

BOARD OF DENTAL EXAMINERS
Professional & Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii

MINUTES OF MEETING

The agenda for this meeting was filed with the Office of the Lieutenant Governor, as required by Section 92-7(b), Hawaii Revised Statutes ("HRS").

- Date: Monday, May 18, 2015
- Time: 9:00 a.m.
- Place: Queen Liliuokalani Conference Room
King Kalakaua Building
335 Merchant Street, 1st Floor
Honolulu, Hawaii 96813
- Present: Mark Baird, D.D.S., Chair, Dental Member
Paul Guevara, D.M.D., M.D.S., Dental Member
Rodney Ching, Public Member
Staphe Fujimoto, D.D.S., Dental Member
Mark Chun, D.M.D., Dental Member
Candace Wada, D.D.S., Dental Member
Dennis Nagata, D.D.S., Dental Member
Garrett Ota, D.D.S., Dental Member
Earl Hasegawa, D.D.S., Dental Member
Janet Primiano, R.D.H., M.P.H., Dental Hygiene Member
Joy B. Y. Shimabuku, Public Member
Marianne Timmerman, R.D.H., Dental Hygiene Member
Daniel Jacob, Esq., Deputy Attorney General
James Kobashigawa, Executive Officer ("EO")
Sandra Matsushima, Executive Officer ("EO")
Lisa Kalani, Secretary
- Guests: Noelani R.E.T.G. Greene, Hawaii Dental Hygienists' Association
("HDHA")
Ellie Miyashiro, Hawaii Dental Hygienists' Association ("HDHA")
Sandy Kirkoski, Hawaii Dental Hygienists' Association ("HDHA")
Lei Fukumura, Special Deputy Attorney General, Professional and
Vocational Licensing Division ("PVL")
Gayle Chang, Hawaii Dental Hygienists' Association ("HDHA")
Loren Leibling, Hawaii Dental Association ("HDA")
Diane Brucato-Thomas, Hawaii Dental Hygienists' Association
("HDHA")

Steve Wilhite, Hawaii Dental Association ("HDA")
Gerraine Hignite, Hawaii Dental Hygienists' Association ("HDHA")

1. Call to Order: There being a quorum present, Chair Baird called the meeting to order at 9:00 a.m.

2. Additions/Revisions to Agenda:
 9. Executive Officer's Report on Matter Related to the Board of Dental Examiners:
 - j. Appointment of New Member, Reappointment of Members, Outgoing Member and **Election of Officers.**

3. Approval of Board Meeting Minutes and Executive Session Minutes Of March 18, 2015:

It was moved by Ms. Shimabuku, seconded by Dr. Nagata, and unanimously carried to approve the March 18, 2015 Board Meeting minutes as circulated.

Dr. Chun stated the date of the Executive Session Minutes needs to be corrected to March 18, 2015.

It was moved by Dr. Chun, seconded by Ms. Shimabuku, and unanimously carried to approve the March 18, 2015 Executive Session minutes as amended.

4. Chapter 9, HRS, Adjudicatory Matters:

Chair Baird called for a recess from the meeting at 9:05 a.m. to discuss and deliberate on the following adjudicatory matter(s) pursuant to Chapter 91, HRS:

 - a. In the Matter of the License to Practice Dentistry of ALLAN Y. SEGAWA, D.D.S.; DEN 2015-8-L

It was moved by Dr. Nagata, seconded by Ms. Shimabuku, and unanimously carried to approve the Board's Final Order.

Following the Board's review, deliberation, and decisions in this matter, pursuant to Chapter 91, HRS, Chair Baird announced that the Board was reconvening its scheduled meeting at 9:07 a.m.

5. Applications:
 - a. Ratifications

It was moved by Dr. Wada, seconded by Ms. Shimabuku, and unanimously carried to ratify the following:

Approved Dentist

KAWAKAMI-WONG, Hilari
DUBRINSKI, Susan
CHOY, Yiu Kai
PASIETA, Scott
LOGIGIAN, Jennifer
HUGHES, Jennifer
LEE, Jieun
LEWIS, Hannah
GILL, Ramandeep
HA, John
SULLIVAN, Coleen
GRIFFITH, Thomas

It was moved by Dr. Wada, seconded by Ms. Shimabuku,
and unanimously carried to ratify the following:

