

Nebraska Board of Dentistry

Newsletter

January 2008

Chairperson's Message

Dear Colleagues:

I would like to introduce to you the two new members of the Board of Dentistry. They have been on the Board for almost a year now and have been very active and helpful members with the decision process of the Board:

Professional Member - Dr. John Ahlschwede
and
Dental School Member – Dr. Terrence Wilwerding

They replace Dr. James Murphy, the Professional Board member and Dr. Paul Tamisiea, the Dental School representative from Creighton University. We would like to thank Dr. Murphy and Dr. Tamisiea for their 10 years of dedicated service to the Board of Dentistry.

Over the past year the Board of Dentistry has been very busy with updating: Expanded functions for dental auxiliaries; Practice Act changes; Expanding Continuing Education acceptance and numerous other topics. The Enteral Conscious Sedation Committee disbanded and a new "Anesthesia Committee" was developed. This committee, chaired by Dr. Ahlschwede, will update all aspects of anesthesia and sedation in our profession. One of the most difficult duties of the Board of Dentistry is the disciplinary process. Nothing is more difficult than disciplining a fellow colleague. Please read the different articles within this newsletter. They will hopefully prevent the need for disciplinary action. The Board's primary goal is the health, safety and welfare of the citizens of Nebraska.

On behalf of the Board of Dentistry, I would like to wish each and every one of you a healthy and safe New Year. In a different section of the newsletter are some "Resolutions for Dental Professionals." If we try to incorporate these resolutions into our lives, they may help us to improve ourselves along with our profession.

Sincerely,



David Mlnarik, DDS
2006 Chairperson
West Point

Sam Jacoby, DDS
2006 Vice-Chairperson
Bridgeport

Doris Schrader
2006 Secretary
York

Judith Kissell, PhD
Omaha

Jane Lott, RDH
York

Jane Stratman, RDH
Geneva

Terrence Wilwerding, DDS
Omaha

John Ahlschwede, DDS
Central City

R. Mark Hinrichs, DDS
Lincoln

Julie Marshall, DDS
Lincoln

Introducing Two New Board Members

Terrence Wilwerding, DDS – I was born and raised in Omaha, and attended Creighton University and the Creighton University School of Dentistry, graduating in 1977. I began teaching Fixed Prosthodontics at Creighton in 1981. Besides teaching, I have a small private practice in Omaha. Aside from prosthodontics, I also teach dental history, and recently finished writing a book about the first hundred years of the Creighton Dental School. I obtained a Master's degree in education in 2000, and am presently finishing another Master's degree in counseling. I am on a number of local boards, and direct the One World Community Health Center's night dental clinics at Creighton. My wife Susan and I have two children, Steve and Julie. My hobbies include flying, boating and motorcycles.

John Ahlschwede, DDS – My journey in dentistry started with graduation in 1972 from UNMC. We were the first class to spend all four years in the new facility. I served two years in the foreign country of Alabama. Well, it was foreign to me and my wife, Judy. In 1974, we came back to our roots and purchased a practice in Central City. In the eighties I spent time at the Pankey Institute, in the nineties I spent time with committees and positions within the Nebraska Dental Association. During the 2000s, I have reached the pinnacle of my career. I have become a grandparent. My wife and I have a fairly unusual family. We know who our kids are by who shows up for the holidays and gives us enough notice so we find room for them on the floor. Our grandkids are very much the focus of our lives and we are blessed to have them fairly close.

My efforts in dentistry have mainly been around helping the disadvantaged in our own state. During my tenure of organized dentistry we have rebuilt the Medicaid program and defended it at the legislative level, brought the annual Mission of Mercy to the state where over 4,000 people have had some type of dental service done. During my term as president of the state association my motto was "How may we help?" To this day, I try to live with the values of serving those I not only represent, but also those who need our services.

My hobbies are reading, fishing when there is time, and trying to find places cell phones don't reach. My ideal day is finding a fishing hole where cell phones don't reach. One might also add dentistry is now my hobby. The people I have met over the years and will meet in the future are some of the most dedicated people on this earth. My wife Judy is my teacher on how life should be lived and why we are on this planet. I only hope I have been a good student.

