

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
AMENDMENT AND COMPILATION OF CHAPTER 16-79,
HAWAII ADMINISTRATIVE RULES

MAY 16, 2016

SUMMARY

1. §16-79-2 is amended
2. §16-79-3.1 is amended
3. §16-79-9 is amended
4. §16-79-14 is amended
5. §16-79-15 is amended
6. §16-79-67 is amended
7. §16-79-69.1 is amended
8. §16-79-69.10 is amended
9. §16-79-75 is amended
10. §16-79-77 is amended
11. §16-79-78 is amended
12. §16-79-141 is amended
13. §16-79-144 is amended
14. Chapter 79 is compiled

HAWAII ADMINISTRATIVE RULES

TITLE 16

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

CHAPTER 79

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SUBCHAPTER 1

GENERAL PROVISIONS

§16-79-1 Objective. This chapter adopted by the board of dental examiners, hereafter referred to as "board", is intended to clarify and implement chapters 447 and 448, Hawaii Revised Statutes ("HRS"), to the end that the provisions thereunder may be best effectuated. [Eff 7/2/64; am and ren §16-79-1, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §448-6)

§16-79-2 Definitions. For the purposes of this chapter, the following definitions are applicable:

"ADA" means the American Dental Association.

"ADEX dental examination" means the dental examination developed by the American Board of Dental Examiners.

"ADHA" means the American Dental Hygienist Association.

"BLS" means basic life support.

"Block anesthesia" means local anesthetic solution deposited close to a main nerve trunk usually located at a distance from the site of treatment.

"CE" means continuing education.

"CODA" means the American Dental Association Commission on Dental Accreditation.

"CPR" means cardiopulmonary resuscitation.

"Dental assistant" means a non-licensed person, who may perform dental supportive procedures authorized by the provisions of this chapter under the direct supervision of a licensed dentist.

"General anesthesia" means a drug-induced, loss of consciousness accompanied by partial or complete loss of protective reflexes, including the inability to continually maintain an airway independently and to respond appropriately to physical stimulation or verbal command. Patients under general anesthesia require assistance in maintaining a patent airway and positive pressure ventilation due to inadequate spontaneous ventilatory function.

"Inactive license" means a license which has been placed on an inactive status upon a written request by a licensee.

"License in good standing" means a license that is current, unencumbered, and held by a person who is actively practicing.

"Licensed dental hygienist" means a person who is authorized to practice dental hygiene in the State of Hawaii.

"Licensed dentist" means a person who is authorized to practice dentistry in the State of Hawaii.

"Local anesthesia" means the elimination of sensations, especially pain, in one part of the body by subcutaneous injection of a drug.

"National Board Dental Examination" or "National Board Dental Hygiene Examination" means the didactic examination developed by the American Dental Association Joint Commission on National Dental Examinations.

"NPDB" means the National Practitioner Data Bank.

"Sedation" means the calming of an apprehensive individual by use of systemic drugs, without inducing loss of consciousness.

"Supervision" means prescribing objectives and procedures and assigning work, provided that the person supervising shall be a licensed dentist. The levels of supervision are defined as follows:

- (1) "Direct supervision" means that the supervising licensed dentist examines and diagnoses the condition to be treated, authorizes each procedure, remains in the dentist's office or in any facility defined in section 447-3, HRS, while the procedures are being performed, and shall be responsible for all delegated acts and procedures performed by dental assistants and licensed dental hygienists.
- (2) "General supervision" means that the supervising licensed dentist has examined and diagnosed the condition to be treated, and has authorized each procedure to be carried out in accordance with the dentist's diagnosis and treatment plan. The presence of the supervising dentist is not required; provided the dentist shall be available for consultation and shall be responsible for all delegated acts and procedures performed by licensed dental hygienists. In the case of programs under the supervision and control by the department of health or in any facility specified in section 447-3, HRS, the foregoing shall not apply except that the supervising licensed dentist shall be available for consultation, shall be responsible for all delegated acts and procedures performed by licensed dental hygienists and the procedures pursuant to section 447-3, HRS, shall have been prescribed by a licensed dentist or otherwise be authorized by law. [Eff 7/2/64; am and ren §16-79-2, 2/13/81; am 1/27/86; am and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§436B-13.3, 447-1, 447-1.5, 447-3, 448-1, 448-3, 448-6, 448-9.6)

§16-79-3 Renewal of a dental or dental hygiene license. (a) Each licensee shall be responsible for timely renewing of the licensee's license, completing the CE requirement, and satisfying the renewal requirements provided by law.

(b) At the time of license renewal, each licensee shall submit a completed renewal application and all applicable fees and shall comply with any other requirement provided by law. A completed renewal application sent by United States mail shall be considered timely filed if the envelope bears a postmark on or before the required renewal date.

(c) The failure to timely renew a license, the failure to pay all applicable fees, the failure to complete the CE requirements, the dishonoring of any check

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upon first deposit, or the failure to comply with any other requirement provided by law, shall cause the license to be automatically forfeited. [Eff 7/2/64; am and ren §16-79-3, 2/13/81; comp 2/9/89; comp 8/20/90; am and comp 2/9/01; am and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6, 448-7, 448-8.5)

§16-79-3.1 Restoration of forfeited license. (a) A license which has been forfeited may be restored within two years after the date of expiration upon compliance with the licensing renewal requirements provided by law and upon written application and payment of all applicable renewal fees, penalty fees, and compliance resolution fund fees.