Approved Dental Hygienist

UTEMEI, Chelsey
BARON, Candice
THOMPSON, Rebecca
LUKE, Jessica
JONES, Anisia
TUNNISSEN, Gaea
NUNES, Elisa
PHAM, Thuy
WINDGO, Christa
MCDANIEL, Ashley
SALAZAR, Lawrence

It was moved by Ms. Primiano, seconded by Ms.
Timmerman, and unanimously carried to ratify the following:

Approved Certification in the Administration of Intra-Oral
Infiltration and Block Anesthesia

TAEOALII, Amanda
TUNNISSEN, Gaea
MCDANIEL, Ashley

It was moved by Dr. Wada, seconded by Vice Chair
Guevara, and unanimously carried to ratify the following:

Community Service Dental License

MOLOKAI OHANA HEALTH CARE

GARDNER, Paula

WEST HAWAII COMMUNITY HEALTH CENTER

KIM, Daisy

KOOLAULOA COMMUNITY HEALTH

SAND, Don

6. Old Business: a. Approval of the Amending Board's Application Forms

The Board was provided with questions from the Applications Committee to consider on drafting of the new anesthesia application requirements.

The questions with the Board's discussion and responses are as follows:

- *Should we make the statement that the Board suggests that all staff be CPR certified as opposed to requiring the minimal number as recommended by the ADA and AAOMS? Both recommend that for moderate sedation, one other individual be certified in BLS for Healthcare Provider and that for deep sedation/general anesthesia two other individuals be certified in BLS for Healthcare Provider.*

Dr. Wada stated the reason the Committee is suggesting that all the staff be certified is it would be more complete and you never know who is not going to be present.

Dr. Hasegawa stated it would be a suggestion and not considered mandatory. This is just going above and beyond what the current requirement is.

Mr. Kobashigawa stated for clarification that the suggestion is BLS Healthcare Provider for dentists and dental hygienists, not necessarily for dental assistants? You are going to suggest that one or two staff have BLS Healthcare Provider if they don't

have a dental hygienist or if there is only one dentist, or only a dental assistant, or receptionist?

Dr. Chun asked if regular CPR and BLS is the same thing?

Mr. Jacobs stated there is difference. CPR is cardio-pulmonary resuscitation, where BLS is basic life support and would include CPR as well as breathing control, airway control, etc..

Mr. Kobashigawa stated the Board had previously taken the position that dental assistants only needed CPR and for dentists and dental hygienists the Board wanted BLS for Healthcare Providers. Is the suggestion now that everyone take BLS for Healthcare Providers?

Mr. Leibling stated these terms that the Board is using is related only to the American Heart Association ("AHA"), and not the American Red Cross ("ARC"), which is also an authorized provider. Under AHA, unless they've changed it, they have BLS, which is not for Healthcare Providers, and that is what the HDA has been providing all these years. What the Board had previously discussed was adding "Healthcare Provider", which is a big step up. The Healthcare Provider class is about eight hours; versus the BLS class is about four hours. You cannot use BLS and BLS Healthcare Provider interchangeably, and for ARC, those terms have no meaning to them. The Board needs to be clear, so that HDA can be clear to their members on what it is that's required and for whom.

Dr. Hasegawa stated in the ADA Guidelines for Moderate Sedation it states, "At least one additional person trained in BLS for Healthcare Providers must be present in addition to the dentist". Could we say, "or equivalent"?

Mr. Jacobs stated the Committee reached out to both AHA and ARC and had them respond as to which terminology should be used.

The comment is correct in that they do not have names of their courses that are exactly the same, however, they both do have an initial CPR course, and a BLS course that is styled for Healthcare Providers. Based on talking to them, CPR would be just CPR and BLS is for Healthcare Providers.

Mr. Leibling asked what is the equivalent term for ARC?

Mr. Jacob stated using the term BLS for Healthcare Providers when you talk to either one of these entities, ARC or AHA, they are going to know what course you need to take.

Vice Chair Guevara stated perhaps we should go back and look at what was proposed in the rules a year ago.

Chair Baird stated going back to the original question, "should we make the statement that the Board suggests that all staff be CPR certified as opposed to requiring the minimal number as recommended by the ADA and AAOMS"?

Dr. Chun stated this would be only for those that have the sedation permit, not the overall general license population.

It was moved by Ms. Shimabuku, seconded by Dr. Wada, and unanimously carried not to make the statement.

Dr. Ota arrived 9:26 a.m.

