

South Dakota State Board of Dentistry

Board Meeting Agenda

10:00 a.m. Central / Friday June 24, 2022

Drifters Event Center -- 325 E. Hustan Avenue Ft. Pierre SD 57532

- 1) Call to Order**
- 2) Open Forum:** 5 minutes for the public to address the Board
- 3) Approval of Minutes:** January 14, 2022 and April 25, 2022
- 4) Adoption of Agenda**
- 5) Financial Report**
- 6) Office Update**
- 7) Program Updates**
 - a. Dental Assisting Program: Southeast Technical College
 - b. Dental Assisting Program: Western Dakota Tech
- 8) Executive Session - SDCL 1-25-2(3)**
- 9) Licensing/Applications**
- 10) Compliance/Legal**
- 11) New Business**
 - a. Draft Administrative Rules
 - b. Wellbeing Program Funding Request: *SD Dental Association*
 - c. Course Reviews: Permit to Monitor, Host Permit, Moderate Sedation Permit & Other
 - d. Policies & Procedures Review
 - e. Continuing Education Guidelines Review
 - f. Elections
 - g. Appointments: Anesthesia Credentials Committee (ACC) Members & Other
 - h. Membership Approval: American Association of Dental Boards (AADB) & American Association of Dental Administrators (AADA)
 - i. Travel Approval: AADB Meetings (2 Attendees) & AADA Meetings (1 Attendee)
 - j. Meeting Dates
- 12) Announcements:** Next Meetings – October 21, 2022 and January 13, 2023.
- 13) Adjourn**

SD State Board of Dentistry
Board Meeting
Teleconference
Friday January 14, 2022

President Dr. Harold Doerr called the meeting to order at 10:07 am Central.

Board Members Present: Dr. Harold Doerr, Dr. Nick Renemans, Dr. Tara Schaack, Dr. Scott Van Dam, Dr. Brian Prouty, Zona Hornstra and Molly Fulton.

Board Staff Present: Brittany Novotny, Lisa Harsma, Shelly Munson, Megan Borchert, and Matthew Templar.

Others Present: Paul Knecht, Ann Schwartz, Bobbie Will, Dr. Kevin Haiar, Tia Meyer, Dr. Cody Gronsten, Catherine Baumann and Dr. Peter Baragona.

Doerr called for public testimony during the open forum. There was no public testimony.

Motion to approve the minutes of the October 22, 2021 board meeting and public rules hearing by Hornstra. Second by Schaack. Motion carried.

Motion to adopt the agenda by Van Dam. Second by Hornstra. Motion carried.

Motion to approve the financial report by Renemans. Second by Hornstra. Motion carried.

Novotny provided an office update.

Motion to move into Executive Session pursuant to SDCL 1-25-2 (3) consulting with legal counsel and (4) contracts by Van Dam. Second by Fulton. Motion carried. The Board went into Executive Session at 10:15 am.

Motion to move out of Executive Session by Hornstra. Second by Fulton. Motion carried. The Board moved out of Executive Session at 11:45 am.

Motion to approve the dentist regular applications of Josue Gerardo Covarrubians, Duong Dai Ly and Michael C Ottaviano by Hornstra. Second by Schaack. Motion carried.

Motion to approve the dental hygienist regular applications of Kimberlee Ann Elmore, Mayra Gonzalez, Courtney Marie Kurtz, and Daniela Rojas by Hornstra. Second by Fulton. Motion carried.

Motion to approve the dentist credential verification applications of Fleur Arden Berbos, Jay Khorsandi, David Lee Porter, Erwin John Rewwer, Preston Michael Schraeder, and Garret Andrew Thorlakson by Hornstra. Second by Schaack. Motion carried.

Motion to approve the dental hygienist credential verification application of Aftan Darlene Bacon and Shakhnoza Haydar by Hornstra. Second by Schaack. Motion carried.

Motion to approve the dental hygienist military application of Courtney Ann Kennedy by Hornstra. Second by Schaack. Motion carried.

Novotny provided an overview of the proposed anesthesia inspection process.

Motion to allow practitioners that currently have a pending full inspection due in 2022 to utilize the existing inspection process to complete the 2022 full inspection if they so choose by Van Dam. Second by Hornstra. Motion carried.

Motion to adopt the revised anesthesia inspection process and documents, as presented, and authorize the anesthesia committee consisting of Dr. Van Dam, Dr. Prouty and Dr. Doerr to make adjustments, as necessary and in compliance with ARSD 20:43:09, by Schaack. Second by Renemans. Motion carried.

Motion to approve Dr. Michael Pruett as an anesthesia inspector pursuant to ARSD 20:43:09:11 by Van Dam. Second by Renemans. Motion carried. Dr. Michael Pruett is the director of continuing education at the Dental College of Georgia and is co-director of the American Academy of Implant Dentistry Comprehensive Training Program in Implant Dentistry Maxi-Course at the Dental College of Georgia.

Motion to adopt the policy, as presented, that would include a composition of the Anesthesia Credentials Committee (ACC) that includes three General Anesthesia and Deep Sedation permit holders, three Moderate Sedation permit holders and one Host permit holder by Van Dam. Second by Schaack. Motion carried. The Board advised that interested parties will be able to apply for open ACC positions and information regarding that process will be posted on the Board's website this spring.

Motion to approve the South Dakota Dental Association (SDDA) 2022 speaker honorarium application for \$7,500 for Dr. Daniel G Pompa to present "Actions & Algorithms for Medical Emergencies" and "To Pull or Not to Pull" by Schaack. Second by Renemans. Motion carried.

Paul Knecht with the SDDA provided an update on the Dental Wellness Program.

Catherine Baumann, representative of the ADA National Commission on Recognition of Dental Specialties and Certifying Boards (National Commission), presented information from the National Commission.

Dr. Peter Baragona, President of the American Board of Dental Specialties (ABDS), presented information from the ABDS.

Motion to approve the proposed declaratory ruling, as presented by the Board's general counsel, by Renemans. Second by Hornstra. Motion carried. Van Dam was recused.

Motion to approve the non-disciplinary, medical related order for Dr. Diana Latinow by Renemans. Second by Schaack. Motion carried.

Motion to approve the FY 2023 contracts by Van Dam. Second by Schaack. Motion carried.

The Board announced the following meeting dates: June 24, 2022, October 21, 2022 and January 13, 2023.

Motion to move into Executive Session pursuant to SDCL 1-25-2 (3) consulting with legal counsel by Schaack. Second by Fulton. Motion carried. The Board went into Executive Session at 1:45 pm.

Motion to move out of Executive Session by Fulton. Second by Schaack. Motion carried. The board moved out of Executive Session at 2:34 pm.

Motion to adjourn by Hornstra. Second by Fulton. Motion carried. The meeting was adjourned at 2:38 pm.

Zona Hornstra, Secretary

SD State Board of Dentistry
Board Meeting
Teleconference
Monday April 25, 2022

President Dr. Harold Doerr called the meeting to order at 6:39 pm Central.

Board Members Present: Dr. Harold Doerr, Dr. Nick Renemans, Dr. Tara Schaack, Dr. Scott Van Dam, Dr. Brian Prouty, and Zona Hornstra.

Board Staff Present: Brittany Novotny, Lisa Harsma, and Shelly Munson.

Doerr called for public testimony during the open forum. There was no public testimony.

Motion to adopt the agenda by Renemans. Second by Hornstra. Motion carried.

Motion to move into Executive Session pursuant to SDCL 1-25-2 (3) consulting with legal counsel by Hornstra. Second by Renemans. Motion carried. The Board went into Executive Session at 6:40 pm.

Motion to move out of Executive Session by Schaack. Second by Hornstra. Motion carried. The board moved out of Executive Session at 8:15 pm.

Motion to adjourn by Hornstra. Second by Van Dam. Motion carried. The meeting was adjourned at 8:15 pm.

Zona Hornstra, Secretary

Remaining Authority by Object/Subobject

Expenditures current through 06/04/2022 10:20:52 AM

HEALTH -- Summary

FY 2022 Version -- AS -- Budgeted and Informational

FY Remaining: 7.4 %

09202	Board of Dentistry - Info						PCT
Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	AVL
EMPLOYEE SALARIES							
5101030	Board & Comm Mbrs Fees	9,516	1,320	0	0	8,196	86.1
Subtotal		9,516	1,320	0	0	8,196	86.1
EMPLOYEE BENEFITS							
5102010	Oasi-employer's Share	876	101	0	0	775	88.5
Subtotal		876	101	0	0	775	88.5
51 Personal Services							
Subtotal		10,392	1,421	0	0	8,971	86.3
TRAVEL							
5203030	Auto-priv (in-st.) H/rte	1,500	0	0	0	1,500	100.0
5203070	Air-charter-in State	22,000	15,450	0	0	6,550	29.8
5203100	Lodging/in-state	1,266	0	0	0	1,266	100.0
5203130	Non-employ. Travel-in St.	2,500	0	0	0	2,500	100.0
5203140	Meals/taxable/in-state	305	0	0	0	305	100.0
5203150	Non-taxable Meals/in-st	200	0	0	0	200	100.0
5203260	Air-comm-out-of-state	1,000	0	0	0	1,000	100.0
5203330	Non-employ Travel-out-st.	3,000	0	0	0	3,000	100.0
Subtotal		31,771	15,450	0	0	16,321	51.4
CONTRACTUAL SERVICES							
5204010	Subscriptions	300	872	0	0	-572	0.0
5204020	Dues & Membership Fees	5,000	2,960	0	0	2,040	40.8
5204030	Legal Document Fees	0	634	0	0	-634	0.0
5204050	Computer Consultant	34,400	6,035	26,866	0	1,499	4.4
5204060	Ed & Training Consultant	3,307	0	0	0	3,307	100.0
5204080	Legal Consultant	28,616	44,697	0	0	-16,081	0.0
5204090	Management Consultant	268,000	244,451	25,252	0	-1,703	0.0
5204100	Medical Consultant	40,000	23,045	226,956	0	-210,001	0.0
5204130	Other Consulting	7,000	4,361	63,827	0	-61,188	0.0
5204160	Workshop Registration Fee	2,000	475	0	0	1,525	76.3
5204181	Computer Services-state	316	125	0	0	191	60.4
5204190	Computer Services-private	500	872	0	0	-372	0.0
5204200	Central Services	3,209	4,074	0	0	-865	0.0
5204203	Central Services	203	0	0	0	203	100.0
5204204	Central Services	1,211	1,821	0	0	-610	0.0
5204207	Central Services	1,016	267	0	0	749	73.7

