Oregon Board of Dentistry  
Attn: Stephen Prisby, Executive Director  
1500 SW 1st Ave, Suite #770  
Portland Oregon, 97201

Re: Notice of Proposed Rulemaking, filed 4/27/2018

August 2, 2018

Dear Members of the Oregon Board of Dentistry:

Thank you for the opportunity to provide comment on the Board of Dentistry’s proposed changes to administrative rules. We recognize the importance of clearly defined OARs, ensuring both the public’s protection, and licensee understanding of relevant rules. We offer the comments below for your consideration in our effort to assist in this process. We welcome any additional conversation on these items.

**Tele-dentistry**

Given that the Board of Dentistry’s role is to protect the public in Oregon and monitor Oregon licensees, we encourage the Board to consider clarifying that tele-dentistry, for the purpose of these rules, is the act of an Oregon licensed dentist serving a patient located in Oregon.

**Specialty Recognition**

We encourage the BOD to appoint a workgroup to examine necessary statute and rule changes to reflect the recent changes made at the ADA on specialty recognition.

**Public Health Specialist**

- The ODA is concerned with the precedent that would be set with the proposed definition limiting and defining where a particular specialist may practice and who the specialist may treat. No other specialist is defined in such ways within the Dental Practice Act.
- The ODA is concerned that this change is being requested based on very few cases before the Board, rather than an indication of a large-scale concern that should be addressed.
- This specialty track is often used as an entry point for foreign-trained dentists to enter the Oregon workforce without a CODA accredited general dentistry education. There is no way to ensure that a public health dentist is trained to perform clinical dentistry. The broadness in current rule reflects this variance rather than indicating specifically that such a specialist is allowed to practice clinical dentistry.
• If this Board would like to define that a public health specialist can practice in a clinical setting, we strongly believe that the practitioner must graduate from a CODA approved general dentistry program, or equivalent, ensuring that the individual has clinical expertise.
• However, if this Board would like to limit or define any specialists’ scope, and/or acceptable practice locations, we respectfully submit that the conversation should be inclusive of all specialties, and should examine appropriate education, training, and other qualifications. Further, we submit that this conversation needs to be outside of the rules process and engage a larger stakeholder group.

Emergency Protocols

We are concerned that asking licensees to maintain a written protocol for emergency response will be ineffective, not increase patient safety, and lead to complacency. Written protocols can be purchased and do not insure patient safety. We suggest what would be more helpful would be maintaining a written log of emergency drills where licensees and their staff practice skills that can save a patient’s life in the event of an anesthetic emergency.

Thank you again for the opportunity to comment on these rules. We look forward to working through these considerations with you.

Sincerely,

President Bruce Burton, DMD
on behalf of the Oregon Dental Association Board of Trustees