(b) A forfeited license may be restored after two years from the date of expiration upon:

- (1) Written application and payment of all applicable fees;
- (2) Being engaged in the practice of dentistry or dental hygiene, as applicable, for at least three years preceding the date of the written application which includes:
 - (A) Evidence of active clinical practice of not less than one thousand hours per year for the three years immediately prior to the date of request; and
 - (B) A certification from the appropriate state board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of said active practice;
- (3) Submitting evidence of completion of the CE requirements of a minimum of thirty-two hours for licensed dentists and twenty hours for licensed dental hygienists each biennium;
- (4) Submitting a self-query background check from the NPDB. In addition, the board may require a background check from an independent background check service approved by the board, provided that the applicant shall pay the cost of the background check; and
- (5) If the person is unable to meet the above requirements, the person may be required to reapply as a new applicant, take and pass the licensure examination.

(c) If the person has not restored the license for more than five years from the date of expiration, the person shall be required to reapply as a new applicant, take and pass the licensure examination, submit a self-query report from the NPDB, and submit a report from an independent background check service approved by the board; provided that the applicant shall pay the cost of the

background check. [Eff and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6, 448-7, 448-8)

§16-79-4 Repealed. [R 1/27/14]

§16-79-5 Prosthetic appliances. A licensed dentist shall provide a written work order authorizing the making or repair of artificial restorations, substitutes, appliances, or materials for the correction of disease, loss, deformity, malposition, dislocation, traction, fracture, injury to the jaws, teeth, lips, gum, cheeks, palate, or associated head and neck tissues or parts, from casts, models, or impressions and shall keep a file copy of written work orders for a period of at least one year. The work order shall be dated and signed by the dentist, include the dentist's license number and the name and address of the independent dental laboratory. [Eff 7/2/64; am 2/24/67; am and ren §16-79-5, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-1, 448-6)

§16-79-6 Repealed. [R 1/27/14]

§16-79-7 Approved apron. An apron, preferably with cervical collar, with .25 mm lead equivalent shall be the minimum shielding for dental radiographic procedures. [Eff and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-1.5, 448-6)

§16-79-8 Approved infection control practices. Licensed dentists and licensed dental hygienists shall practice levels of infection control consistent with the guidelines and recommendations of the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) and the ADA. [Eff and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6)

SUBCHAPTER 2

APPLICATIONS

§16-79-9 Who may apply for a dental or dental hygiene license. (a) A person applying for licensure to practice dentistry shall comply with the following requirements:

- (1) Be eighteen years of age or more;
- (2) Pass the National Board Dental Examination;
- (3) Pass the ADEX dental examination;
- (4) Be a United States citizen, United States national, permanent resident of the United States, or alien authorized to work in the United States; and
- (5) Be a graduate from a dental school accredited by CODA.

(b) A person applying for licensure to practice dental hygiene shall comply with the following requirements:

- (1) Be eighteen years of age or more;
- (2) Pass the National Board Dental Hygiene Examination;
- (3) Pass a regional dental hygiene examination until a national clinical dental hygiene examination becomes available, pursuant to section 447-1(b) and (c), HRS;
- (4) Be a United States citizen, United States national, permanent resident of the United States, or alien authorized to work in the United States;
- (5) Be a graduate from a dental hygiene school accredited by CODA; and
- (6) Be certified in the administration of intra-oral infiltration local anesthesia and intra-oral block anesthesia from an accredited dental hygiene school or certification program approved by the board. [Eff and comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§436B-10, 447-1, 448-6, 448-9)

§16-79-10 Application forms. All applications shall be made on the forms as prescribed by the board. No application shall be deemed complete which does not set forth all the information relative to the applicant required by said forms and this chapter. The applicant is solely responsible for submitting a completed application. [Eff 7/2/64; am and ren §16-79-10, 2/13/81; am and comp 2/9/89;

am and comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6, 448-9)

§16-79-11 Documentation and credentials required for dental applicants. (a)

All dental licensure applicants shall arrange to have sent directly to the board:

- (1) An official verification of having successfully passed the National Board Dental Examination;
- (2) An official verification of having successfully passed the ADEX dental examination; and
- (3) A certified copy of a dental degree, a certificate of graduation or an official transcript from a dental school accredited by CODA.

(b) Applicants licensed as a dentist in another state shall also submit an official verification of licensure and licensure status from the board of dental examiners of that state and submit a self-query report from the NPDB.

(c) The board may require additional background checks of dental applicants from an independent background check service as approved by the board, provided that the applicant shall pay the cost of the background check. [Eff 7/2/64; am and ren §16-79-11, 2/13/81; am and comp 2/9/89; am and comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-9, 448-9.4)

§16-79-11.5 Documentation and credentials required for dental hygiene applicants. (a) All dental hygiene licensure applicants shall arrange to have sent directly to the board:

- (1) An official verification of having successfully passed the National Board Dental Hygiene Examination;
- (2) An official verification of having successfully passed any one of the regional clinical examinations authorized by section 447-1(b), HRS, or pursuant to section 447-1(c), HRS, an official verification of having passed a national clinical examination;
- (3) A certified copy of a dental hygiene degree, certificate of graduation or an official transcript from a dental hygiene school accredited by CODA; and
- (4) Documentary proof of being certified in the administration of intra-oral infiltration local anesthesia and intra-oral block anesthesia from an accredited dental hygiene school or by a certification program approved by the board.

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(b) Applicants licensed as a dental hygienist in another state shall also submit an official verification of licensure and licensure status from the board of dental examiners of that state and submit a self-query report from the NPDB.

(c) The board may require additional background checks of dental hygiene applicants from an independent background check service as approved by the board, provided that the applicant shall pay the cost of the background check. [Eff and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6)

§16-79-12 Repealed. [R 1/27/14]

§16-79-12.7 Application for inactive license. (a) Upon written request by a licensee during the licensure period or at renewal, and upon payment of an inactive license fee, the board shall place the licensee's active license on an inactive status.