Advertising and the Board

By Mark Hinrichs, DDS

As a friendly reminder, we would like to reiterate the ethical and professional responsibility of dentists and advertising.

Recently, several advertising-related cases have been brought to the attention of the Board containing misleading information in newspapers and yellow pages.

Below are some suggestions to help you avoid an investigation.

1. Specialists- If you are a specialist you can advertise as one. It is against state regulations to allow non-specialists to advertise as specialists.
2. Misleading statements- Making false claims about procedures or products. It is against state regulations to allow misleading statements to be made.
3. Non-Credentialed Degrees/Fellowships- Although Fellowships often come with enormous study and personal sacrifice, if it is not an ADA-recognized degree, currently you cannot use the fellowship letters behind your name in your advertising.
4. All advertisements must have your name attached within the print. It is not acceptable to list a practice name or location only.

These rules are listed in 172 NAC 54 Regulations Governing the Professional Advertising by Dentists. These regulations can be found on the Department's website at

<http://www.dhhs.ne.gov/crl/medical/dent/Dentist/Dentist.htm#Rules> .

It is the responsibility of the individual license holder to approve and accept all advertising placed on their behalf. If you work for a clinic, group or corporately run practice, it is your license on the line even if someone else places your ad. Read the contract and make sure it protects you from fraudulent advertising. Make sure you know where your ad/name is going to be placed in the yellow pages.



Mandatory Reporting

By Terrence Wilwerding, DDS

An area that continues to generate disciplinary action is mandatory reporting. A comprehensive list of mandatory reporting requirements may be found at: <http://www.hhs.state.ne.us/reg/INVEST-P.HTM#What>

In general, all reports must be made within 30 days of the occurrence. Some of the incidents that a professional is required to report about another professional include: 1) practicing without a license, permit, registration or certificate, 2) demonstrating gross incompetence, or 3) practicing while impaired by drugs or alcohol or other disabilities.

Incidents which professionals are required to SELF report include: 1) disciplinary actions, 2) loss of employment, loss of membership in a professional organization or loss of privileges in a health care facility due to incompetence, negligence, unethical or unprofessional conduct, or due to chemical, mental or physical impairments, 3) adverse actions pertaining to liability, and 4) licensure denials or discipline in another state or jurisdiction, and 5) a conviction of a misdemeanor or a felony.

The Board of Dentistry reviews a number of investigations where a dentist or dental hygienist has failed to report a misdemeanor or a felony conviction. For those of us without legal training, this requirement can be confusing.

In general, felonies are serious crimes, and misdemeanors are less serious crimes. Both felonies and misdemeanors can be punishable by imprisonment, probation, fines, or a combination of these.

A third type of law violation is the infraction which includes citations such as speeding tickets. An infraction generally is punishable by a fine only.

The Board reviews a number of investigations where a dentist or dental hygienist fails to report a conviction to the Department as required because they thought the violation was an infraction when they were actually convicted of a misdemeanor. If you have been convicted of a law violation, it is important to find out whether it is an infraction, a misdemeanor or a felony for mandatory reporting purposes. For help identifying a law violation, you may want to contact the court, the county attorney, law enforcement or your attorney. If you are in doubt, report the violation to the Department within thirty days.

Meeting Highlights From 2006 & 2007

January 13, 2006 – The Board reviewed and discussed the changes to the Uniform Licensing Law (ULL) rewrite documents, which include changes to the Dentistry Practice Act. The Board also discussed expanded functions for dental assistants.

April 21, 2006 – The Board discussed alternatives for expanding continuing education acceptance, enteral conscious sedation, practice act changes, and expanded duties for dental assistants. The Nebraska Dental Hygiene Association (NDHA) requested clarification of §71-193.15. The Board referred the NDHA to the Department.