Remaining Authority by Object/Subobject

Expenditures current through 06/04/2022 10:20:52 AM

HEALTH -- Summary

FY 2022 Version -- AS -- Budgeted and Informational

FY Remaining: 7.4 %

09202	Board of Dentistry - Info						PCT
Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	AVL
5204220	Equipment Serv & Maint	0	390	0	0	-390	0.0
5204360	Advertising-newspaper	400	257	0	0	143	35.8
5204480	Microfilm & Photography	500	0	0	0	500	100.0
5204510	Rents-other	725	900	0	0	-175	0.0
5204530	Telecommunications Srvcs	4,000	34	0	0	3,966	99.2
5204550	Garbage & Sewer	0	60	0	0	-60	0.0
5204590	Ins Premiums & Surety Bds	1,500	1,155	0	0	345	23.0
5204960	Other Contractual Service	12,000	6,430	0	0	5,570	46.4
Subtotal		414,203	343,915	342,901	0	-272,613	0.0
SUPPLIES & MATERIALS							
5205020	Office Supplies	1,100	955	0	0	145	13.2
5205310	Printing-state	1,000	1,125	0	0	-125	0.0
5205320	Printing-commercial	1,600	0	0	0	1,600	100.0
5205350	Postage	4,500	2,213	0	0	2,287	50.8
5205390	Food Stuffs	500	541	0	0	-41	0.0
Subtotal		8,700	4,834	0	0	3,866	44.4
GRANTS AND SUBSIDIES							
5206070	Grants To Non-profit Org	7,500	0	0	0	7,500	100.0
Subtotal		7,500	0	0	0	7,500	100.0
OTHER							
5208010	Other	500	0	0	0	500	100.0
Subtotal		500	0	0	0	500	100.0
52 Operating							
Subtotal		462,674	364,199	342,901	0	-244,426	0.0
Total		473,066	365,620	342,901	0	-235,455	0.0

BA0225R5 06/04/2022

STATE OF SOUTH DAKOTA
REVENUE SUMMARY BY BUDGET UNIT
FOR PERIOD ENDING: 05/31/2022

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AGENCY 09 HEALTH
BUDGET UNIT 09202 BOARD OF DENTISTRY - INFO

CENTER	COMP	ACCOUNT	DESCRIPTION	CURRENT MONTH	YEAR-TO-DATE
COMPANY NO	6503				
COMPANY NAME	PROFESSIONAL & LICENSING BOARDS				
092020061807	6503	4293005	DENTIST CREDENTIAL	1,000.00	13,900.00
092020061807	6503	4293015	HYGIENIST CREDENTIAL	200.00	3,200.00
092020061807	6503	4293105	DENTIST NEW LICENSE	1,200.00	3,750.00
092020061807	6503	4293110	DENTIST LICENSE RENEWAL	12,240.00	15,130.00
092020061807	6503	4293115	DENTIST JP EXAM	2,025.00	11,700.00
092020061807	6503	4293125	DENTIST REINSTATE LICENSE	.00	675.00
092020061807	6503	4293135	DENTIST NITROUS OXIDE	200.00	800.00
092020061807	6503	4293137	DENTIST NITROUS RENEW	1,440.00	1,720.00
092020061807	6503	4293140	DENTIST MODERATE SEDATION	.00	50.00
092020061807	6503	4293145	DENTIST MOD SEDAT RENEW	50.00	100.00
092020061807	6503	4293150	DENTIST GA/DEEP SEDATION	.00	100.00
092020061807	6503	4293152	DENTIST GA/DEEP SED RENEW	.00	50.00
092020061807	6503	4293160	DENTIST HOST PERMIT LIC	50.00	100.00
092020061807	6503	4293205	HYGIENIST NEW LICENSE	1,500.00	2,600.00
092020061807	6503	4293210	HYGIENIST RENEWAL LICENSE	4,370.00	8,360.00
092020061807	6503	4293215	HYGIENIST JP EXAM	1,840.00	4,830.00
092020061807	6503	4293220	HYGIENIST ANESTH RENEW	840.00	1,910.00
092020061807	6503	4293222	HYGIENIST ANESTHESIA	480.00	1,400.00
092020061807	6503	4293225	HYGIENIST REINSTATE	345.00	1,150.00
092020061807	6503	4293235	HYGIENIST NITROUS OXIDE	520.00	1,200.00
092020061807	6503	4293237	HYGIENIST NIT OXIDE RENEW	820.00	1,460.00
092020061807	6503	4293305	RADIOLOGY NEW	520.00	6,680.00
092020061807	6503	4293307	RADIOLOGY RENEWAL	1,560.00	3,080.00
092020061807	6503	4293315	RADIOLOGY REINSTATE	40.00	1,000.00

STATE OF SOUTH DAKOTA
REVENUE SUMMARY BY BUDGET UNIT
FOR PERIOD ENDING: 05/31/2022

AGENCY 09 HEALTH
BUDGET UNIT 09202 BOARD OF DENTISTRY - INFO

CENTER	COMP	ACCOUNT	DESCRIPTION	CURRENT MONTH	YEAR-TO-DATE	
092020061807	6503	4293405	ADA EXPANDED FUNCTION NEW	80.00	3,600.00	
092020061807	6503	4293410	ADA EXPAND FUNCTION RENEW	1,060.00	2,280.00	
092020061807	6503	4293415	ADA EXPAND FUNCT REINSTAT	.00	680.00	
092020061807	6503	4293420	ADA EXPAND FUNC ADMIN NIT	.00	2,360.00	
092020061807	6503	4293422	ADA EXPAND FUNC NIT RENEW	420.00	1,100.00	
092020061807	6503	4293505	CORPORATE NEW LICENSE	.00	1,000.00	
092020061807	6503	4293510	CORPORATE RENEWAL	125.00	1,425.00	
092020061807	6503	4293600	TEMP LICENSE	350.00	2,950.00	
092020061807	6503	4293850	COLLABORATIVE SUPERVISION	20.00	60.00	
ACCT:	4293	BUSINESS & OCCUP LICENSING (NON-GOVERNMENTAL)		33,295.00	100,400.00	*
ACCT:	42	LICENSES, PERMITS & FEES		33,295.00	100,400.00	**
092020061807	6503	4595000	VERIFICATION LETTERS	125.00	1,325.00	
092020061807	6503	4595800	LIST OF PRACTITIONERS	300.00	6,600.00	
ACCT:	4595			425.00	7,925.00	*
ACCT:	45	CHARGES FOR SALES & SERVICES		425.00	7,925.00	**
092020061807	6503	4920045	NONOPERATING REVENUES	.00	8,731.74	
ACCT:	4920	NONOPERATING REVENUE		.00	8,731.74	*
ACCT:	49	OTHER REVENUE		.00	8,731.74	**
CNTR:	092020061807			33,720.00	117,056.74	***
CNTR:	092020061			33,720.00	117,056.74	****
CNTR:	0920200			33,720.00	117,056.74	*****
COMP:	6503			33,720.00	117,056.74	*****
B UNIT:	09202			33,720.00	117,056.74	*****

BA1409R1

STATE OF SOUTH DAKOTA
CASH CENTER BALANCES
AS OF: 05/31/2022

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AGENCY: 09 HEALTH
BUDGET UNIT: 09202 BOARD OF DENTISTRY - INFO

COMPANY	CENTER	ACCOUNT	BALANCE	DR/CR	CENTER DESCRIPTION
6503	092000061807	1140000	383,081.47	DR	BOARD OF DENTISTRY
COMPANY/SOURCE TOTAL 6503 618			383,081.47	DR *	
COMP/BUDG UNIT TOTAL 6503 09202			383,081.47	DR **	
BUDGET UNIT TOTAL 09202			383,081.47	DR ***	

Southeast Technical College

Dental Assisting Program Update

June 2022

Purpose:

To provide the South Dakota State Board of Dentistry an update on the dental assisting program and any developments related to the CODA application.

- The second class of dental assistant students ended with twenty students successfully completing the Spring semester course work. Students are currently completing a 10-week clinical rotation at general and specialty dental offices in the region. Clinical placements include dental offices in Sioux Falls, Harrisburg, Tea, Madison, Hartford, Brandon, Aberdeen, Spencer, Iowa and Alexandria, Minnesota. Several of the students have secured employment following the completion of their clinical rotations. Students expressed interest in remaining in the Sioux Falls region to gain employment. Students are encouraged to register and complete the DANB certification. Several students have initiated this process. Students completed the Dental Radiography course Spring Semester, now upon completion students can apply to the State Board of Dentistry for their Dental Radiography Certification.
- The Fall 2022 enrollment is full at 26 registered students.
- The fully operational CODA application was submitted December 2021. CODA responded with a request for clarification and supplemental information to be provided by August 2022. We are currently working to obtain this addition information and we are on schedule to submit the requested information by June 30th, 2022. The Commission will initiate its comprehensive review of the application following the August deadline.

WESTERN DAKOTA TECH

800 Mickelson Dr. • Rapid City, SD 57703

p. (800)544-8765 p. (605)394-4034 f. (605)394-2204

Dear Members,

We will be hearing from CODA by the end of August to find out if we have met their requirements for accreditation.

This year we had 10 students in the dental assisting program and of those 9 went on to clinical.

Next school year will be the first year with Build Dakota scholarship program. We had 5 candidates apply and of them 4 of the applicants were awarded a Build Dakota scholarship and will begin the program starting August 2022. I would like to give a huge thanks to the two industry sponsors Black Hills Oral Surgery and Meyer Dana Orthodontics.

If you have any questions on the Build Dakota scholarship program, please contact:

Andrew Kapelewski
Asst. Director of Scholarships
Western Dakota Technical College
605-718-3061

I am excited for the new school year and hope to bring more to the dental community through the dental assisting program here at Western Dakota Technical College.

If you have any questions, feel free to contact me.

Sincerely,

Chanin Hartnett | BA, CDA, RDA

Dental Assisting Program Director

Western Dakota Tech

800 Mickelson Dr. | Rapid City, SD 57703

T: 605.718.3057 | F: 605.394.1789

Chanin.Hartnett@wdt.edu

WESTERN
DAKOTA
TECH

DENTAL ASSISTING PROGRAM

Dentist Credential		
First Name	Middle Name	Last Name
Michael	David	Andes
Adam	Charles	Erickson
Kyle	Andrew	Hanson
Kenneth	Gordon	Heaton Jr
Maurine	Elizabeth	Heesch
John	Anthony	Junghans
Matthew	Thomas	McGuire
Joseph	Matthew	Olson
Susan	Kha	Olson
Donald		Pollard
Stephanie	Edwarda	Steckel
Paul	Matheson	Stevens
Birgitta	Ursula	Warvarovsky
Carol	Louise	Wiese

Dentist New		
First Name	Middle Name	Last Name
Kathleen	Bernadette	Bartunek
Erin	Kaye	Briggs
Kayla	Jo	DeJong
Corby	Katharina	Goetzinger
Jade	Emily Jean	Koch
Blake	Nicole	Kuiper
Miranda	Lynn	Lommen-Mielke
Joseph	Justin	McNish
Abigail	Hope	Peters
Ryan	Michael	Peters
Christopher	Philip	Pritchard
Pierce		Smith
Casi	Jo	Sutherland
Andrew	Robert	Wilson

Hygienist Credential		
First Name	Middle Name	Last Name
Jordan	Nicole	Allen
Bailey	Ann	Buchman
Sandie	Kay	Carpenter
Sarah	Jeanette	Clifford
Miranda	Alexandrea	Drake
Teresa	Marie	Gohla
Trela	Dawn	Knueven
Robinson		Larraga