(b) A licensee may continue and renew on inactive status for the biennial period.

(c) A licensee on inactive status shall be considered as unlicensed and shall not engage in the practice of dentistry or dental hygiene. Any person who violates this prohibition shall be subject to discipline under this chapter and chapters 436B, 447, and 448, HRS.

(d) It shall be the responsibility of each licensee on inactive status to maintain knowledge of current licensing and renewal requirements.

(e) A licensee may request to reactivate the license at any time during the licensure period or at renewal by:

- (1) Completing an application for reactivation;
- (2) Fulfilling all requirements in effect at the time of application to return the license to active status, including the payment of an activation fee and other fees that may be required;
- (3) Meeting the CE requirements; and
- (4) Providing information to ensure the licensee is fit to engage in the practice of dentistry or dental hygiene, including but not limited to reporting license sanctions, pending disciplinary actions, or conviction of a crime in which the conviction has not been annulled or expunged.

(f) An application for reactivation may be denied if the applicant does not fulfill all requirements of this chapter and chapters 436B, 447, and 448, HRS. If the applicant is denied, written notice of denial shall state specifically the reason for denying the reactivation and shall inform the applicant of the right to a hearing

under chapter 91, HRS. If denied reactivation, the applicant shall be required to reapply for licensure and comply with the licensing requirements in effect at the time of reapplication. [Eff and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§91-9, 91-9.5, 436B-13.3, 448-6)

§16-79-13 Repealed. [R 1/27/14]

§16-79-14 Denial of application. In the event an application for the issuance or renewal of a license or permit, or for the reinstatement, or reactivation of a license thereof is denied, the board shall notify the applicant or licensee by letter of the board's action which shall include a concise statement of the reasons therefor and a statement informing the applicant or licensee of the right to a contested case hearing pursuant to chapter 91, HRS. [Eff 7/2/64; am and ren §16-79-14, 2/13/81; am and comp 2/9/89; am and comp 8/20/90; comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§91-9, 91-9.5, 447-1, 447-7, 448-6, 448-7, 448-8.5, 448-9, 448-17, 448-18)

§16-79-15 Contested case hearing. Any person whose application for a license or permit, or whose application for the renewal, reinstatement, or reactivation of a license or permit has been denied by the board shall be entitled to a contested case hearing after notice of the denial provided that the request for a contested case hearing shall be conducted pursuant to chapter 16-201, the rules of practice and procedure of the department of commerce and consumer affairs, and is filed with the board within sixty days of the date of the board's notice of the refusal or denial. [Eff 7/2/64; am and ren §16-79-15, 2/13/81; am and comp 2/9/89; am and comp 8/20/90; comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§91-9, 91-9.5, 91-13.1, 447-1, 447-7, 448-6, 448-7, 448-8.5, 448-9, 448-17, 448-18)

§16-79-16 Repealed. [R 2/9/89]

SUBCHAPTER 3 - REPEALED

§16-79-20 Repealed. [R 2/9/89]

§16-79-21

§16-79-21 Repealed. [R 8/20/90]

§16-79-22 Repealed. [R 8/20/90]

§16-79-23 Repealed. [R 2/9/89]

§16-79-24 Repealed. [R 8/20/90]

SUBCHAPTER 4 - REPEALED

§§16-79-28 to 16-79-31 Repealed. [R 8/20/90]

§16-79-32 Repealed. [R 2/9/89]

§16-79-33 Repealed. [R 8/20/90]

SUBCHAPTER 5 - REPEALED

§16-79-40 Repealed. [R 1/27/14]

§16-79-41 Repealed. [R 1/27/14]

§§16-79-42 to 16-79-50 Repealed. [R 2/9/89]

SUBCHAPTER 6 - REPEALED

§§16-79-54 to 16-79-58 Repealed. [R 2/9/01]

§16-79-59 Repealed. [R 2/9/89]

§16-79-60 Repealed. [R 2/9/01]

§16-79-61 Repealed. [R 2/9/89]

§§16-79-62 to 16-79-63 Repealed. [R 2/9/01]

SUBCHAPTER 7

DENTAL ASSISTANTS AND LICENSED DENTAL HYGIENISTS

§16-79-67 Definitions. For the purposes of this subchapter, the following definitions are applicable:

"Coronal polish" means a procedure limited to the removal of plaque biofilm and stain from exposed tooth surfaces, utilizing an appropriate instrument and polishing agent, as delegated by a licensed dentist. This procedure is not to be interpreted as a "dental prophylaxis".

"Dental prophylaxis" means the preventive supragingival and subgingival scaling and selective coronal polishing of the tooth surfaces, to remove calculus, soft deposits, plaque biofilm, and stains, using the appropriate instrumentation to create an environment in which hard and soft tissues can be maintained in good health by the patient, as delegated by a licensed dentist.