July 28, 2006 – The Board discussed updates from the Enteral Conscious Sedation Committee, the Expanded Duties for Dental Assistants Committee, and the Alternatives for Expanding CE Acceptance Committee. The Board approved an increase in the fees for initial licensure and renewal for dentists, dental hygienists and all three levels of anesthesia permits for dentists.

October 6, 2006 – The Board reviewed the Uniform Licensing Law (ULL) rewrite draft language. The Board also discussed whether the regional clinical examinations are equivalent to the ADEX examination given by the Central Regional Dental Testing Service (CRDTS). They also discussed the continued acceptance of the regional clinical examinations.

January 12, 2007 – The Board focused on enteral conscious sedation, alternatives for expanding continuing education acceptance, practice act changes, and expanded duties for dental assistants. A stakeholder's meeting for expanding dental assistant duties was scheduled for February 21, 2007.

March 23, 2007 – The Board reviewed pending legislation, which included the ULL rewrite language and the bills introduced by the Nebraska Dental Association (NDA) and the NDHA that addressed allowing dental hygienists to work in public health settings without the supervision of dentists. The Board approved draft language for 172 NAC 53 Regulations Governing the Performance of Duties by Licensed Dental Hygienists and Other Dental Auxiliaries. The draft regulations will be set for a public hearing. Dr. Bavitz requested that the Board look into revising the dental anesthesia statutes.

July 13, 2007 – The Board reviewed comments from the public hearing held on 172 NAC 53 Regulations Governing the Performance of Duties by Licensed

Dental Hygienists and Other Dental Auxiliaries. Dr. Ahlschwede will schedule a meeting with the anesthesia sub-committee to discuss changes needed in the dental anesthesia statutes. A public hearing was scheduled for August 2, 2007, for the proposed changes to 172 NAC 56 Regulations Governing the Practice of Dentistry.

October 12, 2007 – There was a report from the Anesthesia Sub-committee. The Department explained to the Board how the changes to the ULL will be implemented. The Board also reviewed the draft American Dental Hygienists Association (ADHA) standards for clinical dental hygiene practice and competencies for advanced dental hygiene practitioners.

Minutes are available on the Department website at: <http://www.dhhs.ne.gov/crl/brdminutes.htm#Dental>

The Disciplinary Process in Nebraska

By Charlene Kelly, PhD, RN, FRE, Administrator, Office of Nursing and Nursing Support

A frequent question is: "Why does it take so long for the Department to discipline a license?" The disciplinary process is established in the Uniform Licensure Law. **The process used is the same for individuals in all of the licensed professions.** The process is designed to protect the public from unsafe practitioners while allowing due process for the licensee. The disciplinary process involves the following steps:

1. **A complaint is received.** Complaints can arise from a variety of sources including employers, coworkers, patients, family members and medical record reviews. Anyone with a complaint is asked to put their complaint into writing using the form that can be found on the department's Web site at www.dhhs.ne.gov. Click on the drop-down list under "How Do I" and select "file a complaint against a licensed individual."
2. **The complaint is screened.** The Investigations Unit screens complaints with the assistance of board representatives from the various professions. Factors considered when a complaint is screened include: Is there enough information in the complaint on which to base an investigation? Has the complainant identified themselves? Anonymous complaints are sometimes opened if the complaint alleges a serious violation and enough information is provided to open an investigation. Is what is

alleged to have occurred a violation of the law? For example, complaints that involve disputes between employees certainly disrupt the workplace, but usually do not involve violations of the law. Is the alleged violation serious enough to warrant investigation? The department does not have the resources to investigate every complaint that is received. Sometimes the licensee or his/her employer has taken steps to prevent the incident from occurring again and it is not necessary for the department to intervene. The department may contact the complainant or the person complained against for additional information before deciding whether to open a complaint. If the complaint is not opened the complainant is notified. The complainant then has the option to ask the board for the profession to determine if the complaint should be opened.