Hygienist Military		
First Name	Middle Name	Last Name
Nicole	Felice	Bishop

Collaborative Supervision		
Dental Hygienist	Supervising Dentist	Location(s)
Elaine Vogel	Hilary Haley	FQHC- multiple locations
Rachel Sutter	Jason Aanenson	Nursing Home
Patti Mehlhaf	Jason Aanenson	Nursing Home

Hygienist New		
First Name	Middle Name	Last Name
Flannery	Marie	Berreth
Keegan	Rae	Campbell
Telishia	Lynn	Farley
Taylor	Marie	Fredrick
Stormy	Lee	Gimbel
Sierra	Marie	Hansen
Tess	Corinne	Hokanson
Kellyn	Logan	Jackson
Tessa	Ann	Johnson
Emily	Nicole	Knouse
Nicole	Marie	Koons
Anna	Marie	Larson
Micah	Marie	Miller
Suzanne	Lynn	Putze
Cassidy	Rose	Rippentrop
Emily	Marie	Ronning
Kayla	Patricia	Sautner
Micah	Jo	Schaeftbauer
Karen	Marie	Smith
Gabrielle	Lynn	Snell
Amanda	Grace	Waltner
Courtney	Marie	Waterbury
Brianna	Lynn	Zens
Sarah	Diane	Zimmerman

DRAFT UPDATES - ADVERTISING ADMINISTRATIVE RULES (ARSD 20:43:04:01):

Draft updates to Advertising and Specialty Advertising (ARSD 20:43:04:01) Administrative Rules were presented for public input. Stakeholder comments received are attached.

1. To advertise as a “specialist” or advertise using terms “specializes,” “specializing,” or another variation of the term:
 - a. **National Commission on Recognition of Dental Specialties and Certifying Boards of the American Dental Association (ADA):**
 - i. If the dentist is a diplomate of, or educationally qualified for, a national certifying board of a specialty recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards of the American Dental Association (ADA):
 1. The dentist may advertise as a “specialist” or advertise using terms “specializes,” “specializing,” or another variation of the term.
 - ii. If the dentist meets the qualifications in 1.a.i. and would like to advertise as a “specialist,” or advertise using terms “specializes,” “specializing,” or another variation of the term, in a procedure or operation that falls within the dentist’s ADA recognized specialty:
 1. The procedure or operation must fall within the scope of the ADA recognized specialty; and
 2. The advertisement must include a disclaimer “*(name of clinical procedure or operation) is not recognized as a separate specialty by the American Dental Association but is included in (name of announced specialty area of dental practice).*”
 - b. **American Board of Dental Specialties (ABDS) or American Board of Oral Implantology (ABOI):**
 - i. If the dentist is a diplomate of the American Board of Oral Implantology (ABOI) or a diplomate of a national certifying board of a specialty recognized by the American Board of Dental Specialties (ABDS) and is advertising a specialty that is not recognized by the ADA, the advertisement must include a disclaimer “*(name of announced specialty area of dental practice) is not recognized as a specialty by the American Dental Association.*”

2. Declaration to the public of a specialty practice or the inference of specialty status outside of this section is unprofessional conduct as defined in § 36-6A-59.1(13);
3. A specialist must avoid any implication that another dentist associated with the same practice or entity is a specialist, unless that dentist also meets the requirements of this section;
4. Any dentist may announce an “emphasis” in any area of dental practice without violating this section;
5. Each licensee who is a director, manager, partner, shareholder, contracted employee or licensed professional employee, acting as an agent of the entity identified in an advertisement, is jointly and severally responsible for the form and content of any advertisement offering services or materials;
6. The Board may require a dentist to substantiate the truthfulness of any assertion or representation of material fact set forth in an advertisement. At the time an advertisement is placed, the dentist must possess and rely upon information which, when produced, would substantiate the truthfulness of any assertion, omission, or representation of material fact set forth in the advertisement. The failure to possess and rely upon the information required at the time the advertisement is placed is unprofessional conduct as defined in § 36-6A-59.1(13). The failure or refusal to provide to the Board the factual substantiation to support a representation or assertion when requested by the Board is unprofessional conduct as defined in § 36-6A-59.1(13);
7. A recording of every advertisement communicated by electronic media and a copy of every advertisement communicated by print media indicating the date and place of the advertisement must be retained by the dentist for a period of one year and be made available for review upon request by the board or its designee.

Stakeholder Feedback Form (Draft Advertising/Specialty Advertising Administrative Rules)

Please complete the following form to submit feedback on draft revisions to the Advertising/Specialty Advertising Administrative Rules. The draft revisions can be found at <https://www.sdboardofdentistry.org>. Feedback must be submitted by 5pm Central on June 3, 2022. Following that date, the feedback will be reviewed and the draft may be modified accordingly. Thank you for your feedback and participation in this process.

Name: *

Paul Knecht

If you are representing an organization, entity, or person other than yourself - please list that organization, entity, or person below:

SD Dental Association

Email: *

Telephone: *

1a. Page number(s) and Section number(s) that feedback pertains to. Please include only one * area for feedback per question.

Pages 1 & 2

1b. Feedback to content of page(s) and section(s) referenced above: *

The SDDA Board of Trustees supports the proposed rules as drafted. The Trustees recommend that the Board provide an easy and clear way for the public to learn which South Dakota dentists are recognized as specialists.

1c. Please provide a link to any article or document that pertains to your feedback above:

2a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

2b. Feedback to content of page(s) and section(s) referenced above:

2c. Please provide a link to any article or document that pertains to your feedback above:

3a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

Stakeholder Feedback Form (Draft Advertising/Specialty Advertising Administrative Rules)

Please complete the following form to submit feedback on draft revisions to the Advertising/Specialty Advertising Administrative Rules. The draft revisions can be found at <https://www.sdboardofdentistry.org>. Feedback must be submitted by 5pm Central on June 3, 2022. Following that date, the feedback will be reviewed and the draft may be modified accordingly. Thank you for your feedback and participation in this process.

Name: *

Carolina Hernandez

If you are representing an organization, entity, or person other than yourself - please list that organization, entity, or person below:

American Academy of Implant Dentistry

Email: *

Telephone: *

1a. Page number(s) and Section number(s) that feedback pertains to. Please include only one * area for feedback per question.

Section 1.a.i.1

1b. Feedback to content of page(s) and section(s) referenced above: *

The AAID supports truthful and full information for the public as they choose their provider. Rules regarding advertising should be equally applicable to all practitioners, regardless of which recognition body is being referenced.

As such, we recommend that Section 1.a.i.1 include a section 1.a.i.2.

2. Dentists advertising a specialty that is defined by the National Commission on Recognition of Dental Specialties and Certifying Boards must clearly state in all such advertising and/or public promotions that their specialty has been defined by the National Commission on Recognition of Dental Specialties and Certifying Boards, and upon request, promptly provide additional information to the public.

1c. Please provide a link to any article or document that pertains to your feedback above:

<https://www.legis.iowa.gov/docs/iac/chapter/04-20-2022.650.26.pdf>

The Iowa dental board rules 26.4(6) "include the name of the national certifying board and the name of the entity which recognizes the board in the advertisement."

2a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

1.b.i

2b. Feedback to content of page(s) and section(s) referenced above:

So that the advertising rules are applied equally, we recommend that section 1.b.i should be revised:

If the dentist is a diplomate of the American Board of Oral Implantology (ABOI) or a diplomate of a national certifying board of a specialty recognized by the American Board of Dental Specialties (ABDS):

DELETE [and is advertising a specialty that is not recognized by the ADA, the advertisement must include a disclaimer "(name of announced specialty area of dental practice) is not recognized as a specialty by the American Dental Association."]

2c. Please provide a link to any article or document that pertains to your feedback above:

.....

3a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

1.b.i

.....

3b. Feedback to content of page(s) and section(s) referenced above:

So that the advertising rules are applied equally, we recommend that section 1.b.i should be revised and 1.b.i.1 added:

1. Dentists advertising a specialty that is defined by the American Board of Dental Specialties (ABDS) must clearly state in all such advertising and/or public promotions that their specialty has been defined by the American Board of Dental Specialties (ABDS), and upon request, promptly provide additional information to the public.

.....

3c. Please provide a link to any article or document that pertains to your feedback above:

.....

4a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

.....

4b. Feedback to content of page(s) and section(s) referenced above:

.....

Stakeholder Feedback Form (Draft Advertising/Specialty Advertising Administrative Rules)

Please complete the following form to submit feedback on draft revisions to the Advertising/Specialty Advertising Administrative Rules. The draft revisions can be found at <https://www.sdboardofdentistry.org>. Feedback must be submitted by 5pm Central on June 3, 2022. Following that date, the feedback will be reviewed and the draft may be modified accordingly. Thank you for your feedback and participation in this process.

Name: *

Kevin Haiar

If you are representing an organization, entity, or person other than yourself - please list that organization, entity, or person below:

Email: *

Telephone: *

1a. Page number(s) and Section number(s) that feedback pertains to. Please include only one *
area for feedback per question.

General Comments

1b. Feedback to content of page(s) and section(s) referenced above: *

The boards proposed rule causes me a great deal of concern, as I was under the impression they had consulted with Dr. Frank Recker, DDS, JD, who has represented many other states in updating their outdated specialty advertising regulations. The specific case noted below I will reference is in regards to the recent ruling in Texas, although there is a plethora of other examples as to my knowledge not a single state has had rules such as our proposals passed without challenge.

Key points you will find in the Texas case which should be a great example for us, is that the state dental board "failed to explain why blind reliance on the ADA is not more stifling of commercial speech than reasonably necessary"

Arguing that ADA is the "standard bearer" was not acceptable to allow them to "blindly defer to ADA's choice of specialty areas".

Reason being is that it -- "does not account for the risk that a non-ADA recognized specialty board or credentialing organization could meet the standards of integrity set by the ADA but still not be recognized as a specialty for political or economic reasons.

In addition - "wholesale deference to the ADA risks suppressing the truthful speech of dentists who have achieved high levels of training, education, or experience but have not successfully petitioned ADA for specialty recognition

If the concern that a non ADA specialist advertising may be "potentially misleading" -- "the state board has a burden to demonstrate the harms it recites are real and that is restriction will in fact alleviate them to a material degree"

Otherwise this -- "creates discriminatory classifications between dentists who have obtained designations as ADA recognized specialists and those who have obtained professional dental credentials in areas of dentistry not recognized as a specialty by the ADA."

The proposed rule relying on ADA designation is an "unconstitutional delegation of legislative authority to the ADA"

"first, requiring -- non-ADA recognized specialists to include a disclaimer that their specialty area is not certified by the state or by the ADA would be a less extensive means of mitigating potential confusion than an outright ban" ---

"placed the burden on the state to show a disclaimer would not alleviate concerns about deception"
Must be ready to show the rule is "not more extensive than is necessary to serve that interest"

This has been done, over and over again. The ABOI/ID Diplomate credentials are bona-fide credentials and may not be limited. I strongly encourage each member proposing this to do much more thorough research into the subject matter before proposing a potentially harmful and overly restrictive ruling.