- *Should we still ask if the gas system was installed by a registered technician or plumber?*

Dr. Hasegawa asked how has this been handled in the past?

Vice Chair Guevara stated he inspected an older office that was grandfathered in from being inspected before, however when inspecting a newer office, they were able to provide documentation that it was done by a plumber and a certified technician looked at it.

Mr. Kobashigawa asked what if they bring in their own equipment?

It was moved by Dr. Hasegawa, seconded by Dr. Wada, and unanimously carried to leave the question as is.

- *Should we require Capnography?*

Dr. Hasegawa stated Capnography is when you breathe off oxygen; it is a real time sampling of the measure of oxygen. Recently the American Society of Anesthesiologist (“ASA”) medical guide said you have to have capnography for out-patient moderate to deep sedation. So in 2014 the American Association of Oral and Maxillofacial Surgeons (“AAOMS”) mandated that every oral surgeon require capnography. There are also proposals for the American Dental Association (“ADA”) to mandate it. A capnography unit costs approximately \$1200.00.

Mr. Kobashigawa asked if this is standard for all oral surgeons but not necessarily for dentists that treat pediatric patients?

Dr. Hasegawa stated in order to be a member of AAOMS you have capnography. The pediatric dentists don’t have a requirement for it.

Mr. Leibling stated this is certainly an issue that could affect liability, and if this is a recognized procedure, the HDA would be in support of this. Considering recent history it is best to err on the safest side possible.

Mr. Ching stated he agrees because if it is a standard of care in the medical community, even if it is only in some states, we are moving that way. We would not want to say Hawaii’s standard of care is less. It appears to be safer for the public just to have this additional check.

Mr. Kobashigawa stated you may have a lot of discussion from the pediatric dentists if you require this.

Mr. Leibling asked if something like this is used in operating rooms for adults and children?

Mr. Hasegawa stated yes, it is standard in the operating room; it was just recently changed to include out-patients.

It was moved by Mr. Ching, seconded by Dr. Chun, and unanimously carried to require capnography.

- *Should we have 1 or 2 inspectors?*

Dr. Nagata asked what is the qualification for being an inspector?

Vice Chair Guevara stated previously an oral surgeon would do the inspection together with a Board member following the existing checklist.

The only qualification is you have to be a member of the Board, I don't even think you have to be a dentist. Recently, it has only been the Board members doing the inspections by themselves following the checklist.

Dr. Ota said it is very hard to get volunteers.

Chair Baird asked when you do an inspection, aren't you required to not only inspect the equipment, but to also document what their background is as far as what courses they have taken to qualify?

Vice Chair Guevara stated that is already done when they submit their application to PVL, only a physical inspection of the office is done during the inspection.

Mr. Ching stated if there are guidelines in the form of a checklist, and Board members are covered by virtue of them being a Board member, and other oral surgeons don't want to do it because of the potential liability, one member should be enough since this is official Board business.

Mr. Leibling stated the authority of the Board is what is important here, and from the HDA members point of view, I think it would be better to have a Board member coming into their office, rather than a non-Board member.

It was moved by Vice Chair Guevara, seconded by Dr. Wada, and unanimously carried to allow only the Board members to be inspectors and a minimum of one inspector is required per inspection.

Mr. Kobashigawa asked based on the language of the rules, can there be a motion to approve Board members to be the advisory consultants to do inspections?

Vice Chair Guevara stated we'll have to do that during the discussion of the rules.

Mr. Jacobs stated you can make that motion right now. It says the Board shall appoint a team of advisory consultants to conduct the on sight inspection and evaluation of facilities equipment and personnel. So you would want to make every member on the Board advisory consultants.

It was moved by Vice Chair Guevara, seconded by Dr. Wada, and unanimously carried to appoint every Board member as a part of their advisory consultant team.

- *Should we consider raising the fee for the permits?*

Dr. Chun asked who sets the fee.

Mr. Kobashigawa stated the Department.

Dr. Chun stated so we don't have a say anyway.

Mr. Kobashigawa stated you could make a recommendation.

It was moved by Ms. Primiano, seconded by Vice Chair Guevara, and unanimously carried to not recommend raising the fee for the permit.

- *Should we make accommodations for those who only do pediatric patients?*

Dr. Hasegawa stated we may have to get feedback from the pediatric dentists. There are some medications that may not be in the recommended crash cart.