3. **The complaint is opened for investigation.** The complaint is assigned to an investigator for investigation. All complaints against nurses are investigated by a licensed nurse. Each complaint is assigned a priority depending on the risk that continued practice by the person against whom the complaint was filed poses to the public. Investigators have a heavy caseload of complaints that they are working on at any point in time. Unless the complaint is assigned a high priority, it could be several weeks before the investigator starts working on a complaint. The role of the investigator is to objectively obtain all of the relevant facts surrounding the case. This involves interviewing the complainant, the licensee against whom the complaint was made and any other individuals with first-hand knowledge of the incident. It also involves reviewing records and sometimes collecting physical evidence. After all of the interviews are completed and all of the information has been collected, the investigator writes a report summarizing the findings. The completion of the investigation can take up to several weeks depending on the number of people that need to be interviewed and their availability, the quantity of records to be reviewed and the amount of other information that needs to be obtained. The report is forwarded to the appropriate board for review at their next meeting. Boards meet at varying intervals. The Board of Nursing meets monthly and reviews all investigation reports completed since their last meeting.
4. **The board reviews the investigative report.** The board reviews and discusses investigative report in closed session. Complaints, investigations and the review of the

investigation reports are all confidential. This is necessary to protect the licensee against whom the complaint was filed. Not all complaints are based on facts and sometimes evidence cannot be obtained to substantiate a complaint. If a complaint is unfounded or cannot be proven it does not become a matter of public record. After review and discussion the board makes a recommendation to the Attorney General regarding disposition of the case. The board has the following options: They can recommend that the case be closed. They can ask that additional information be obtained prior to making a recommendation. They can recommend that the licensee be asked to sign an Assurance of Compliance agreeing to cease the behavior/activity that resulted in the complaint. (An Assurance of Compliance is non-disciplinary action and as such is not reportable to the National Practitioner Data Bank. It is, however, a matter of public record and will remain on the licensee's license record indefinitely.) They can recommend that a petition be filed. (A petition is a formal charge alleging a violation of one or more laws governing the profession.) If the board recommends that a petition be filed, they are also asked to recommend an appropriate disposition (punishment) for the violation. These recommendations can range from as little as a censure to the maximum recommendation of revocation of the license. Other recommendation between these two extremes could include a civil penalty (fine), probation with specific terms or suspension of the license.

5. **The Assistant Attorney General reviews the investigative information.** The Board of Nursing makes a disciplinary recommendation following their review of all investigative information related to a complaint. The Board's recommendation and the completed investigative file are forwarded to the Attorney General. The case is assigned to an Assistant Attorney General (AAG) who works with the Board of Nursing. While the AAG relies heavily on the recommendation of the board, he/she has independent prosecutorial authority to take action or decline to take action. This means that after a review of all of the investigative file and the board's recommendation, the AAG makes an independent determination as to whether a statute or regulation was violated, whether charges should be filed, and the appropriate disposition. If the AAG determines that the case should be closed, the process ends there. If the AAG determines that an

Assurance of Compliance (AOC) is warranted, the AOC is drafted and the licensee is asked to sign it. The AOC is then filed with the department where it becomes a matter of public record. An AOC is not considered to be a disciplinary action. If the AAG determines that charges should be filed he/she proceeds to the next step.

6. **The Assistant Attorney General contacts the licensee.** Generally, the AAG sends the petition, a proposed agreed settlement, a voluntary appearance and a letter to the licensee. The possible sanctions are: censure, probation; civil penalty up to \$20,000, limitation of license, suspension of license, or revocation of license. The licensee or his/her attorney may confer with the AAG at this time to negotiate a settlement. If the licensee signs the Agreed Settlement, there is no need for a formal public hearing if the Chief Medical Officer approves the Agreed Settlement.
7. **The Assistant Attorney General files a petition for disciplinary action.** If the licensee chooses not to sign the Agreed Settlement, the AAG files a petition for disciplinary action. A copy of the petition and a notice of hearing is mailed by certified mail to the licensee by the department. The department delays placing the petition in the public document file for five days to allow time for the licensee to receive the petition before it becomes public. This is the first "public" step in the process. Prior to this point in time all of the steps in the process are done with strict confidentiality. A petition for disciplinary action is a document that identifies the laws and regulations that the licensee is alleged to have violated and sets forth the facts in the case as determined through the investigation.
8. **A hearing is held.** If there is no Agreed Settlement, a hearing is held. The hearing is scheduled to be held not less than 30 nor more than 60 days after the filing of the petition. It is not uncommon for licensees or their attorney to request a continuance. A continuance is a request for additional time prior to the hearing. Common reasons for requesting a continuance include personal circumstances that prevent the licensee from appearing on the scheduled date or the need for more time by the licensee's attorney to prepare for the hearing. The request for continuance is made to the Department, which can either approve or deny the request. Initial requests for continuance are nearly always granted. But if the licensee