The disclaimer is not only MORE confusing, but overly burdensome. There are offices in this state advertising directly in their name/on their sign their specialty status. How could they be expected to include this "asterisk" on literally every piece of marketing and print material. It is simply not feasible.

I greatly look forward to the revision period for this so we are able to learn from other states proceedings with this and not try to re-invent the wheel.

1c. Please provide a link to any article or document that pertains to your feedback above:

Texas Case No. A-14-CA-191-SS

2a. Page number(s) and Section number(s) that feedback pertains to. Please include only one area for feedback per question.

Summary

2b. Feedback to content of page(s) and section(s) referenced above:

In summary - it is my opinion that the proposal must remove the requirement for a disclaimer for separate specialties not recognized by the ADA. This is completely irrelevant, confusing, and overly burdensome - somehow implying that a non-ADA recognized specialty is somehow not as reputable. There is clear precedent, especially in regards to the ABOI/ID Diplomate credentials, that if the State is proposing that this credential is not valid, the burden of proof will fall on them. Otherwise, it is completely unacceptable to require a disclaimer that essentially confuses and attempts to invalidate them.

2c. Please provide a link to any article or document that pertains to your feedback above:

Texas Case No. A-14-CA-191-SS

Brittany Novotny

From: Cody Gronsten
Sent: Wednesday, June 1, 2022 7:08 PM
To: Brittany Novotny
Cc: Dr. Frank Recker
Subject: Provider feedback

Follow Up Flag: Follow up
Flag Status: Flagged

Mrs. Novotny,

Please receive this as my feedback to ARDS 20:43:04:01. I could drone on citing legal cases of how the South Dakota State Board of Dentistry draft is unconstitutional. I will spare everyone and be very straight forward: The current draft limits my First Amendment right. If the board proceeds with this draft, I will proceed with legal action.

Thank you,

Cody E. Gronsten MS DDS AFAAID FAAID DABOI/ID

--

Cody E. Gronsten MS DDS DABOI/ID FAAID
American Board of Oral Implantology/Implant Dentistry
American Academy of Implant Dentistry
Creighton University School of Dentistry
Colorado State University Graduate School
Creighton University Undergraduate School

Dental Health Partners
240 E. 23rd Ave
Mitchell, SD 57301
(605) 996-1316
CodyGronsten@gmail.com

Brittany Novotny

From: CDF
Sent: Thursday, May 26, 2022 9:08 PM
To: Brittany Novotny
Subject: Re: ARDS feedback 20:43:04:01

Follow Up Flag: Follow up
Flag Status: Completed

Brittany,

Should a dentist advertise as a dental implant specialist they need to limit their practice to referrals, correspondence, and an ethical framework needs to be put in writing and followed or forfeiture of state SD specialty status.

On Thu, May 26, 2022 at 9:02 PM CDF <drdiazfreed@gmail.com> wrote:
Brittany,

I have serious concerns with validating any state regulations through the American Dental Association (ADA). The ADA is a trade organization and should not be cited for any rule making. The SDDA should have zero say in the making of state regulations due to cronyism and anti-competitive behavior in the dental community. This can be validated with previous anti-competitive behavior from members strongly affiliated that come from offices attempting to influence previous sedation regulations. Should you proceed with current proposals I feel that the state board will likely face legal action. My opinion is to follow what is happening in other states and cite that as the regulatory framework instead of the ADA, or have nobody advertise dental implants and let the court of public opinion decide the market. Currently, we have people that can be cited for advertising as dental implant specialists and this needs to be addressed (OS and GP) immediately (for or against). Making regulations where dentists are validated by peers against general dentists placing implants will be counterproductive and anti-competitive to that dentist and their business as these processes can be intentionally delayed. My recommendation is to follow the trends and not make them. I hope this helps.

Very Respectfully,

Chris Diaz-Freed

Brittany Novotny

From: Ed Kusek >
Sent: Thursday, May 19, 2022 8:30 PM
To: Brittany Novotny
Cc: Carolina Hernandez; Frank Recker
Subject: speciality status

Brittany, hope the annual meeting for South Dakota was enjoyable and fruitful. I and the Legal Oversight committee for AAID reviewed your initial proposal for speciality status for South Dakota law. I and the committee found it totally unacceptable to terms we discussed twice via Zoom meetings. The state of Oregon has settled out of litigation and recently state of Michigan has submitted changes to their advertising for speciality status. The wording that would be more acceptable is as follows:

Michigan-licensed dentists may truthfully advertise themselves as "Specialists" or "Board Certified" or "Having a Specialty" in implantology / dental implants, provided that such a designation is accurate based on credentials awarded by the American Academy of Implant Dentistry ("AAID"), its certifying board, the American Board of Oral Implantology / Implant Dentistry ("ABOI/ID"), or another organization recognized by the American Board of Dental Specialties ("ABDS").

I hope we can come to acceptable terms with re-writing of your initial proposal before it goes to public viewing. If you have more specific question please, let us set up another call.

Thanks

Edward R Kusek DDS DABOI FAAID

Vice president of AAID chairman of legal oversight committee of AAID

Brittany Novotny

From: Ed Kusek
Sent: Thursday, June 2, 2022 11:28 AM
To: Brittany Novotny
Cc: Carolina Hernandez
Subject: Fwd: Aboi

FYI

Begin forwarded message:

From: suheil boutros <smboutros@gmail.com>
Subject: Re: Aboi
Date: June 2, 2022 at 8:15:44 AM CDT
To: Ed Kusek <edkusek@me.com>

Hi Ed,

As a dual Board Certified Periodontist and Implantologist, I can testify that implant dentistry is not taught as a full scope of practice during the graduate periodontics program. For a Dentist to claim expertise in implant dentistry, he/she should be proficient in the surgical and restorative aspects; the only Board that tests that knowledge and experience is the American Board of Oral Implantology (ABOI).

Hope this helps

Suheil

Suheil Michael Boutros, DDS, MS, FACD, FICD
Periodontal Specialists of Grand Blanc, Clarkston & Flint
8185 Holly Road, Suite 19 ~ Grand Blanc, Michigan 48439 ~ (810) 695-6444 ~ Fax (810) 695-4414
www.periodonticonline.com

Diplomate, the American Board of Periodontology
Diplomate, the American Board of Oral Implantology/Implant Dentistry
Fellow, the Academy of Osseointegration
Assistant Professor, the University of Michigan

Brittany Novotny

From: Ed Kusek
Sent: Thursday, June 2, 2022 4:58 PM
To: Brittany Novotny
Cc: Carolina Hernandez
Subject: Fwd: ABOI

Begin forwarded message:

From: Joe Leonetti <jal3658@aol.com>
Subject: Re: ABOI
Date: June 2, 2022 at 4:54:40 PM CDT
To: Ed Kusek <edkusek@me.com>

Ed,

As a Diplomate of the American Board of Oral and Maxillofacial Surgery and the American Board of Oral Implantology/Implant Dentistry, I am happy to provide insight regarding the value of being a dual Boarded Specialist.

As an Oral Surgeon in private practice, I provide a full scope of surgical procedures ranging from dental extractions, ridge preservation, trauma, sinus augmentation, implant placement, pathology, orthognathic reconstruction, and many others. In the past 25 years, dental Implantology has provided all Dentists the opportunity to deliver state of the art surgical and restorative procedures for our patient family. Nevertheless, the percentage of US Dental colleagues that provide Dental Implant services is still far behind our international colleagues. As a specialist, I recognized that my residency surgical training did not include comprehensive exposure to all surgical and prosthetic components of a successful Implant practice. For that reason, by participating in a number of continuing education programs throughout the years, as well as my association with the American Academy of Implant Dentistry (AAID) and the American Board of Oral Implantology/implant Dentistry provided invaluable additional training with capstone achievement of Diplomate status with ABOI.

As the 2022 President of the American Board of Oral Implantology/implant Dentistry, I recognize that specialized training in Implant dentistry is an excellent route for all general Dentists as well as ADA recognized Specialists to gain the necessary expertise to provide excellent care for our patients. My ABOI/ID training and certification is an excellent complement to my existing training as an Oral Surgeon. I recommend all specialists challenge the ABOI/ID Board for Diplomate status.

Sincerely,

Dr. Joseph Leonetti

ABOI President 2022

Sent from my iPhone

- Submitted by Dr. Jason Leet -

Dr. Denis Miller
Dr. Louis T. George
Dr. Jason Leet

7.

South Dakota Board of Dentistry,

June 3rd 2022

Regarding the proposed changes to the Advertising and Specialty Advertising (ARSD 20:43:04:01) Administrative Rules

Good afternoon. We as a practice wanted to clarify our stance on the question of specialty advertising. It is not the board certification that confers the degree or specialty status, it is the full time residency at a CODA approved institution that does. So the discussion about a certifying testing body is actually irrelevant to the status of being recognized as a specialist. We would be in favor of board certification by entities such as American Board of Dental Specialties (ABDS) in addition to the ADA/CODA recognized boards for the primary reason that the ABDS requires at least a two-year (3,800 hrs.) residency at a Commission on Dental Accreditation (CODA) approved institution to qualify to sit for the proposed examination and in that grouping they include implantology that has no formal residency but may qualify under a GPR or AGD program. The proposal then seems to deviate from that standard in order to use the American Board of Oral Implantology (ABOI) as the certifying body for implantology and that completely negates the ABDS requirement of two years (3,800hrs) of full time training. ABOI, on their website, only requires 670 hrs. of implant mentorship and part-time related CE with limited hands-on mentorship training (and no training to surgical competence as in a full time residency). The two groups (ABDS and ABOI) are inconsistent in their requirements to sit for the boards and that must be resolved. If Implantology is to be recognized as a true specialty, then that specialty must follow the same rules as general dentistry and true dental specialties do. That is, training to competence in a full-time course of study/residency at a CODA approved institution, not mentorship, not CE, not part time. This is what the public understands and expects from advertising as a dental professional or specialist.