It was moved by Ms. Shimabuku, seconded by Dr. Nagata, and unanimously carried to look into this further with the pediatric dentists.

- *Can we eliminate the 36 inch door requirement?*

It was moved by Dr. Wada, seconded by Vice Chair Guevara, and unanimously carried to eliminate the 36 inch door requirement.

- *Will those on the current waiting list use the old guidelines or the new ones?*

The Board by consensus will use the new guidelines for those on the current waiting list.

- *Will we require training for nitrous and enteral medications as recommended by the ADA in the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students, page 14?*

Dr. Hasegawa stated when he was reviewing the ADA Guidelines for Teaching Anesthesia and Sedation he noticed this for enteral and nitrous.

However, it also goes on to say that these guidelines are not intended for the management of enteral and/or combination inhalation-enteral minimal sedation in children, which requires additional course content and clinical learning experience. So if you are doing adults enteral and nitrous for minimal sedation, in addition to fourteen hours of nitrous oxide training, you need an additional sixteen hours plus clinical oriented experiences. However, being that this is not in our rules, should it be added or not? Also, the DOCS course meets the requirements for this.

Chair Baird stated the Board decided previously not to accept the DOCS course.

Vice Chair Guevara stated we did not accept the DOCS course for the moderate sedation, but it looks like the DOCS course would meet the requirements for the ADA criteria for minimal sedation.

Mr. Kobashigawa stated if you're talking about public safety, you may want to think about requiring additional training. Because apparently it can lead from minimal to moderate to deep without even knowing it.

Dr. Wada stated she does not see anything wrong with requiring the training as recommended by the ADA, and if the DOCS course meets the ADA requirement for this then we can accept that course.

Vice Chair Guevara stated this looks like something that needs be discussed by the Rules Committee together with the Applications Committee.

It was moved by Vice Chair Guevara, seconded Ms. Shimabuku, and unanimously carried to address this at a combined Applications and Rules Committee meeting.

- *Will there be time for comments from individuals before fully implementing the inspections?*

The Board by consensus stated there will be opportunity for discussion from individuals prior to fully implementing the new checklist for inspections.

b. Discussion on Administrative Rules

Ms. Matsushima stated the issues discussed today can be part of another proposed rules amendment. The Board can approve the current draft that is going through now and start the process over again if needed for any new proposed rule changes. However, with the new law that passed in Act 028 regarding the ethics courses, new language needs to be added to the current draft.

Mr. Jacob stated with the new law requiring three hours per year of ethics for dentists, with a total of six hours per biennium, the current draft only required two hours, so the rules have been amended to be parallel with the new law. The question now is because the new law does not address dental hygienists, does the Board still want to require two hours for dental hygienists per biennium?

Ms. Brucato-Thomas stated if the statute does not say that dental hygienists need to complete ethics courses, then putting it in the rules would be preceding the statute. She questioned whether it needed to be in the statutes first and then supported by the rules?

Mr. Jacob stated the legislature has given the Board the ability to put forth requirements for licensees. So unless the Board was to pass something that was in direct conflict with something required by law, then that would be prohibited.

Mr. Leibling stated this bill was submitted by the HDA, and in the original bill it stated three hours of ethics every biennium, and then as the bill continued it morphed into three hours every year. The HDA thinks once per biennium is satisfactory.

Ms. Matsushima stated that this is in addition to the existing thirty-two hours that are required, so now it is thirty-eight hours.

Dr. Chun asked how do you read that as additional hours to the existing thirty-two?

Ms. Matsushima stated in the Act it reads "In addition to any other continuing education requirement adopted by the board".... That is why the Board's testimony throughout the session said the Board would prefer to have allowed the rules to go through instead of this bill.

Mr. Kobashigawa stated the Board had testified that we're currently going through the rule making process and this is what the Board wanted to do, but HDA said they wanted legislation because it was faster.

Mr. Liebling stated yes, but the original bill was three hours every biennium within the thirty-two required.

Ms. Shimabuku stated this is what happens during legislation. This is why the Board preferred a rule change rather than a law change.

Ms. Chang stated regarding the dental hygienist ethics requirement, she would like to see the original intent of two hours per biennium continued.

Ms. Matsushima stated regarding the dental hygienist, that is what remains in the current draft of the rules. The bill did not include dental hygienists, only dentists.

Dr. Chun asked in addition to any other continuing education requirement, that other education requirement it's stating is CPR. That is how I read it. There is nothing saying that this has to be added to the thirty-two.