or his/her attorney has requested repeated continuances, the Department may deny the request and force a hearing date. The hearing is administrative in nature. The laws and procedures that govern it are different from a criminal hearing. The hearing is conducted by an Administrative Hearing Officer. The hearing officer's role is to ensure that the legal procedures are followed and that both parties have ample opportunity to present their case. The hearing is open to the public. The AAG represents the state, and the licensee can either be represented by an attorney or choose not to hire an attorney and speak on their own behalf. During the hearing the AAG will offer evidence that the licensee violated laws or regulations and recommend what the sanctions should be. The licensee or his/her attorney may dispute the evidence, offer additional evidence that supports the licensee's actions or provide mitigating information that places a different light on the case. Both sides may have witnesses to corroborate or refute the evidence. A court reporter is present at the hearing, and a transcript of the hearing is prepared. Most hearings take less than two hours, but very complex cases with numerous witnesses may take several days.

9. **The Chief Medical Officer makes the decision.** In Nebraska the Chief Medical Officer in the Department of Health and Human Services is the final decision-maker when a petition has been filed against a licensee. The current Chief Medical Officer is Dr. Joann Schaefer. She will review the facts offered in the petition and the Agreed Settlement if one was negotiated. She will review the transcript of the hearing if one was held. Following review and deliberation, she will enter an order that sets forth what violation the licensee has committed and what is to happen to the license. The Chief Medical Officer's order can range from dismissing the case to revoking the license. It may include one or more of the other provisions that were discussed earlier. The order of the Chief Medical Officer is final unless the licensee decides to appeal the decision. Appeal is to the Lancaster County District Court.

Barring imminent danger to the public, the licensee has an active license and can continue to practice while this process is occurring. There is a provision for an immediate suspension of a license if a licensee is determined to be an immediate threat to public safety if he/she is allowed to continue to

practice. These immediate suspensions occur infrequently.

Considering all the steps that must occur before disciplinary action can be taken, it is easy to understand why the time from receipt of a complaint to final order can be quite long.

A disciplinary chart can be viewed at <http://www.dhhs.ne.gov/crl/discproc.pdf>



Resolutions for Dental Professionals

The following are resolutions that dental professionals can make for the New Year to improve themselves and the dental profession. Some of these apply more to dentist than dental hygienist or dental assistants, but everyone can learn from all of them:

- Become familiar with the scope of practice for your profession and/or the scope of practice of the employees under your supervision.
- Do not perform duties outside of your scope of practice and/or delegate duties to your employees that are not within their scope of practice.
- Do not practice without a current license/registration/certification/permit issued by the Nebraska Board of Dentistry and employers; do not allow any of your employees to practice without a current license/registration/certification/permit.
- Keep your and your employees' credentials available in an office or place in which he or she practices and show such proof of credentialing upon request.
- Review the advertisements for your practice to be sure that the information is not misleading or in violation of 172 NAC 54 Regulations Governing Professional Advertising by Dentists.
- Communicate clearly and respectfully with all patients, staff and colleagues. If you are uncomfortable with communicating or do not seem to be communicating clearly, consider attending a

course to improve your communication skills.

NOTE: Some courses may **not** qualify as acceptable continuing education.