"Non-surgical periodontal scaling and root planing" means the therapeutic supragingival and subgingival scaling of the teeth surfaces to remove calculus, plaque, and stains and the definitive root planing procedure to remove cementum and dentin that is rough or contaminated with toxins or microorganisms utilizing the appropriate instrumentation, including but not limited to, manual and ultrasonic instrumentation, as delegated by a licensed dentist. This procedure may include removal of necrotic tissue. [Eff 11/21/74; am and ren §16-79-67, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-3, 448-3, 448-6)

§16-79-68 Repealed. [R 2/9/89]

§16-79-69 Repealed. [R 2/9/89]

§16-79-69.1

§16-79-69.1 Allowable duties and training for a dental assistant. (a) A dental assistant may perform the following supportive dental procedures under the direct supervision, direction, evaluation, and responsibility of a licensed dentist:

- (1) Assisting the licensed dentist who is actually performing a dental procedure on the patient, that includes: preparing procedural trays/armamentaria set-ups; retracting a patient's oral tissues to maintain the field of operation during the dental procedure; removing debris, as is normally created and accumulated during or after operative procedures by the dentist; placing and removing the rubber dam; mixing dental materials; and transferring dental instruments or any other concept of four-handed dentistry the dentist requires to perform the procedure;
- (2) Assisting the licensed dental hygienist in the performance of the duties of the dental hygienist; provided the assistance does not include procedures included in section 16-79-69.5 and section 16-79-69.10;
- (3) Collecting medical and dental histories, taking intra-oral and extra-oral photographs, and recording or charting clinical findings as dictated by the licensed dentist or dental hygienist;
- (4) Completing prescription and authorization forms for drug or restorative, prosthodontic or orthodontic appliance for the supervising licensed dentist whereby the dentist signs the forms;
- (5) Conducting mouth mirror supragingival inspections and reporting observations to the supervising licensed dentist; provided that this is not interpreted as an oral cancer screening;
- (6) Exposing, processing, mounting, and labeling radiographs;
- (7) Making impressions for study casts, opposing models, occlusal appliances (e.g., splints, bite guards), mouth guards, orthodontic retainers, and medicament trays;
- (8) Making intra-oral measurements for orthodontic procedures, performing the preliminary selection and sizing of bands; checking for loose bands and bonded brackets; placing and removing orthodontic separators, ligature ties, and inter-arch elastics (i.e., chain elastics and rubber bands); fitting and removing head appliances; and removing arch wires;
- (9) Measuring and recording vital signs;
- (10) Monitoring the nitrous oxide/oxygen unit and reporting to the supervising dentist any adverse observations, provided the licensed dentist evaluates, initiates, and administers the sedation;
- (11) Placing matrix retainers;

- (12) Placing non-aerosol topical anesthetics;
- (13) Relating pre-operative and post-operative instructions, and patient education in oral hygiene as instructed by the supervising licensed dentist or dental hygienist;
- (14) Removing dressing and sutures;
- (15) Removing excess supragingival cement after a licensed dentist has placed a permanent or temporary prosthetic restoration, appliance, or orthodontic bands with hand instruments; and
- (16) Performing a try-in with any removable prosthetic or orthodontic appliance, provided the supervising licensed dentist makes the adjustments.

(b) The board requires the supervising licensed dentist to appropriately train or provide training to dental assistants which shall include, but not be limited to:

- (1) Proper sterilization and disinfection procedures which meet the guidelines of:
 - (A) The U.S. Department of Labor Occupational Safety and Health Administration bloodborne pathogen standards;
 - (B) The State of Hawaii Department of Labor and Industrial Relations Occupational Health and Safety bloodborne pathogen standards;
 - (C) The CDC prevention guidelines; and
 - (D) The ADA Clinical Practice Guidelines;
- (2) Ethics;
- (3) Proper record keeping and patient confidentiality; and
- (4) CPR.

The training courses shall be provided by sponsors pursuant to section 16-79-142. [Eff and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-3, 448-6)

§16-79-69.5 Prohibited duties of dental assistants. A dental assistant shall not perform the following intra-oral functions or any other activity deemed to be irreversible as to cause change in the affected hard or soft tissues and is permanent or may require reconstructive or corrective procedures; and any other activity which represents the practice of dentistry and dental hygiene or requires the knowledge, skill, and training of a licensed dentist or licensed dental hygienist:

- (1) Administering local anesthetic, sedation, or general anesthesia;

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- (2) Cementing, bonding, and adjusting any part of a prosthesis or appliance worn in the mouth;
- (3) Cementing or re-cementing, finishing margins, performing a try-in, and adjusting the occlusion of any temporary or permanent fixed prosthetic restoration; or placing cement bases;
- (4) Cementing bands and brackets, or activating any orthodontic appliance;
- (5) Establishing occlusal vertical dimension, making bite registrations, and making face-bow transfers;
- (6) Examining, diagnosing, or prescribing a treatment plan;
- (7) Making final impressions, which would lead to the fabrication of any appliance or prosthesis which, when worn by the patient, would come in direct contact with hard or soft tissues with the exception of duties listed in section 16-79-69.1(a)(7);
- (8) Performing any endodontic procedure to ream, file, irrigate, medicate, dry, try-in cores, or fill root canals; establishing the length of the tooth;
- (9) Performing any surgical or cutting procedures on hard or soft tissues, extracting teeth, and suturing;
- (10) Placing, condensing, carving, finishing, or adjusting the occlusion of final restorations; or placing cavity liners, medicaments, or pulp cap materials;
- (11) Placing materials subgingivally, including but not limited to, prescriptive medicaments, retraction cords, and other devices used for tissue displacement;
- (12) Prescribing medications or authorizing the fabrication of any restorative, prosthodontic, or orthodontic appliances;
- (13) Testing pulp vitality; and
- (14) Using of ultrasonic instruments and polishing natural or restored surfaces. [Eff and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-3, 448-6)

§16-79-69.10 Allowable duties of licensed dental hygienists. (a) A licensed dental hygienist may perform the procedures as delineated under section 447-3, HRS, as well as all of the allowable duties of a dental assistant listed in section 16-79-69.1. Also, a licensed dental hygienist may perform the following procedures pursuant to the delegation of and under the direct supervision of a licensed dentist:

- (1) Administering intra-oral infiltration and intra-oral block anesthesia in accordance with the provisions of section 16-79-76;
- (2) Administering prescriptive treatments and chemotherapeutic agents (i.e., application or placement of supragingival and subgingival prescription drugs, including but not limited to, fluoride desensitizers, antimicrobial rinses and local delivery antibiotics), as prescribed by the licensed dentist;
- (3) Applying pit and fissure sealants;
- (4) Performing non-surgical clinical and laboratory oral diagnostic tests, (e.g., pulp vitality test) for interpretation by the licensed dentist;
- (5) Performing non-surgical periodontal scaling and root planing, and periodontal maintenance;
- (6) Performing dental prophylaxis, coronal polish natural or restored surfaces, and removing overhangs;
- (7) Placing periodontal dressing;
- (8) Collecting, documenting, and assessing the comprehensive patient data that may include screenings for oral cancer, periodontal chartings, indices, and risk assessments which identify dental hygiene needs;
- (9) Establishing the dental hygiene care plan that reflects dental hygiene goals and strategies; and
- (10) Providing dental hygiene care which may include, but is not limited to, pain management, full mouth debridement, care of restorations, behavior modification, preventive health education and nutrition counseling as it relates to oral health.

(b) In a public health setting as allowed pursuant to section 447-3(d), HRS, a licensed dental hygienist may perform the procedures describe in subsection (a) under the general supervision of a licensed dentist. [Eff and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-3, 448-6)

§16-79-69.15 Prohibited duties of licensed dental hygienists. No licensed dentist shall allow a licensed dental hygienist who is in the dentist's employ or is acting under the dentist's supervision or direction to perform any of the procedures disallowed for dental assistants except for those duties specifically allowed for dental hygienists in section 447-3, HRS, and in this chapter. [Eff and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-3, 448-6)

§16-79-70 Repealed. [R 2/9/89]

§16-79-71 Penalty. Any person or association practicing dentistry in the State who fails to comply with or makes false statements to provisions of this chapter shall be guilty of a failure to comply with chapter 448, HRS, and shall be punished as provided in this chapter. [Eff 11/21/74; am and ren §16-79-71, 2/13/81; am and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-3, 448-6)

SUBCHAPTER 8

ANESTHESIA

§16-79-75 Definitions. For purposes of this subchapter, the following definitions are applicable:

"Analgesia" means the diminution or elimination of pain in a conscious patient.

"Certified nurse anesthetist" means a licensed nurse with special training in all phases of anesthesia.

"Deep sedation" means a drug-induced, depression of consciousness accompanied by a partial loss of protective reflexes during which patients cannot be easily aroused, but respond purposefully to physical stimulation or verbal command. Patients under deep sedation may require assistance in maintaining a patent airway and spontaneous ventilation may be inadequate.

"Infiltration anesthesia" means local anesthetic solution deposited near the terminal nerve endings in the area of prospective dental treatment.

"Moderate (conscious) sedation" means a drug-induced, depression of consciousness that allows a patient to maintain protective reflexes, retain the ability to independently and continuously maintain a patent airway, and respond purposefully to light tactile stimulation or verbal command.

"Nitrous oxide analgesia" means an inhalation analgesic that allows a patient to maintain protective reflexes, retain the ability to independently and continuously maintain a patent airway, and respond appropriately to light tactile stimulation or verbal command.

"Pediatric patients" means, for purposes of the BLS requirements, patients twelve years or younger. [Eff 10/7/76; am and ren §16-79-75, 2/13/81; comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-1, 448-6)

§16-79-76 Administration of local anesthesia. (a) Any licensed dentist may administer local anesthesia.

(b) Any licensed dental hygienist may administer intra-oral local infiltration, intra-oral block anesthesia, or both under the direct supervision of a licensed dentist, upon meeting the following:

(1) A licensed dental hygienist may apply to the board for certification to administer intra-oral infiltration local anesthesia by providing to the board documentation of having been certified by a CODA accredited dental hygiene school or by a certification program approved by the board.

(2) A licensed dental hygienist may apply to the board for certification to administer intra-oral block anesthesia by providing to the board documentation which shall include:

(A) A certificate of completion from a CODA accredited dental hygiene school or by a certification program approved by the board; and

(B) Program documentation or transcript listing the intra-oral block anesthesia categories, the course content, and number of injections that are consistent with section 447-3.5, HRS.

(c) The board certification to administer intra-oral block anesthesia procedures shall automatically expire upon the revocation or suspension of the license to practice dental hygiene. [Eff 10/7/76; am and ren §16-79-76, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 447-3, 447-3.5, 448-1, 448-6)

§16-79-77 Administration of sedation and analgesia. A licensed dentist may administer nitrous oxide and a single oral sedative medication administered in an appropriate dose to reduce anxiety. [Eff 10/7/76; am and ren §16-79-77, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-1, 448-6)

§16-79-78 Administration of general anesthesia and sedation. (a) A licensed dentist shall administer general anesthesia and sedation consistent with the current guidelines and recommendations of the American Dental Association Guidelines for the Use Of Sedation and General Anesthesia by Dentist; provided that for pediatric patients the American Academy of Pediatrics and the American

Academy of Pediatric Dentistry Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures shall be followed. No licensed dentist shall administer or employ another person, such as a nurse anesthetist or a physician, who is otherwise qualified in this State to administer general anesthesia, deep sedation, or moderate (conscious) sedation for dental patients, unless the licensed dentist possesses a written authorization or permit from the board. Sedation is continuum and it is not always possible to predict how an individual will respond. Therefore, a licensed dentist intending to produce a given level of sedation shall have the capability to rescue patients whose level of sedation becomes deeper than initially intended.