Mr. Jacob stated "other", would be what's in your rules. The words "in addition to" would be an addition to an already existing continuing education requirement.

Dr. Chun stated you could also argue that both the HDA and the Boards intent was to include it as part of the thirty-two hours and not in addition to.

Ms. Matsushima reiterated that the Boards position and testimony throughout the legislative session was that the Board supports the intent of requiring an ethics course, but preferred to have the rules amendment proceed to address the CE ethics requirement. It was the industry that supported the bill as written.

Mr. Jacob stated this Board would not be able to substitute the intent of the legislation. The intent of the legislation is first going to be looking at the clear language that's written.

Dr. Chun stated it is not clear language.

Mr. Jacob stated he would be happy to look at it again.

Mr. Leibling stated it could be legally defensible that the in addition to, does not refer to the hours, but to the content of the courses. In the rules it list the content of the courses. It does not have to address the total credit load.

Mr. Kobashigawa stated that "hours" are part of the continuing education requirement.

Mr. Leibling stated correct, but this is not saying in addition to those hours, it is just saying in addition to.

Mr. Jacob stated it is not saying in addition to content either.

Mr. Leibling stated that is correct, so that leaves a window.

Mr. Jacob stated he will look into it. The Board can submit a question in writing and he will respond to the Board confidentially.

It was moved by Dr. Chun, seconded by Vice Chair Guevara, with Dr. Hasegawa opposed, it was carried to request an opinion from Mr. Jacob regarding the language in Act 028.

Vice Chair Guevara stated once the opinion is received by Mr. Jacob, this will be brought back to the Rules Committee for discussion, and then a recommendation posed back to the Board. This will however delay the rule making process.

Mr. Jacob stated his understanding was that the language in the proposed rules was agreed upon. Now you have a bill that essentially trumps that language of two hours. The rules could still move forward but even if it passes and is promulgated, that statute would immediately trump upon its effect. That being said, the Board could amend the rules in its current format to mirror the statute without necessarily having to bring it back for a substantive change, because that would not be a decision for this Board to make, therefore it would not be a change that would require a vote.

Mr. Jacobs added that it is conceivable that at this time if we determine the language in the Act could be interpreted differently, you could just put it in there and it would not have to be brought back to the Board. He suggested that the Board move forward with these rules. If the interpretation of the language in the Act changes, the Board can always go back, but at least the Board will have something moving forward because this has been held up a long time. However at this point, this is completely up to the Board.

Ms. Matsushima stated the issue on the number of hours never came up in any legislative hearings. The Board members were informed and asked if they understood that it would be in addition to the thirty-two hours for a total of thirty-eight hours and I believe everyone was aware of it. The position of the Board had always been that we would have preferred to allow the rules to keep proceeding, and it was the position of the industry that the rules process would take too long. It is too late at this point since the Governor has already signed it.

Mr. Leibling stated I do not believe it is too late. The purpose of these discussions is to determine alternate outcomes. There is nothing in that language that says anything about hours, and that makes it vague.

Dr. Ota stated if the rules are delayed, it is ultimately the Board's responsibility to implement this bill.

It was moved by Vice Chair Guevara, seconded by Ms. Shimabuku and unanimously carried to amend the proposed rules section §16-79-141 only and move the current draft forward.

c. Email from Briani Komoda

At its March 16, 2015 meeting the Board reviewed a letter from Ms. Komoda regarding the dental hygienist scope of practice in a public health setting and deferred making a decision for more detailed information on whether the employer qualifies under a public health setting.

Ms. Matsushima stated documentation was provided that shows the employer, "Hui No Ke Ola Pono" is a legally incorporated eleemosynary, and is therefore a qualifying center.

It was moved by Ms. Shimabuku, seconded by Ms. Primiano, and unanimously carried to allow Ms. Komoda to work under general supervision with her current employer.

7. New Business: a. Matter Related to the American Association of Dental Boards ("AADB")

- AADB Mid-Year Meeting Report

Vice Chair Guevara provided a written report to the Board.

Dr. Guevara stated the meeting primarily addressed two issues: 1) Impairment of practitioners; and (2) the Supreme Court Ruling against the North Carolina State Board of Dental Examiners. Regarding impairment of practitioners, the current trend is to rehabilitate the impaired practitioner and not to punish the practitioner. Regarding the Supreme Court decision, the outcome is that the Board can no longer issue a cease and desist order but can still go to court to stop illegal practices.