- Make sure all patients understand their options, the risks and benefits, the cost of each option, and give informed consent for treatment before treatment begins.
- Listen to patients and staff. Listen to their concerns and problems with an open mind.
- Never hesitate to assist dissatisfied patients. If necessary, refund the patient and refer them to another dentist.
- If the dentist determines that the dentist/patient relationship should be terminated, follow the proper guidelines.
- When in doubt, refer. Recognize that you may sometimes need to refer patients to someone better qualified to treat their problem and not try to perform procedures which you are not qualified to treat or not familiar with treating.
- Remember that it is better to prevent problems than to “cure” problems. Remember you cannot “fix” everything nor do everything yourself.
- Practice mainstream dentistry and not be the first or the last to use a new technique or material. Carefully research what you intend to do or use and do not rely solely on a manufacturer’s or “guru’s” claims.
- Do not over-treat patients! Be reasonable with treatment plans and fees. The patient’s pocket is not a bottomless pit.
- First, do no harm! Take care of your patients and they will take care of you.
- The Board does not tolerate dishonesty. Read and understand before you sign any Department documents (including renewal applications) and do not alter records for your or the Board’s benefit.
- Your personal life reflects into your practice and you cannot properly perform your dental duties if your personal life is a mess.
- Encourage any dental professional who is impaired due to the use of alcohol or other drugs to obtain assistance and treatment from the Licensee Assistance Program (LAP).
- Be aware of the Mandatory Reporting law (172 NAC 5). A copy is available on the Department’s website at www.dhhs.ne.gov
- Be aware of patients seeking controlled substances and of your prescribing authority.
- Complete continuing education for professional development, not just for credit accumulation.
- Abide by the dental statutes, and rules and regulations at all times. The Board has suggested that all dental professionals read the statutes and rules and regulations pertaining to your profession.

Please follow these resolutions throughout this year and every year to prevent problems, complaints and/or disciplinary action against you and your license.

**Adapted from the Tennessee Board of Dentistry newsletter.*



Expected Fee Increase

Back in 2003, the Department started to evaluate fees biennially. Each profession needs to generate enough revenue to support the activities of the Board. The Board budgets for their expenditures and revenue every fiscal year.

This year the Board of Dentistry reviewed the budget and voted to increase the fees to cover their expenditures for the next two fiscal years. Fees are listed in 172 NAC 56 Regulations Governing the Practice of Dentistry and Dental Hygiene. These regulations went to public hearing for the proposed changes.

Here are the proposed fee changes:

- Initial Dentistry License Fee - \$250 + LAP fee (both by exam and reciprocity)
- Initial Dental Hygiene License Fee - \$150 + LAP fee (both by exam and reciprocity)
- Dentistry Renewal Fee - \$225
- Dental Hygiene Renewal Fee - \$125
- General Anesthesia Permit Fee - \$200 (initial fee and renewal fee)
- Parenteral Sedation Permit Fee and Renewal Fee - \$200 (initial fee and renewal fee)
- Inhalation Analgesia Permit Fee - \$100 (initial fee and renewal fee)

License Statistics

Licenses/Permits/Certifications Totals (as of 10/31/2007)

	<u>Total Active</u>	<u>Issued*</u>	<u>Issued by Reciprocity</u>
Dentist Licenses	1468	89	6
Dental Hygienist Licenses	1030	88	15
General Anesthesia Permits	46	4	
Parenteral Sedation Permits	35	3	
Inhalation Analgesia Permits	549	100	
Local Anesthesia Certifications	744	88	
Dental Temporary Licenses			
Dental Faculty Licenses	10	5	
Locum Tenens		15	

*This column is based on those licenses/permits/certifications issued since 6/30/2006.