(b) In order to receive a written authorization or permit, the licensed dentist shall apply to the board, pay an application fee, and submit documentary evidence showing that the following requirements are met:

(1) Educational training requirements.

(A) General anesthesia and deep sedation: Applicant has completed an advanced dental education program accredited by CODA and approved by the board that provides comprehensive training necessary to administer deep sedation or general anesthesia and includes documented proficiency in Basic Life Support for Healthcare Providers and Advanced Cardiac Life Support or Pediatric Advanced Life Support as required pursuant to subsection 16-79-141(a)(2). Evidence of that comprehensive training shall include but not be limited to: being a Diplomate of the American Board of Oral and Maxillofacial Surgery, a Fellow/member of the American Association of Oral and Maxillofacial Surgery or completion of an ADA accredited residency in Oral and Maxillofacial Surgery or Dental Anesthesiology and shall practice in compliance with that training.

(B) Moderate (conscious) sedation: Applicant has completed a comprehensive training program at the postgraduate level that meets the moderate (conscious) sedation program objectives and content as outlined in the current ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students. The training program shall be a minimum of sixty hours of instruction, include supervised management of at least twenty moderate (conscious) sedation patients with clinical experience in managing the compromised airway and establishment of intravenous

access, and provide current documented proficiency in Basic Life Support for Healthcare Providers and Advanced Cardiac Life Support or Pediatric Advanced Life Support as required pursuant to sub section 16-79-141(a)(2).

- (C) A dentist administering general anesthesia or moderate sedation shall be required to complete the Advanced Cardiac Life Support course or if treating pediatric patients, the Pediatric Advanced Life Support course; provided that both courses shall be completed if the dentist is treating pediatric patients and minors thirteen years or older.
- (2) In lieu of the requirements in paragraph (1)(A) and (B), a licensed dentist may receive a written authorization or permit to use general anesthesia, deep sedation or moderate (conscious) sedation, if the licensed dentist employs or works in conjunction with a physician licensed pursuant to chapter 453, HRS, who specializes in anesthesiology or a certified registered nurse anesthetist who holds a license in good standing pursuant to chapter 457, HRS, provided that the physician who specializes in anesthesiology or certified registered nurse anesthetist shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility.
- (3) Facilities and staff requirements. Applicant has a properly equipped facility for the administration of general anesthesia, deep sedation, or moderate (conscious) sedation staffed with a supervised team of auxiliary personnel capable of reasonably handling anesthesia procedures, problems, and emergencies incident thereto. The current ADA Guidelines for the Use of Sedation and General Anesthesia by Dentists and the current American Association of Oral and Maxillofacial Surgery Office Anesthesia Evaluation Manual are referenced as minimum standards of care. Adequacy of the facility and competence of the anesthesia team may be determined by the consultants appointed by the board as outlined below in this chapter.
 - (c) Prior to the issuance of a written authorization or permit, the board may, at its discretion, require an on-site inspection of the facility, equipment, and personnel to determine whether the facilities and staff requirements have been met. This evaluation to determine whether the facility is adequate and properly equipped, may be carried out in a manner and generally following the guidelines, standards, requirements, and basic principles as described in the current American Association of Oral and Maxillofacial Surgeons Office Anesthesia Manual. The inspection and evaluation shall be carried out by a team of consultants appointed by the board.

(d) The board shall appoint a team of advisory consultants to conduct the on-site inspection and evaluation of the facilities, equipment, and personnel of a licensed dentist applying for a written authorization or permit to administer or to employ a qualified person to administer general anesthesia, deep sedation, or moderate (conscious) sedation; thereafter, re-inspections may be conducted. The advisory consultants shall also aid the board in the adoption of criteria and standards relative to the regulation and control of general anesthesia, deep sedation, or moderate (conscious) sedation.

(e) A licensed dentist who has received a written authorization or permit to administer or to employ a qualified person to administer general anesthesia, deep sedation, or moderate (conscious) sedation shall renew the authorization or permit biennially and pay a biennial fee.

(f) The board may, at any time, reevaluate the credentials, facilities, equipment, personnel, and procedures of a licensed dentist who has previously received a written authorization or permit from the board to determine if the dentist is still qualified to have a written authorization or permit. If the board determines that the licensed dentist is no longer qualified to have a written authorization or permit, it may revoke or refuse to renew the authorization, after an opportunity for a hearing is given to the licensed dentist.

(g) A licensed dentist who currently has a written authorization or permit to administer general anesthesia or sedation may continue to administer general anesthesia or sedation without the need to meet the additional requirements under subsection (b). However, if that dentist's license becomes forfeited that dentist shall file a new application and comply with all of the requirements of this section in existence at the time of the application. [Eff 10/7/76; am and ren §16-79-78, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-1, 448-6)

§16-79-79 Reporting of adverse occurrences. (a) All licensed dentists in the practice of dentistry in this State shall submit a report within a period of thirty days to the board of any mortality or other incident which results in temporary or permanent physical or mental injury requiring hospitalization of a patient during or as a direct result of anesthesia related thereto. The report shall include at the minimum responses to the following:

- (1) Description of the dental procedure;
- (2) Description of the physical condition of the patient unless the patient has a Class I status as defined by the American Society of Anesthesiologists;