Perhaps, a more appropriate designation for implantology is to consider it a sub-specialty of Prosthodontics and allow advertising as an emphasis in implants as opposed to a full specialty, much the same way dental and medical specialties do. Since the training for implantology is at the mentorship level and CE level, and not as broad based or rigorous as that of full time residency training, calling it a Fellowship is incorrect. For instance, oral & maxillofacial surgeons, can complete a 1-2 year Fellowship (full time at a CODA approved institution) in cosmetic surgery or head and neck cancer surgery and reconstruction AFTER completing their specialty residency training and can advertise that fellowship, but they are still oral & maxillofacial surgeons not

cosmetic surgeon specialists or cancer specialists. In our current scenario this would allow for advertising of additional training with an emphasis or focus while at the same time clarifying to the public that the training is at the mentorship level and does not rise to the level of specialty residency training or fellowship training such as occurs in the specialty of Prosthodontics. Implantology is a field that is a small but significant part of the specialty of Prosthodontics and Oral Surgery and to call implantology a specialty on par with prosthodontics or oral surgery is inappropriate. The implantology prosthodontics skill set is inferior to a specialist prosthodontist and inferior to a specialist oral surgeon. Part time mentorship CE doesn't have the same standards as a CODA approved residency, and the CE to obtain the implantology designation is not uniform throughout the country as a CODA approved residency is, so the public has no assurance that the baseline training between practitioners is the same, or even if, it rises to even minimum competency let alone specialty competency as is seen in Prosthodontics and Oral Surgery. By adopting our framework, the Dental Board would be able to allow people that have completed the additional CE to be recognized for that work while being able to maintain the distinction between mentorship and true specialty training that the public has come to expect. Surveys have shown that the public does assume that the state has sanctioned /vetted any claim to specialty training and so the state does have an interest in regulating who is allowed to claim specialty status and who is not(The Supreme Court, however, overruled the 11 circuit court In *Borner v Brooks* Case Details: Richard A. BORGNER, American Academy of Implant Dentistry...Court: United States Court of Appeals, Eleventh Circuit Date published: Mar 6, 2002, Citations Copy Citation,284 F.3d 1204 (11th Cir. 2002)) based on their training NOT A TEST. In previous cases the courts based their decisions on whether or not the certifying body was responsible for granting specialty status and they are not, it is the residency training program that does in every specialty except implantology.

In the case of dentistry, it is the dental school that confers the degree of DDS/DMD. In the case of specialty training, it is the full-time residency training program with specific requirements that confers the certificate of completion...NOT THE TESTING BOARD. In addition, the AAID and CDCA boards both require less CE than ABDS or ABOI to become board certified so the Dental Board will have to establish a standard to even be able to accept alternative board certification entities. So, as you can see, the standard is continually getting diluted more and more. Our State Dental Board (and verified/supervised through DOH for independent oversight) must decide what the true state standard is. We submit to you that the standard is a full-time

training curriculum of at least two years and even three to six years for some specialties at a full-time training institution that is CODA approved. That pathway is consistent with what general dentistry requires to become a dentist and all other dental specialties require. CODA approved institutions are reviewed every seven years by the state for oversight for quality assurance and best practices whereas CE mentorship programs for implantology are not. Therefore, the same standard should be applied to CE courses that aim to “train to competence” practitioners into a specialty. If our state adopts the weak concept that a person can test into becoming a specialist, then the state must also accept that a person can potentially test into becoming a dentist. The current standard of full-time professional training and residency specialty training is very well established in dentistry, medicine, law and all of the major professions. It's in the name itself: training to competence while CE (Continuing Education) continues to expand on that aforementioned competence. CE does not train you to competence, it builds on already existing competency. If you cannot test into becoming a dentist, then you should not be able to test into becoming a specialist for the reasons given above.

Without an actual full-time educational requirement, the door is wide open for dental health therapists and other entities to gain competency via CE and to therefore “test into” becoming dentists once those mechanisms come into existence and eventually testing into become specialists. Do we want this? Of course we do not. Likewise, if the state adopts the use of CE as a substitute for full-time residency training, then the CE requirement should equal the hard hours spent during a residency and be of the same demanding quality as full-time training at a CODA approved institution. Clearly a two-year 3,800 hour residency to establish training to competence at the specialty level is superior to 670 hrs. of ABOI CE, or even 3,800 hrs. of part-time ABOI weekend CE.

Training to competency articles can be difficult to find but Malmstrom et al. (J Dent Educ. 2015 Jan;79(1):72-80 Training needs for general dentistry residents to place and restore two-implant-retained mandibular overdentures Hans Malmstrom 1, Jin Xiao 2, Georgios E Romanos 2 , Yan-Fang Ren 2) is one that clearly shows that it takes at least four to six cases to achieve competency in a very simple two-implant overdenture case at an AGD program, let alone other more complex cases. After researching ABDS, ABOI, AAID, CDCA, Maxi-Course and others, none of these bodies adequately address this training to competence issue. So by the science, the vast majority of mentorship programs are in violation of the scope of practice decision-making framework as published by the state. This highlights the difference between

mentorship programs and CE verses full time residency programs and training to competency. Clearly, more oversight is needed in the training to competency arena and allowing specialty advertising without a full time residency requirement is just the culmination of that failure.

Furthermore, we'd like to request that the SD Board of Dentistry (if they have not already) familiarize themselves with and evaluate entities that hold themselves out as programs that train to competence such as the Engel Institute (<https://engel institute.com>). This is a wonderful example of how poor the mentorship CE training is to "advance" through different levels of mentoring. As you examine the levels, the practitioner places one implant under supervision and then is let loose to experiment on the public to complete 20 cases before meeting the criteria to advance to mentoring levels 3 and 4 (we have in fact practitioners in South Dakota that have completed this course and others like it, they are experimenting on people right now). After completing level one they share full arch and "teeth in a day" cases with other CE weekend dentists, not even truly completing one case by themselves under supervision. Our Dental Board and the state have a vested interest in maintaining uniform training standards so the public can be assured of consistent quality training of practitioners. So the question therefore must be posed: Will our Board evaluate every CE course that a person submits for factual evidence of training to competence, or will it rely on the state to verify the course of study through CODA review of the given residency programs and their institutions? That puts an onerous burden on the Dental Board, that burden right now is shouldered by the CODA approved institutions which offer full-time residency training. If the state board is unwilling to be the credentialing body necessary to ensure quality training then the duty falls to the national governmental body in the form of CODA.

Our driving point is that board certification does NOT a specialist make; it's the full-time residency that does that. We have specialists in our own state, very recently in fact, who are allowed to practice because they completed a full-time, nationally accredited residency. They never sat for the boards; hence they are not board certified; but they still are classified as specialists. That is solid proof that the board certification test is not the means to become a specialist, the exam is immaterial to that. The purpose of the Boards is to show mastery of the specialty above and beyond that achieved by completing the full time residency and where you are vetted by specialists that are known to be the best in their fields, it is not a pass fail where if you fail you can not practice your specialty.

ABOI certification as a specialty is not “potentially misleading”, it is absolutely misleading. Why? Because applicants have not satisfied the requirement of the profession of dentistry nor of a dental specialty, by completing a full-time residency in a CODA approved institution. Wrapped up in the meaning of “specialist” is the very well-established time honored consensus that specialty training is full-time, performing multiple surgeries or procedures under supervision by senior multiple specialists over time. This is just as true in dentistry as it is for medicine. Medicine, for example, wouldn't allow a GP family practice medical doctor to take 670 hrs. of CE and then test into neurosurgery or cardiothoracic surgery. That would be insane, and yet that is exactly what is being proposed for dentistry. The certifying organization is the training program not the examination by a board. The state dental board has avenues for active yearly oversight by DOH/legislative supervision and can clearly articulate the standard, so the issues of California Retail Liquor Dealers Assn. v. Midcal Aluminum, Inc., 445 U. S. 97 are answered and the restriction of the proposal to accept, as valid, a full-time residency as the only qualification for being a specialist and not a test for becoming a specialist can remain intact.

There is no “restriction of trade” issue since all dentists are free to advertise as they please within their proper scope. Moreover, if they like, they can even claim an emphasis or area of additional training in Implantology (SUPREME COURT OF THE UNITED STATES Syllabus NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS v. FEDERAL TRADE COMMISSION CERTIORARI TO THE UNITED STATES COURT OF APPEALS FOR THE FOURTH CIRCUIT No. 13-534. Argued October 14, 2014—Decided February 25, 2015)

The Supreme Court, however, overruled the 11 circuit court In *Borner v Brooks* Case Details: Richard A. BORGNER, American Academy of Implant Dentistry...Court: United States Court of Appeals, Eleventh Circuit Date published: Mar 6, 2002, Citations Copy Citation, 284 F.3d 1204 (11th Cir. 2002) stating that surveys (Dr Scott Armstrong and Dr Kenneth Wald , admitted as evidence in *Ducoin vs Viamante* State of Florida and also in Fla. Bar, 515 U.S. at 626-28, 115 S.Ct. 2371; *Bingham v. Hamilton*, 100 F.Supp.2d 1233, 1240 (E.D.Cal. 2000)) show that the public will be misled by claims of specialization by organizations not certified as true full-time residencies or specialties by the ADA and CODA (According to the affidavit of Kenneth D. Wald, who has a doctorate in political science and is an expert in survey research, the survey clearly demonstrates that respondents rely heavily on the approval of the ADA in evaluating both general and specialized dentists. Eighty-one percent of all survey respondents indicated that they were more likely to visit a dentist if they knew the dentist was certified by the ADA. And,

over 80% indicated they would have more confidence in a dentist's ability if they knew the dentist was certified by the ADA, and 79% indicated they would be more willing to trust a dentist that they knew was ADA certified. Also, in selecting dentists to perform implantation, certification by the ADA was the major reason for selection following either personal or professional recommendation. Knowing that an implant specialist was certified as a specialist by an ADA approved board was either "Very" or "Somewhat" important to more than 79.2% of respondents. In fact, 81.3% were more likely to visit a dentist certified as a specialist by the ADA). That leads to the disclaimer requirement for "Implantologists" being directly upheld by the Supreme Court. So, it is now recognized as legal doctrine that "Implantologists" claiming to be specialists via the CE and testing route will mislead the public into thinking that they are true specialists that have gone through a full-time training from a CODA approved institution that is also sanctioned by the state (nearly two-thirds (63.8%) of the survey respondents believe that dentists who advertise as being "certified by a board as a specialist in a particular area" (i.e., advertise as being certified by the AAID in implant dentistry) have been directly or indirectly certified by the State of Florida). We believe that even the disclaimer is false advertising and that advertising that the practitioner has an emphasis or additional training via the part time mentorship CE route adequately informs the public of their training and that a higher level of training and competence is achieved by being designated as a specialist.

Specialists further limit their practice to that area of expertise so they can maintain their competency by completing enough cases to maintain not only proficiency, but mastery of their specialty. In the typical hospital credentialing process, that number is 100 cases per year for an oral and maxillofacial surgeon who has multiple skill sets to cross migrate all surgical phases of implant surgery. It's not only the prosthetic training that is in question regarding implantology and advertising, it is the scope of surgical training that is inadequate.

In the case we have before us, the six to eight dentists that are pushing for this change in advertising and even attempting to bully the board with a threat of a lawsuit, have in fact NOT limited their practices to specializing only in dental implant treatment, as is required of all other specialists. It seems that implantology desires to not follow any of the best practices of other specialty training and wants to have multiple exceptions in order to achieve specialty status.