Current Board members terms:

Name	Effective Date of 1st Term	Current Term Expires
John Ahlschwede, DDS	12/1/2006	11/30/2011
R. Mark Hinrichs, DDS	12/1/2005	11/30/2010
Sam Jacoby, DDS	12/1/2004	11/30/2009
Judith Kissell, PhD (Public member)	12/1/2004	11/30/2009
Jane Lott, RDH	12/1/2004	11/30/2009
Julie Marshall, DDS	12/1/2005	11/30/2010
David Mlnarik, DDS	12/1/2004	11/30/2009
Doris Schader (Public Member)	3/20/1995	11/30/2009
Jane Stratman	12/1/1999	11/30/2009
Terrence Wilwerding, DDS	12/1/2006	11/30/2011

Board members are appointed by the Board of Health for 5-year terms and can be re-appointed for another 5-year term. If you are interested in serving as a Board member, please contact the Department for more information.



From the Board of Dentistry and Staff

Licensure Violations

The following is a list of licensure actions taken between July of 2006 to October of 2007, additional information on any of these violations is available on the Department website at <http://www.nebraska.gov/LISSearch/search.cgi> or by calling 402/471-4923.

Licensee	Action(s)	Violation(s)
Ali I. Akkoseoglu, DDS	Suspension – 45 days Civil Penalty - \$10,000	Dishonorable Conduct; Unprofessional Conduct
Regina V. Mitchell, RDH	Suspension – 30 days Civil Penalty - \$500	Practicing Beyond the Authorized Scope of Dental Hygienist; Unprofessional Conduct
Gail R. St. Pierre-Piper, RDH	Suspension – 30 days	Practicing Beyond the Authorized Scope of Dental Hygienist
Mariah C. Carroll, RDH (license issued on probation)	Probation – 5 years	Fraud, Forgery, Misrepresentation Material Facts; Misdemeanor Conviction; Violation of Uniform Controlled Substances Act (USCA)
James Slominski, DDS	Censure Civil Penalty - \$5,000 Probation – 3 years	Permitting, aiding or abetting the unlicensed practice as a dental hygienist.
Chad W. Tolly, DDS	Suspension – 30 days Civil Penalty - \$7,500 Probation – 5 years	Alcohol Dependency; Dishonorable Conduct; Failure to File a Mandatory Report; Practicing Beyond the Scope of Dentistry; Unprofessional Conduct; Violation of the UCSA
Eric J. Trumm, DDS	Civil Penalty - \$1,000	Dishonorable Conduct; Misrepresentation of the Facts
Michael R. Kirke, DDS	Probation – 2 years	Unprofessional Conduct
Steven C. Kruse, DDS	Censure	Probation Violation: Use of alcohol containing medication products without a prescription
LaMont L. Gillham, DDS	Censure Civil Penalty - \$500 Suspension – 60 days	Probation Violation: Use of alcohol containing food items; use of alcohol containing medications without a prescription; self-prescribing medications
Robert B. Cochrane, DDS	Censure	Failure to File a Mandatory Report
David I. Hull, DDS	Censure Civil Penalty - \$5,000	Unprofessional Conduct
Liza B. Baker, RDH	Probation – 5 year	Misdemeanor conviction having a rational connection to the licensee's capacity to practice the profession; Dishonorable Conduct; Unprofessional Conduct
Christine A. Taylor, DDS	Censure Civil Penalty - \$2,500	Administering Nitrous Oxide without a permit.
Shaun O. Parker, DDS (appeal filed in the Nebraska Court of Appeals)	Revocation	Permitting, aiding or abetting the unlicensed practice of prescribing controlled substances by someone who is not licensed to do so; Unprofessional Conduct
Nathan M. McConnell, DDS (license issued on probation)	Probation – 2 years	Misdemeanor Conviction
Mariah C. Carroll, RDH	Censure Civil Penalty - \$500	Probation Violation: Use of Alcohol
Scott S. Green, DDS (license reinstated on probation)	Probation – 5 years	Previous Discipline
Carl J Braun, DDS (appeal filed in the Nebraska Court of Appeals)	Revocation	Dishonorable Conduct, Fraudulent Practice; Probation Violation; Unprofessional Conduct; Violation of the UCSA
Nicholas A. Kanning, DDS (license issued on probation)	Probation – 5 years	Alcohol Dependency; Chemical Dependency; Misdemeanor Conviction