- (3) List of drugs and dosage administered;
- (4) Detailed description of techniques utilized in administering the drugs utilized;
- (5) Description of the adverse occurrence:
 - (A) Symptoms of any complications, including but not limited to onset and type of symptoms of the patient;
 - (B) Treatment instituted on the patient;
 - (C) Response of the patient to the treatment; and
- (6) Description of the patient's condition on termination of any procedure undertaken.
 - (b) Failure to comply with subsection (a) when the occurrence is related to the use of general anesthesia, deep sedation, or moderate (conscious) sedation shall result in the loss of the written authorization or permit of the licensed dentist to administer or to employ another person to administer general anesthesia, deep sedation, or moderate (conscious) sedation. [Eff 10/7/76; am and ren §16-79-79, 2/13/81; am and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-7) (Imp: HRS §§448-1, 448-6)

SUBCHAPTER 9

FEES

§16-79-83 Fees. The license and examination fees for licensed dentists and licensed dental hygienists shall be as provided in chapter 16-53, relating to fees for boards and commissions. [Eff 11/7/64; am 8/3/70; am 10/26/70; am and ren §16-79-83, 2/13/81; am and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §§92-28, 448-6) (Imp: HRS §§92-28, 448-6)

SUBCHAPTER 10

PRACTICE AND PROCEDURE

§16-79-84 Administrative practice and procedure. The rules of practice and procedure for licensed dentists and licensed dental hygienists shall be as provided in chapter 16-201, the rules of practice and procedure of the department of commerce and consumer affairs which are incorporated by reference and made a part of this chapter. [Eff and comp 2/9/89; comp 8/20/90; comp 2/9/01; comp 2/9/02; am and

comp 1/27/14; comp 8/22/16] (Auth: HRS §§91-2, 448-6) (Imp: HRS §§91-2, 448-6, 448-18)

SUBCHAPTER 11

ORAL TESTIMONY

§16-79-85 Oral testimony. (a) The board shall accept oral testimony on any item which is on the agenda, provided that the testimony shall be subject to the following conditions:

- (1) Each person seeking to present oral testimony shall so notify the board not later than forty-eight hours prior to the meeting, and at that time shall state the item on which testimony is to be presented;
- (2) The board may request that any person providing oral testimony submit the remarks, or a summary of the remarks, in writing to the board;
- (3) The board may rearrange the items on the agenda for the purpose of providing for the most efficient and convenient presentation of oral testimony;
- (4) Persons presenting oral testimony shall identify themselves and the organization, if any, that they represent at the beginning of the testimony;
- (5) The board may limit oral testimony to a specified time period but in no case shall the period be less than five minutes, and the person testifying shall be informed prior to the commencement of the testimony of the time constraints to be imposed; and
- (6) The board may refuse to hear any testimony which is irrelevant, immaterial, or unduly repetitious to the agenda item on which it is presented.

(b) Nothing in this section shall require the board to hear or receive any oral or documentary evidence from a person on any matter which is the subject of another proceeding pending subject to the hearings relief, declaratory relief or rule relief provisions of chapter 16-201.

(c) Nothing in this section shall prevent the board from soliciting oral remarks from persons present at the meeting or from inviting persons to make presentations to the board on any particular matter on the board's agenda. [Eff and comp 2/9/89; comp 8/20/90; am and comp 2/9/01; comp 2/9/02; comp 1/27/14; comp 8/22/16] (Auth: HRS §§92-3, 448-6) (Imp: HRS §§92-3, 448-6)

SUBCHAPTER 12

LICENSURE EXAMINATION REMEDIATION

§§16-79-90 to 16-79-113 Repealed. [R 1/27/14]

§16-79-114 Postgraduate studies after three failures. Any applicant who has three failures on the ADEX dental examination shall successfully complete a postgraduate course of one full semester or trimester in operative and prosthetic dentistry at an accredited dental college before the applicant shall be eligible to take the ADEX dental examination again. The course completion shall be evidenced by a certificate filed with the board. [Eff and comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6,) (Imp: HRS §§448-6, 448-17)

§16-79-115 Repealed. [R 1/27/14]

SUBCHAPTER 13

§§16-79-116 to 16-79-137 Repealed. [R 1/27/14]

SUBCHAPTER 14

CONTINUING EDUCATION

§16-79-140 Purpose. The rules in this part are intended to effectuate the provisions of section 448-8.5, HRS, relating to the CE program requirements. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-141 Continuing education categories. (a) All eligible CE categories shall be relevant to the care and treatment of patients and shall consist of the following required categories:

- (1) Clinical courses:

- (A) Shall be directly related to the provision of oral health care and treatment of patients;
 - (B) Shall be comprised of more than one half of the required CE hours per biennium for each dentist; and
 - (C) Shall be comprised of more than one half of the required CE hours per biennium for each dental hygienist;
- (2) BLS courses:
- (A) Shall be completed, continuously current, and include a hands-on component;
 - (B) Shall be sponsored by the American Heart Association, the American Red Cross, or from a sponsoring organization approved pursuant to section 16-79-143;
 - (C) Shall be a Basic Life Support for Healthcare Providers course;
 - (D) A dentist administering general anesthesia or moderate sedation shall be required to complete the Advanced Cardiac Life Support course or if treating pediatric patients, the Pediatric Advanced Life Support course; provided that both courses shall be completed if the dentist is treating pediatric patients and minors thirteen years or older;
 - (E) Shall be limited to a maximum of four CE hours per biennium; and
 - (F) All BLS courses shall not be credited toward fulfilling the clinical course requirements of subsection (a)(1)(B) or (C);
- (3) Ethics courses:
- (A) Ethics course of at least two hours per biennium for dental hygienists; and
 - (B) Ethics course of at least three hours per year for dentists;
- (b) Other eligible categories include:
- (1) Non-clinical courses which are related to the practice of dentistry or dental hygiene including, but not limited to, patient management, practice management, ethics and the law;
 - (2) Volunteer hours:
 - (A) Participation in the promotion of oral health;
 - (B) Participation in the licensure examination calibration; and
 - (C) Shall be limited to a maximum of four CE hours per biennium;
 - (3) Didactic, clinical or non-clinical oral health instructor's hours shall be limited to a maximum of two CE hours per biennium; and
 - (4) Attendance hours:

- (A) During any convention of the ADA and its recognized component organizations or the ADHA and its recognized component organizations; and
- (B) Shall be limited to a maximum of two CE hours per biennium.
- (c) Courses in estate planning, membership, marketing, business, personal financial planning, and investments shall not be eligible CE categories.
- (d) Licensees may satisfy the CE program requirements in the required categories listed in subsection (a)(1) or in the other eligible categories listed in subsection (b) through computer, correspondence courses, or courses presented via other media, such as audio and video tape recording; provided that those courses do not comprise more than eight CE hours. [Eff and comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-142 Approved sponsoring organizations. Licensees shall comply with the CE program requirements by completing the requisite number of hours from courses offered

by the following sponsoring organizations approved by the board, provided the courses meet the eligibility requirements of section 16-79-141:

- (1) Academy of General Dentistry approved CE providers;
- (2) Accreditation Council for Continuing Medical Education certified CE providers;
- (3) ADA and its recognized specialty organizations;
- (4) ADA Continuing Education Recognition Program approved CE providers;
- (5) ADHA;
- (6) American Academy of Dental Hygiene;
- (7) American Council on Pharmaceutical Education;
- (8) American Heart Association;
- (9) American Medical Association;
- (10) American Red Cross;
- (11) CODA accredited programs;
- (12) Dental assistant programs as approved by the board;
- (13) Hawaii Department of Health;
- (14) Joint Commission on Accreditation of Healthcare Organizations accredited hospitals;
- (15) Regional and state testing agencies as it relates to the courses and calibration sessions;

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- (16) State dental associations and their component dental societies; and
- (17) State dental hygienists' associations and their components. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-143 Requirements for approval by the board. (a) Sponsoring organizations who are not listed in section 16-79-142, shall be required to apply to the board on a form prescribed by the board prior to the course event. The sponsoring organization shall comply with all requirements, policies, and standards set forth by the board.

(b) Courses shall comply with the provisions in section 16-79-141. Sponsoring organizations shall submit the following:

- (1) A detailed outline which provides course content, total hours of the course, and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care; and
- (2) A curriculum vitae of each instructor of the course.
- (c) A certificate of attendance shall be issued to each attendee and

include the following:

- (1) Name of sponsoring organization;
- (2) Course or program title and date;
- (3) Course or program approval number;
- (4) Number of CE hours; and
- (5) Name of attendee. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-144 Biennial renewal. At the time of the biennial renewal, not later than December 31 of each odd-numbered year, each licensee shall have completed the CE program requirements for the two calendar years preceding the renewal date as follows:

- (1) Licensed dentist:
 - (A) Dentists initially licensed in the first year of the biennium shall have completed sixteen CE hours;
 - (B) Dentists initially licensed in the second year of the biennium shall not be required to complete any CE hours; and
 - (C) All other dentists shall have completed thirty-two CE hours.
 - (D) In addition to subsections (A), (B), or (C) above, after January 1, 2016, each licensee who is a dentist shall complete at least three hours of ethics training per year.

- (2) Licensed dental hygienist:
 - (A) Dental hygienists initially licensed in the first year of the biennium shall have completed ten CE hours;
 - (B) Dental hygienists initially licensed in the second year of the biennium shall not be required to complete any CE hours; and
 - (C) All other dental hygienists shall have completed twenty CE hours.
- (3) Except as provided in section 16-79-147, the failure of a licensee to present evidence of compliance with the CE program requirements shall constitute a forfeiture of license, which may be restored pursuant to section 16-79-3.1. [Eff and comp 2/9/02; am and comp 1/27/14; am and comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-145 Record keeping. (a) Licensees shall maintain original documentation showing evidence of attendance for four years after completion of any CE course.

(b) Evidence of attendance from the sponsoring organization approved by the board may include the following:

- (1) The certificate of attendance;
- (2) The name of the licensee;
- (3) The name of the eligible course or program;
- (4) The name of the sponsoring organization;
- (5) The date and place where the course or program was held; and
- (6) The number of the eligible credit hours. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-146 Certification of compliance and audit. (a) At the time of renewal, each licensee shall certify on the renewal application that the licensee has satisfied all of the CE requirements.

(b) The board may audit and shall require any licensee to submit copies of the original documents or evidence of attendance to be attached to the summary form provided by the board. The board may require additional evidence demonstrating the licensee's compliance with the CE requirements. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

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§16-79-147 Waiver or modification of requirements. (a) Any licensee seeking renewal of license without full compliance of the CE requirements shall submit:

- (1) A written request for waiver or modification of the CE requirements, with an explanation why the waiver or modification is being sought; and
- (2) Other supporting documents.

(b) The board may grant a waiver or modification of the CE requirements based on:

- (1) Full time service in the armed forces of the United States;
- (2) An incapacitating illness documented by a licensed physician;
- (3) Being disabled and unable to practice dentistry or dental hygiene documented by a licensed physician;
- (4) Being retired from practice and not performing any dental or dental hygiene services; or
- (5) Undue hardship or any other extenuating circumstances. [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

§16-79-148 Penalty for false certification. A false certification to the board by a licensee shall be deemed a violation of this chapter and chapters 447 and 448, HRS, as applicable, and subject the licensee to disciplinary proceedings." [Eff and comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-8.5)