Moving forward, though there may be eventual litigation of the board by the few in our state pushing for the ability to call themselves “specialists” (without meeting the standard of a full-time residency and seemingly performing unsupervised surgical experimentation on the public in obtaining this “specialty” designation), we would still ask our respected board to develop language that satisfies the concerns of the courts who have already rendered decisions:

1. It is completion of a full-time residency training program that confers the designation of specialist, not an exam.
2. That a residency training program (for Implantology) be at least two years in length at a CODA approved institution in order to qualify to sit for a certifying board that will be recognized by the state but still needs a disclaimer when advertising the specialty because it is not a recognized specialty by CODA.
3. That practitioners who go through testing bodies, that do not have those standards for “certifying” practitioners, be limited to advertising that they only have an emphasis or additional training in their area of choosing, but that the designation of “specialist” be preserved within the well-established and time-honored meaning of a full-time training program at a CODA approved institution.
4. When one advertises as a “Specialist”, then one must limit their practice to the scope of practice for that specialty. In the specific case of Implantology, that would mean that the “specialist” would only place and restore dental implants as well as the associated grafting procedures. They would, however, have to give up the field of general dentistry

We thank you for your attention,

Dr. Denis Miller

Dr. Louis T. George

Dr. Jason Leet

- Submitted by Dr. Denis Miller -

Dr. Denis Miller
Dr. Jason Leet
Dr. Louis T. George

8.

Good afternoon. We as a practice wanted to clarify our stance on the question of specialty advertising. It is not the board certification that confers the degree or specialty status, it is the full time residency at a CODA approved institution that does. So the discussion about a certifying testing body is actually irrelevant to the status of being recognized as a specialist. We would be in favor of board certification by entities such as American Board of Dental Specialties (ABDS) in addition to the ADA/CODA recognized boards for the primary reason that the ABDS requires at least a two-year (3,800 hrs.) residency at a Commission on Dental Accreditation (CODA) approved institution to qualify to sit for the proposed examination and in that grouping they include implantology that has no formal residency but may qualify under a GPR or AGD program. The proposal then seems to deviate from that standard in order to use the American Board of Oral Implantology (ABOI) as the certifying body for implantology and that completely negates the ABDS requirement of two years (3,800hrs) of full time training. ABOI, on their website, only requires 670 hrs. of implant mentorship and part-time related CE with limited hands-on mentorship training (and no training to surgical competence as in a full time residency). The two groups (ABDS and ABOI) are inconsistent in their requirements to sit for the boards and that must be resolved. If Implantology is to be recognized as a true specialty, then that specialty must follow the same rules as general dentistry and true dental specialties do. That is, training to competence in a full-time course of study/residency at a CODA approved institution, not mentorship, not CE, not part

time. This is what the public understands and expects from advertising as a dental professional or specialist.

Perhaps, a more appropriate designation for implantology is to consider it a sub-specialty of Prosthodontics and allow advertising as an emphasis in implants as opposed to a full specialty, much the same way dental and medical specialties do. Since the training for implantology is at the mentorship level and CE level, and not as broad based or rigorous as that of full time residency training, calling it a Fellowship is incorrect. For instance, oral & maxillofacial surgeons, can complete a 1-2 year Fellowship (full time at a CODA approved institution) in cosmetic surgery or head and neck cancer surgery and reconstruction AFTER completing their specialty residency training and can advertise that fellowship, but they are still oral & maxillofacial surgeons not cosmetic surgeon specialists or cancer specialists. In our current scenario this would allow for advertising of additional training with an emphasis or focus while at the same time clarifying to the public that the training is at the mentorship level and does not rise to the level of specialty residency training or fellowship training such as occurs in the specialty of Prosthodontics. Implantology is a field that is a small but significant part of the specialty of Prosthodontics and Oral Surgery and to call implantology a specialty on par with prosthodontics or oral surgery is inappropriate. The implantology prosthodontics skill set is inferior to a specialist prosthodontist and the Implantology surgical skill set is inferior to a specialist oral surgeon so on both counts Implantology

does not rise to the level of either specialty and therefore can not be a specialty in and of itself because it offers nothing additional to what already exists. Part time mentorship CE doesn't have the same standards as a CODA approved residency, and the CE to obtain the implantology designation is not uniform throughout the country as a CODA approved residency is, so the public has no assurance that the baseline training between practitioners is the same, or even if, it rises to even minimum competency let alone specialty competency as is seen in Prosthodontics and Oral Surgery. By adopting our framework, the Dental Board would be able to allow people that have completed the additional CE to be recognized for that work while being able to maintain the distinction between mentorship and true specialty training that the public has come to expect. Surveys have shown that the public does assume that the state has sanctioned /vetted any claim to specialty training and so the state does have an interest in regulating who is allowed to claim specialty status and who is not(The Supreme Court, however, overruled the 11 circuit court In *Borner v Brooks* Case Details: Richard A. BORGNER, American Academy of Implant Dentistry...Court: United States Court of Appeals, Eleventh Circuit Date published: Mar 6, 2002, Citations Copy Citation,284 F.3d 1204 (11th Cir. 2002)) based on their training NOT A TEST. In previous cases the courts based their decisions on whether or not the certifying body was responsible for granting specialty status and they are not, it is the residency training program that does in every specialty except implantology.

In the case of dentistry, it is the dental school that confers the degree of DDS/DMD. In the case of specialty training, it is the full-time residency training program with specific requirements that confers the certificate of completion...NOT THE TESTING BOARD. In addition, the AAID and CDCA boards both require less CE than ABDS or ABOI to become board certified so the Dental Board will have to establish a standard to even be able to accept alternative board certification entities. So, as you can see, the standard is continually getting diluted more and more. Our State Dental Board (and verified/supervised through DOH for independent oversight) must decide what the true state standard is. We submit to you that the standard is a full-time training curriculum of at least two years and even three to six years for some specialties at a full-time training institution that is CODA approved. That pathway is consistent with what general dentistry requires to become a dentist and all other dental specialties require. CODA approved institutions are reviewed every seven years by the state for oversight for quality assurance and best practices whereas CE mentorship programs for implantology are not. Therefore, the same standard should be applied to CE courses that aim to “train to competence” practitioners into a specialty. If our state adopts the weak concept that a person can *test* into becoming a specialist, then the state must also accept that a person can potentially *test* into becoming a dentist. The current standard of full-time professional training and residency specialty training is very well established in dentistry, medicine, law and all of the major professions. It's in the name itself: training to

competence while CE (Continuing Education) continues to expand on that aforementioned competence. CE does not train you to competence, it builds on already existing competency. If you cannot test into becoming a dentist, then you should not be able to test into becoming a specialist for the reasons given above.

Without an actual full-time educational requirement, the door is wide open for dental health therapists and other entities to gain competency via CE and to therefore “test into” becoming dentists once those mechanisms come into existence and eventually testing into become specialists. Do we want this? Of course we do not. Likewise, if the state adopts the use of CE as a substitute for full-time residency training, then the CE requirement should equal the hard hours spent during a residency and be of the same demanding quality as full-time training at a CODA approved institution. Clearly a two-year 3,800 hour residency to establish training to competence at the specialty level is superior to 670 hrs. of ABOI CE, or even 3,800 hrs. of part-time ABOI weekend CE.

Training to competency articles can be difficult to find but Malmstrom et al.

(J Dent Educ. 2015 Jan;79(1):72-80 Training needs for general dentistry residents to place and restore two-implant-retained mandibular overdentures Hans Malmstrom 1, Jin Xiao 2, Georgios E Romanos 2 , Yan-Fang Ren 2) is one that clearly shows that it takes at least four to six cases to achieve competency in a very simple two-implant overdenture case at

an AGD program, let alone other more complex cases. After researching ABDS, ABOI, AAID, CDCA, Maxi-Course and others, **none** of these bodies adequately address this training to competence issue. So by the science, the vast majority of mentorship programs are in violation of the scope of practice decision-making framework as published by the state. This highlights the difference between mentorship programs and CE verses full time residency programs and training to competency. Clearly, more oversight is needed in the training to competency arena and allowing specialty advertising without a full time residency requirement is just the culmination of that failure.

Furthermore, we'd like to request that the SD Board of Dentistry (if they have not already) familiarize themselves with and evaluate entities that hold themselves out as programs that train to competence such as the Enlgel Institute (<https://engel institute.com>). This is a wonderful example of how poor the mentorship CE training is to "advance" through different levels of mentoring. As you examine the levels, the practitioner places one implant under supervision and then is let loose to experiment on the public to complete 20 cases before meeting the criteria to advance to mentoring levels 3 and 4 (we have in fact practitioners in South Dakota that have completed this course and others like it, they are experimenting on people right now). After completing level one they share full arch and "teeth in a day" cases with other CE weekend dentists, not even truly completing one case by themselves under supervision. Our Dental Board and the state

have a vested interest in maintaining uniform training standards so the public can be assured of consistent quality training of practitioners. So the question therefore must be posed: Will our Board evaluate every CE course that a person submits for factual evidence of training to competence, or will it rely on the state to verify the course of study through CODA review of the given residency programs and their institutions? That puts an onerous burden on the Dental Board, that burden right now is shouldered by the CODA approved institutions which offer full-time residency training. If the state board is unwilling to be the credentialing body necessary to ensure quality training then the duty falls to the national governmental body in the form of CODA.

Our driving point is that board certification does NOT a specialist make; **it's the full-time residency** that does that. We have specialists in our own state, very recently in fact, who are allowed to practice because they completed a full-time, nationally accredited residency. They never sat for the boards; hence they are not board certified; but they still are classified as specialists. That is solid proof that the board certification test is not the means to become a specialist, the exam is immaterial to that. The purpose of the Boards is to show mastery of the specialty above and beyond that achieved by completing the full time residency and where you are vetted by specialists that are known to be the best in their fields, it is not a pass fail where if you fail you can not practice your specialty.

ABOI certification as a specialty is not “potentially misleading”, it is **absolutely** misleading. Why? Because applicants have not satisfied the requirement of the profession of dentistry nor of a dental specialty, by completing a full-time residency in a CODA approved institution. Wrapped up in the meaning of “specialist” is the very well-established time honored consensus that specialty training is full-time, performing multiple surgeries or procedures under supervision by senior multiple specialists over time. This is just as true in dentistry as it is for medicine. Medicine, for example, wouldn't allow a GP family practice medical doctor to take 670 hrs. of CE and then test into neurosurgery or cardiothoracic surgery. That would be insane, and yet that is exactly what is being proposed for dentistry. *The certifying organization is the training program not the examination by a board.* The state dental board has avenues for active yearly oversight by DOH/legislative supervision and can clearly articulate the standard, so the issues of California Retail Liquor Dealers Assn. v. Midcal Aluminum, Inc., 445 U. S. 97 are answered and the restriction of the proposal to accept, as valid, a full-time residency as the only qualification for being a specialist and not a test for becoming a specialist can remain intact.

There is no “restriction of trade” issue since all dentists are free to advertise as they please within their proper scope.