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The Board wishes to bring your attention to the ADA Principles of Ethics and Code of Conduct:

www.ada.org/prof/prac/law/code/index.asp

CHEMICAL DEPENDENCY RESOURCE GUIDE

The resource guide was developed by the Nebraska Department of Health and Human Services Licensure Unit and the Nebraska Licensee Assistance Program for the purpose of providing information about the disease of chemical dependency and health care professionals. The guide provides information on how to recognize the signs and symptoms of the disease of chemical dependency, steps on how to intervene, recovery, relapse prevention and return-to-work considerations.

If you would like a copy of the guide, contact Ruth Schuldt, Credentialing Compliance Monitor at 402-471-0313 or at ruth.schuldt@dhhs.ne.gov.

REQUEST FOR PRACTICE MONITORS/DENTAL RECORD AUDITORS

The Department of Health and Human Services Licensure Unit is looking for practicing dentists who may be interested in contracting with the Department to serve as a Practice Monitor, conduct in-office inspections and/or conduct patient record audits for licensed dental practitioners who have been subject to disciplinary action as a result of practice-related issues. If you would like more information or would like to be considered by the Board of Dentistry to serve in this capacity, please contact Ruth Schuldt, Credentialing Compliance Monitor, at 402-471-0313 or ruth.schuldt@dhhs.ne.gov.

MEETING DATES FOR 2007 ARE:

January 11, 2008
April 11, 2008
July 11, 2008
October 10, 2008

You can find the 2008 meeting dates posted on the Department website at:

<http://www.dhhs.ne.gov/crl/brdmtgs.htm#Dental>

Board of Dentistry Officers Elected for 2008

On January 11, 2008 the Board of Dentistry elected officers.

David Mlnarik, DDS -- Chairperson

Sam Jacoby, DDS -- Vice-Chairperson

Doris Schrader -- Secretary

The CE Review Committee members are:

David Mlnarik, DDS, Julie Marshall, DDS, and Jane Stratman, RDH

Alternatives for Expanding Continuing Competency Acceptance Ad Hoc Committee members are:

David Mlnarik, DDS, Julie Marshall, DDS, and Jane Stratman, RDH

Expanded Duties for Dental Auxiliaries Ad Hoc Committee members are:

R. Mark Hinrichs, DDS, Sam Jacoby, DDS, Jane Lott, RDH, Jane Stratman, RDH, and Judith Kissell, PhD

Anesthesia Committee members are:

John Ahlschwede, DDS, Terrence Wilwerding, DDS, and Jane Lott, RDH

Change of Address?

If you have moved or changed your business or mailing address, please remember to contact the Department staff with the new information. The US Postal Service has limitations on forwarding mail to a new address. You are responsible for meeting all renewal dates. If we can't find you, you are still not released from your professional responsibilities to maintain your license.

Any questions? Please contact the staff at:
Department of Health and Human Services
Division of Public Health
Licensure Unit
PO Box 94986
Lincoln NE 68509-4986

Phone: 402/471-2118
Fax: 402/471-3577
E-Mail: vonda.apking@dhhs.ne.gov

**Licensure Unit – Office of
Medical & Specialized
Health**

**Becky Wisell
Administrator**

**Vonda Apking
Credentialing Coordinator**

The Nebraska Department of Health and Human Services Division of Public Health Website for Dentists and Dental Hygienists is:

<http://www.dhhs.ne.gov/crl/medical/dent/dentindex.htm>

The following information is available on the website:

- Applications
- Application Procedures/Requirements
- Board Information
- Brochures/Newsletters
- License Certification/Verification
- Complaints
- Contact Information
- Other Related Contacts
- Continuing Education
- License Duplicates/Reissues
- License Fees
- License Lookup
- Listings
- Licensee Assistance Program
- Licensee Name and Address Change
- Renewal Information
- Rules and Regulations/Statutes



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