Also, Dr. Guevara attended the National Dental Examiner and Advisory Forum and reported that the National Board Dental Examination, Parts I and II, will be combined into one part.

- Board of Directors – Call for Nominations

The AADB is encouraging any interested members to submit their CVs and Vision Statements for consideration for nomination to the Board of Directors.

- AADB Composite Report

The AADB Composite Report was provided to the members to review at their perusal.

b. Matters Relating to the Central Regional Dental Testing Service (“CRDTS”)

- Appointments to CRDTS Steering Committee and Dental and Dental Hygiene Examination Review (“ERC”) Committees

Chair Baird reported that recommendations will be made to CRDTS to appoint Dr. Staphe Fujimoto to the Steering Committee, Ms. Janet Primiano to the Dental Hygiene Examination Review Committee, and Dr. Mark Baird (himself), to the Dental Examination Review Committee.

- Dental Hygiene Exam Results

Ms. Chang reported that the CRDTS Dental Examination administered on April 25 and 26, 2015 ran smoothly and incurred no problems.

- 2015 CRDTS Workshop and Annual Meeting

Ms. Matsushima stated that the CRDTS Workshop and Annual Meeting will be held on August 20 to 22, 2015. All Board members and examiners are invited to attend. Please refer to the meeting invitation/announcement for registration and travel information.

c. Matters Relating to the American Board of Dental Examiners ("ADEX")

- Tentative exam dates: July 17-19, 2015
- Southern Regional Testing Agency, Inc. ("SRTA")
Dental Hygiene Exam 2015

The SRTA digital grading system will be used for the ADEX dental hygiene examinations.

d. Matters Relating to the Western Regional Examining Board ("WREB")

- WREB Newsletter

The WREB Newsletter was provided to the members to review at their perusal.

- Hygiene Exam Review Board Meeting Report

The Hygiene Exam Review Board meeting report prepared by Ms. Primiano was passed out to the Board members for their information.

e. Request for Continuing Education Course Approval

It was moved by Vice Chair Guevara, seconded by Dr. Ota, and unanimously carried to approve the following:

- Gayle Chang - OSHA and Infection Control Training for Dental Professionals:
 - Full day course = 7 hours
 - Re-training update course = 4 hours
 - Office hands on training course = 2 hours
- Gayle Chang - Intra-Oral Infiltration & Block Anesthesia Certification Course:
 - Certification = 27 hours
 - Refresher = 8 hours
 - Lecture only = 5 hours

- Dr. Scott Morita - "What to do with: Tooth Extraction Complications?!" (1 hour course).

f. Legislation

- SB114, SD1 (Act 028)

Ms. Matsushima stated that the Act was signed by the Governor on May 1, 2015 and requires dentists to complete 3 hours of ethics training per year after January 1, 2016.

- HB268, HD2, SD1

Ms. Matsushima stated that the bill is awaiting the Governor's signature, which would authorize and establish procedures for the Board to issue a summary suspension of a license.

8. Correspondence:

a. Letter from Affiliated Monitors Inc.

The Board reviewed a letter from Affiliated Monitors Inc., informing the Board of the type of monitoring service they provide.

9. Executive Officer's Report on Matters Related to the Board of Dental Examiners:

a. Important Notice Regarding Infection Control Practices and Use of Gloves

The Board was provided with a copy of the Important Notice Regarding Infection Control Practices and Use of Gloves that was posted to the Board's webpage as of April 8, 2015.

b. ADA Sedation and Anesthesia Guidelines – Comments Requested

The ADA Council on Dental Education and Licensure is conducting a comprehensive review of the ADA Guidelines for the Use of Sedation and General Anesthesia by Dentists and the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students and is seeking comments from the communities of interest.

c. Hawaii State Ethics Commission –Financial Disclosure

The members were reminded that the deadline to file their financial disclosure short forms is June 1, 2015.

d. DCCA/OAH Disciplinary Actions – April 2015

The News Release Disciplinary Actions through April 2015 was provided to the Board for review.

e. AGD Washington Briefings

The Board reviewed written correspondence from Nick Femyer, AGD's Coordinator, noting that the goal of the AGD Board is to have all 50 states accept the AGD State Licensure Transcript as proof of CE. The AGD has strengthened CE submission protocols and are requesting all state dental boards to gain acceptance of their transcript. Currently, Hawaii does not accept the AGD transcript.