Moreover, if they like, they can even claim an emphasis or area of additional training in Implantology (SUPREME COURT OF THE UNITED STATES Syllabus NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS v. FEDERAL TRADE COMMISSION

CERTIORARI TO THE UNITED STATES COURT OF APPEALS
FOR THE FOURTH CIRCUIT No. 13–534. Argued October 14,
2014—Decided February 25, 2015)

The Supreme Court, however, overruled the 11 circuit court in *Borner v Brooks*. Case Details: Richard A. BORGNER, American Academy of Implant Dentistry...Court: United States Court of Appeals, Eleventh Circuit Date published: Mar 6, 2002, Citations Copy Citation, 284 F.3d 1204 (11th Cir. 2002) **stating that surveys (Dr Scott Armstrong and Dr Kenneth Wald, admitted as evidence in *Ducoin vs Viamente State of Florida* and also in *Fla. Bar*, 515 U.S. at 626-28, 115 S.Ct. 2371; *Bingham v. Hamilton*, 100 F.Supp.2d 1233, 1240 (E.D.Cal. 2000).**

) show that the public *will be misled* by claims of specialization by organizations not certified as true full-time residencies or specialties by the ADA and CODA(According to the affidavit of Kenneth D. Wald, who has a doctorate in political science and is an expert in survey research, the survey clearly demonstrates that respondents rely heavily on the approval of the ADA in evaluating both general and specialized dentists. Eighty-one percent of all survey respondents indicated that they were more likely to visit a dentist if they knew the dentist was certified by the ADA. And, over 80% indicated they would have more confidence in a dentist's ability if they knew the dentist was certified by the ADA, and 79% indicated they would be more willing to trust a dentist that they knew was ADA certified. Also, in selecting dentists to perform implantation, certification by the ADA was the major reason for selection following either personal or professional

recommendation. Knowing that an implant specialist was certified as a specialist by an ADA approved board was either “Very” or “Somewhat” important to more than 79.2% of respondents. In fact, 81.3% were more likely to visit a dentist certified as a specialist by the ADA). That leads to the disclaimer requirement for “Implantologists” being directly upheld by the Supreme Court. So, it is now recognized as legal doctrine that “Implantologists” claiming to be specialists via the CE and testing route will mislead the public into thinking that they are true specialists that have gone through a full-time training from a CODA approved institution that is also sanctioned by the state (nearly two-thirds (63.8%) of the survey respondents believe that dentists who advertise as being "certified by a board as a specialist in a particular area" (i.e., advertise as being certified by the AAID in implant dentistry) have been directly or indirectly certified by the State of Florida). We believe that even the disclaimer is false advertising and that advertising that the practitioner has an emphasis or additional training via the part time mentorship CE route adequately informs the public of their training and that a higher level of training and competence is achieved by being designated as a specialist.

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Specialists further limit their practice to that area of expertise so they can maintain their competency by completing enough cases to maintain not only proficiency, but mastery of their specialty. In the typical hospital credentialing process, that number is 100 cases per year for an oral and maxillofacial surgeon who has multiple skill sets to cross migrate all surgical

phases of implant surgery. It's not only the prosthetic training that is in question regarding implantology and advertising, it is the scope of surgical training that is inadequate.

In the case we have before us, the six to eight dentists that are pushing for this change in advertising and even attempting to bully the board with a threat of a lawsuit, have in fact NOT limited their practices to specializing only in dental implant treatment, as is required of all other specialists. It seems that implantology desires to not follow any of the best practices of other specialty training and wants to have multiple exceptions in order to achieve specialty status.

Moving forward, though there may be eventual litigation of the board by the few in our state pushing for the ability to call themselves "specialists" (without meeting the standard of a full-time residency and seemingly performing unsupervised surgical experimentation on the public in obtaining this "specialty" designation), we would still ask our respected board to develop language that satisfies the concerns of the courts who have already rendered decisions:

1. It is completion of a full-time residency training program that confers the designation of specialist, not an exam.
2. That a residency training program (*for Implantology*) be at least two years in length at a CODA approved institution in order to qualify to sit for a certifying board that will be recognized by the state but still needs a disclaimer when

advertising the specialty because it is not a recognized specialty by CODA.

3. That practitioners who go through testing bodies, that do not have those standards for "certifying" practitioners, be limited to advertising that they only have an emphasis or additional training in their area of choosing, but that the designation of "specialist" be preserved within the well-established and time-honored meaning of a full-time training program at a CODA approved institution.

4. When one advertises as a "Specialist", then one must limit their practice to the scope of practice for that specialty. In the specific case of Implantology, that would mean that the "specialist" would only place and restore dental implants as well as the associated grafting procedures. They would, however, have to give up the field of general dentistry

We thank you for your attention,

Dr. Denis Miller

Dr. Louis T. George

Dr. Jason Leet

South Dakota Board of Dentistry, legislators, and South Dakota Dept of Health,

Regarding the proposed changes to the Advertising and Specialty Advertising (ARSD 20:43:04:01) Administrative Rules

This is feedback from general dentists and dental specialists practicing in South Dakota. As a profession we feel the need to clarify our stance on the question of specialty advertising. Our initial full letter to the board will be discussed as a matter of public record on June 24, below is our summary. As we uncover more data and do more research there may be updates.

This is the link to the state feedback form, you may have to log into the South Dakota State Board of Dentistry website in order to access it

https://docs.google.com/forms/d/1zqT4jsfQKYiN83nmH3FqKDD_CES0vx2F8bvyJVc-vDw/closedform

If you agree with us please sign this docuSign form and go to the Dental State Board stakeholder feedback form , or email the board directly and give the board your thoughts or just copy and paste this petition.

It is not board certification that confers the degree of DDS/DMD or confers the certificate of specialty training or specialty status, it is the full-time curriculum or full-time residency at a Commission on Dental Accreditation (CODA) approved institution that does. Therefore, board certification whether it be a regional board or a specialty board, is actually irrelevant to the status of being recognized as a dentist or as a specialist. And therefore special interest boards like AAID/ABOI and ABDS are irrelevant as to whether or not a practitioner is considered a specialist or not, and can advertise as a specialist or not. In short, they are illegitimate boards regarding granting specialty status. No full time residency equals no specialty, it is that simple. USDE gave CODA the sole authority to grant specialty status via residency training . USDE did not give that authority to vanity boards like ABOI/AAID so even though it's been argued in court that ABOI/AAID boards follow similar standards as that of traditional specialty boards they still have no authority to grant specialty status. Only CODA approved residencies can do that. USDE provides active government oversight of CODA and gives CODA sole authority to oversee dental education and specialty education. CODA formally separated from ADA in 1975 and is fully autonomous, so the FTC anti trust argument is a moot point and irrelevant.

Traditional boards are not able to confer specialty status and special interest boards like AAID/ABOI should not be able to either. If a specialty board exam really did establish competency, then if you failed that exam then you could not practice that specialty. Since that is not the case this is proof that board exams do not confer specialty status. By allowing special interest ABOI/AAID/ABDS boards to use their testing mechanism to credential practitioners into a specialty without completing a residency, you are in effect legitimizing the substitution of CODA by an unregulated private body to perform the function of CODA, that is misleading and fraudulent (36-6A-29). The United State Department of Education (USDE) recognizes CODA as the sole agency to accredit dental and dental-related education programs, not the special interest boards of AAID/ABOI or any other testing body. So by allowing these organizations to test practitioners into a specialty (a disclaimer will not mitigate that problem) our Dental Board will be in conflict with the USDE mandate that only CODA can accredit programs to confer specialty status to practitioners.

The issues raised by the proposed advertising rules change are far reaching. They allow for testing into a specialty and by extension testing into dentistry. This is profound, since it has always been, that to obtain your degree as a dentist you needed to complete a full time curriculum at a CODA approved dental school and if you are a specialist you needed to complete a full time residency at a CODA approved institution. Not so with what is proposed by practitioners that want to become specialists in implantology. They would like to complete 300-670 hours of part time continuing education (CE) under a mentorship educational experience, take a test and then say they are specialists. This is despite the fact that for many years there appears to be full time 2 year (3,800 hrs) Implantology/Implant residencies at recognized US institutions where practitioners can get quality training to competence. There, practitioners can receive the proper training and be able to claim advanced training perhaps leading to specialty status someday via CODA. Instead, a small group of dentists would like to advance themselves possibly at the expense of patient care and to the detriment of the profession of dentistry in South Dakota. The reason why implantology is not nationally recognized as a specialty is precisely because they do not follow the CODA approved residency pathway and want to take the short cut with 300-670hrs of educational experiences instead.

The current proposal appears to co-mingle the American Board of Dental Specialties (ABDS) with the American Board of Oral Implantology (ABOI) (a division of the American Association of Implant Dentistry (AAID)) . The ABDS is a Trojan Horse in that it, promotes itself as requiring completion of a 2-year full time residency training program at a CODA approved institution as a qualifier for sitting for the boards, except for implantology where they seem to defer that responsibility to ABOI that only requires 670hrs of educational experiences. The ABOI appears to have several tracks for dentists to obtain diplomate status, including limited initial supervision, part time and distance learning mentorship, and unregulated hours of CE that only have to be related to implantology, to sit for the boards. Curiously none of these tracks mention completing a full time implantology residency at a CODA approved institution (like Loma Linda) specifically, even though these residencies have been available since at least 2015. It seems like the entire operation is set up to circumvent CODA and USDE.

The ABDS/AAID and ABOI promote the idea that a part time CE mentorship educational experience (670hrs) is equal to a full time 2-year post graduate CODA approved residency program (3800 hrs), clearly this misleads the public, our Dental Board, other practitioners and the State (36-6A-29) and speaks directly to the illegitimacy of the ABOI/AAID. If the ABDS and ABOI had the same rules to sit for the board, that is completion of a full time 2 year residency at a CODA approved institution, then we would consider being in favor of alternative boards such as ABDS, but they do not regarding Implantology.

AAID and ABOI have a self-serving interest to circumvent the standard specialty and board certification process by attempting to substitute part time CE and mentorship from non-CODA approved sources, for full time residency programs in implantology. It's a multimillion dollar training industry worth 4.5 million to the AAID and \$450,000 to ABOI in 2018/2019 according to public non-profit tax filings. Not to mention the millions of dollars of income generated by pop up CE courses around the country (a google search for "ABOI AAID dental implant course 2021 USA" yielded 76,100 results).

If you are a specialist and this proposal, as it stands, gets passed into law, it appears to allow for testing into becoming a specialist implantologist without full time residency training at a CODA/USDE approved institution (it would be the only specialty to do that) . It should then be noted that the Commission on Dental Competency Assessment (CDCA) on its website appears to allow for testing into 6 CODA approved specialties without residency training, implantology is

not on the list. If we allow Implantology to succeed then the CDCA will, by the same pathway, be able to offer specialty testing to general practitioners without residency training. The public will have no way of knowing which practitioner is trained to competence in a traditional residency and which practitioner is the product of unregulated not CODA approved, part time CE and mentorship educational experiences.

