-11-06)

01. Medication and Dosage. The type and dosage of medication(s) that was administered to the patient as well as the route of administration of the medication(s); and (4-11-06)

02. Expected Results. The result that can reasonably be expected from the medication(s) administered when considering the physical and psychological status of the patient. (4-11-06)

066. -- 999. (RESERVED).

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