Dr. Chun added that non-AGD courses will be identified as such on the transcript.

After a brief discussion, Dr. Chun moved, seconded by Dr. Wada to accept the AGD transcript as proof of CE. The motion was unanimously carried.

Ms. Matsushima commented that the AGD Advocacy newsletter indicates that teledentistry has gained momentum. California became the first state to require its state insurance program, Medi-Cal, to treat remote dental services as it would in-person treatment. Other states, including Colorado, Hawaii, Oregon, Tennessee, and W. Virginia, also have shown interest in creating their own teledentistry programs.

f. CODA Update

Ms. Matsushima stated that CODA provided notice that the Dental Assisting programs at all Heald College campuses (including Hawaii) has voluntarily discontinued its accreditation. CODA will take official action to discontinue the program's accreditation at its Summer 2015 meeting.

CODA is requesting nominations to fill upcoming public member vacancies on Review Committees. Interested individuals may contact Ms. Alyson Ackerman of the ADA by June 1, 2015.

g. Kaiser Health News

Ms. Matsushima reported about dental coverage is now available to many on Medicaid, but still many dentists are reluctant to participate in the government program for low-income patients.

h. DANB

DANB announced that there will be no renewal or exam fee increases in 2015. However, in order to keep up with inflation, DANB's Board of Directors has approved moderate exam fee increases and a small renewal fee increase, effective Jan. 1, 2016

i. Current Licensee Statistics

Ms. Matsushima reported the following statistics as of April 13, 2015. Totals are accumulated statewide, mainland, foreign, and other.

Dentists	1512
Dental hygienists	1052
CSDT	34
CSDH	2
DT-Temporary	20

j. Appointment of New Member, Reappointment of Members, Outgoing Member and Election of Officers.

Ms. Matsushima reported the following appointments and re-appointments:

Outgoing Member

Dr. Mark Baird, D.D.S., Dental Member, Chair

New Member – effective July 1, 2015:

Dr. Coy Rebman, D.D.S., Dental Member, Kauai

Member Re-appointments:

Paul Guevara, D.M.D., M.D.S., Dental Member, Vice Chair
Rodney Ching, Esq., Public Member
Candace Wada, D.D.S., Dental Member
Marianne Timmerman, R.D.H., Dental Hygiene Member

Election of Officers:

Upon a motion by Chair Baird, seconded by Dr. Chun, the following new slate of officers were unanimously approved.

Dr. Paul Guevara, Chair
Dr. Candace Wada, Vice-Chair

10. Public Comment: Mr. Leibling stated he appreciates the level of access and openness the Board allows, it makes a tremendous difference so he can accurately represent his members.

The following agenda item was moved as the next order of business:

Executive Session:

At 11:52 a.m., it was moved by Vice Chair Guevara, seconded by Ms. Shimabuku, and unanimously carried to enter into executive session pursuant to HRS §§ 92-4 and 92-5(a)(4) to consult with the Board's attorney on questions and issues pertaining to the Board's powers, duties, privileges, immunities, and liabilities.

Guests were excused from the meeting room

At 11:55 a.m., it was moved by Vice Chair Guevara, seconded by Ms. Shimabuku, and unanimously carried to move out of executive session.

The following agenda item was moved as the next order of business:

11. Announcements: Mr. Kobashigawa stated that today being Chair Baird's last meeting he is being presented with an "Appreciation Certificate" and on behalf of the staff of the Professional & Vocational Licensing Division, we wish to express our sincere appreciation for your unselfish and invaluable service as a member of the Board of Dental Examiners and to tell you that we enjoyed working with you these past years. I hope you will continue to take interest in the Board's activities.

12: Next Board Meeting: Monday, July 20, 2015
9:00 a.m.
Queen Liliuokalani Conference Room
King Kalakaua Building
335 Merchant Street, 1st Floor
Honolulu, Hawaii 96813

13. Adjournment: Chair Baird adjourned the meeting at 11:56 a.m.

Reviewed and approved by:

Taken and recorded by:

/s/ Sandra Matsushima
Sandra Matsushima
Executive Officer

/s/ Lisa Kalani
Lisa Kalani, Secretary

SM:lk

6/12/15

[] Minutes approved as is.

[X] Minutes approved with changes; see minutes of 7/20/15.