If you are a general practitioner this may also affect you because your colleagues may suddenly all be able to go through CDCA testing and claim specialty status. But the most insidious outcome is that if we do not enforce the standard of at least a 2 year, full time residency training curriculum at a CODA approved institution as a requirement to be able to sit for specialty boards then dental health therapists can use the same pathway to test into dentistry as well. It's actually worse for dentistry because the states have predicated "The Boards" as a condition of being able to obtain a license in the state. So even though it is the dental school that confers the dental degree, through CODA/USDE authority, it is for most states, the successful completion of "The Boards" that allows you to practice in that state. This is not the case for specialists. A great way to get away from boards for dental practice in the state is to offer licensure by GPR or AGD completion. That is real world experience under supervision from CODA/USDE approved residencies, very much the same as medicine does. The courts have made it abundantly clear (Midcal, Hudson, Omni, Parker et al) that the State Board and Department of Health have a vested interest in maintaining a consistent standard of training to protect the public and they must clearly articulate that standard. Up until now they may not have done that, since the rules seem too "loose". The current proposal does not improve matters either, and departs from what has historically been considered the standard of education and training to competence, what the public has come to expect and rely on, to ensure competency in the world of general practice and specialty care.

There are a number of full time implantology residency programs at some CODA approved US institutions already in existence (Boston, Loma Linda, Florida and many others). These training programs may satisfy the training to competency requirement for specialty training and anyone graduating from these programs should probably have a pathway to being able to say they at least have expanded function in implantology until such time that CODA recognizes implantology as a speciality. But a part time, not CODA approved, weekend CE mentorship educational experience is not the answer and there are studies (Jerjes et al 2018, Roudsari 2017, Malmstrom 2015) that prove that training to competency takes more than what some dentists are willing and able to do using the ABOI/AAID method of weekend courses. In this case, letting practitioners think they are on a specialty surgical training track by taking weekend course where they are inadequately trained harms the public. In many regards several hours, even hundreds of hours of CE may not necessarily be considered training to competency. CE builds on an existing competency, it does not create nor establish competency. A specialty board exam does not establish competency, the residency does that. A Board examination tests knowledge above and beyond the existing training from the residency. If you are not competent, the residency program does not graduate you. If a board exam established competency then if you failed a specialty board exam then you could not practice that specialty. Since that is not the case that proves that specialty board exams do not confer specialty status. We have several dental specialty practitioners in South Dakota that are not board certified but they are still specialists. A bona fide specialty board exam can only be administered to applicants that have graduated from a CODA approved full time residency program. Therefore, special interest boards like the ABOI are not bona fide and not legitimate with regards to granting specialty status. In medicine they call them vanity boards. Traditional boards cannot confer specialty status or confer equivalence to a dental degree and neither should special interest boards like ABOI.

With regards to the advertising rules changes, we ask our State Board to define a specialist as a practitioner that primarily focuses their practice to that specialty and that specialty status be granted only to practitioners that have met the standard of graduating from a full time residency in that specialty (of at least 2 years duration) at a CODA approved residency training institution. We also ask that our Dental Board affirms that certification boards play no role in conferring specialty status because they do not have USDE authority do that, only CODA does. We also ask that our State Board affirms that the CE mentorship educational experience does not equal CODA approved specialty level training to competence and therefore practitioners that choose that mode of educational experience are not allowed a pathway to test into being a specialist. This will clearly articulate a uniform standard for all specialists, be in compliance with the USDE/CODA, previous circuit court and supreme court rulings (Midcal, Hudson, Parker and Omni) regarding federal trade commission (FTC) anti-trust rulings and allow those practitioners that graduate from an implantology residency program to perhaps in the future call themselves specialists. Practitioners that complete a one year full time CODA approved residency in implantology at a CODA approved institution may be able to claim fellowship status as is the case in other specialties such as oral surgery cosmetics. However even this route, at this time is problematic because Fellowship designation requires being a specialist first, you are a Fellow of that specialty and implantology is not yet a CODA /USDE approved specialty. Perhaps a one year implantology residency should fall into the same category as education experience for now .

However, since implantology is not a CODA/USDE recognized specialty at this time, there will need to a way for our State Board to differentiate that residency training from the part time CE mentorship educational experience. Previous cases focused on whether or not the state, sanctioned specialty status via board certification by ABOI/AAID. Since they did not, the idea of a disclaimer was upheld in court. However, that confers legitimacy to those boards to give them the power to grant specialty status and that is not what is done for every other specialty that has board certification. It is also in violation of what is the sole domain of CODA/USDE. The best way for our State Board not to appear that the state approves or sanctions the ABOI/AAID/ABDS implantology special interest boards as a proxy for specialty designation is to not allow it in the first place. Disclaimers are cumbersome and though they help the public make good decisions (surveys, Armstrong, Wald in 1998 and 2000) they imply legitimacy to illegitimate special interest boards and are in violation of what is solely CODA/USDE's responsibility to do.

Moving forward, though there may be eventual litigation with our State Dental Board by a few in our state pushing for the ability to call themselves "specialists" without meeting the standard of a full-time CODA/USDE approved residency and seemingly performing unsupervised specialty level surgical experimentation on the public while trying to build cases for specialty certification by ABOI/AAID. We ask our State Dental Board to develop language that satisfies the concerns of the courts who have already rendered decisions in other states, remain in compliance with CODA/USDE and have the following recommendations:

1. That the Board defines a specialist (36-6A-1 and 36-6A-14(1&2)) as a practitioner that has graduated from an CODA/USDE approved residency program of at least 2 years in length AND that their residency is in one of the CODA/USDE approved specialties.
2. That the Board not allow advertising expanded function in implantology unless the practitioner graduated from at least a CODA/USDE approved 2 yr residency program. This maintains the consistent approach that the public has come to expect from the definition of a specialist and that is already sanctioned by the state. Every other specialty follows the approach of at least a 2 year full time residency at a CODA approved institution. Our preference is that specialist designation not be tied to a board exam since it has never been tied that way in the past and

violates the mandate that only CODA/USDE approved dental school programs or specialty programs can do that. It is the completion of a full-time CODA approved residency training program that confers the designation of specialist, not an exam, not weekend CE courses or case reviews, not mentorship, and not a special interest "certification" body. There is no pathway that substitutes an education experience for a CODA/USDE approved full time residency.

3. That the Board considers (35-6A-14(3&11)) that the AAID and ABOI special interest boards and others like them illegitimate since they do not require full time residency training at a CODA/USDE approved institution as a qualification to sit for the boards. As there are full time residencies in implantology offering quality training to competence, the AAID/ABOI designation of specialty status via the part time mentorship educational experience will inherently confuse the public because some certificate holders will have gone through residencies and some will have additional knowledge through part time CE and mentorship educational experience. Since the two are not equivalent, the public will have no way to decide which practitioner is properly trained and which one is not. Studies have proven harm to the public using the part time surgical specialty CE mentorship educational experience model that does not train to surgical speciality level competence during training. So legitimizing that with acknowledgement of ABOI/AAID special interest board certification is not acceptable.

4. That our Dental Board accepts results as legitimate, from certifying bodies that only test candidates that meet the minimum standard of completing 2 years of a full time residency program at a CODA/USDE approved institution. Certifying bodies that co-mingle applicants that complete a full time residency with applicants that do not, are not legitimate boards. Practitioners completing a 2 year implantology residency at a CODA approved institution along with "board certification" from a proper board, not ABOI/AAID, may be allowed to advertise expanded function implantology status until such time that CODA/USDE recognizes implantology as a specialty.

The wording perhaps, of expanded function in implantology does not confer specialty status and it differentiates practitioners with 2 years (3,800 hrs) of residency training in implantology as superior to practitioners with 670 hrs of educational experiences. That will help the public make good decisions without running afoul of CODA/USDE authority.

5. That the Board allows practitioners with additional CE in implantology to still list their memberships and exam completion in organizations like ABOI AAID and others, they just cannot claim specialty status in any way including, but not limited to, that they are board certified in implantology, a diplomate of implantology or that they are Implantologists since the "-ist" implies being a specialist. They must only advertise to the effect that they have additional CE in implantology and passed a special interest board exam. This would let the public know that their training is less than the practitioner who completed a 2 year residency and is allowed to claim expanded function in implantology. We would also recommend to strike allowing the special interest board certification advertisement because the AAID/ABOI are not legitimate boards since they do not follow the standard of requiring a 2 year full-time residency as a qualifier to sit for the boards. At the very least require the disclaimer that these are special interest boards to differentiate them from having expanded function in implantology.

6. That the board affirms that when a practitioner advertises as a "Specialist" or an expanded function in implantology, then they should primarily focus their practice to the scope of practice for that specialty or expanded function. In the specific case of Implantology, that would mean that the "specialist" would focus their practice to place and restore dental implants as well as the

associated grafting procedures. They would, it would seem, have to significantly give up the field of general dentistry. This speaks to the idea of maintenance of specialty competency (36-6A-14(11)). Clearly, if the specialist with advanced training only performs 10-12 implant surgeries a year, the skill set will diminish over time, so limiting the specialty or advanced training/expanded function practice to primarily implant therapy will ensure that the practitioner has an adequate number of cases to maintain competency. Perhaps the board should investigate the number of cases necessary to maintain specialty or advanced training competency. If it takes 50 cases, as studies have shown, to gain initial minimal competency then it is probably reasonable to require more than 50 cases a year be completed to achieve and maintain specialty or advanced training skill sets and maintain competency since those skill sets are above those of the minimum competency of 50 cases. This would not necessarily apply to GP dentists that are not holding themselves out as having advanced training, expanded function in implantology or as specialists.

7. That the Board develops a means to adjudicate misleading advertising (36-6A-28 and 36-6A-29). For instance the AAID/ABOI makes available to their members, advertisements that show training levels based on CE hours ranging from general dentistry to AAID membership through special interest ABOI diplomate status. The CE ranges from zero through 570 CE hrs and from zero to 7 years of experience. This implies that the pinnacle of training is 570 hours. This is misleading since even ABOI requires 670hrs to sit for their boards and a 2yr residency has 3,800hrs of training. So in order to NOT be misleading these types of advertising should also include, that implantology residencies have 3800 hrs of training and that AAID/ABOI have only 570-670 hours. That would put their training in perspective for the public to make good decisions.

Thank you for your consideration of this important topic.



South Dakota DENTAL ASSOCIATION

A constituent society of the American Dental Association

S.D. Dental Association
804 N. Euclid, Ste 103
Pierre, SD 57501-1194
Phone (605) 224-9133
FAX (605) 224-9168
www.sddental.org

June 6, 2022

Dr. Harold Doerr, Chairman
South Dakota State Board of Dentistry
PO Box 1079
Pierre, SD 57501

Dear Dr. Doerr:

The SDDA plans to continue the Wellbeing program that was started in June of 2021 and we are again seeking financial support from the State Board of Dentistry. There are two components to the second year of the program. The first is to promote a “culture of wellness” within the dental community in South Dakota and the other is to provide an entry point for individuals from within the dental community to seek care by providing individual counseling or coaching. We will continue to retain Mary Wolf, a licensed-professional-counselor, for another year of counseling and coaching services. All individuals licensed by the South Dakota Board of Dentistry or employed in a dental office in South Dakota are eligible for help through the program.

Surveys conducted in dental offices, as part of the first year of the wellbeing program, indicated that stress and anxiety are commonplace for many individuals that work in dental offices. Testimonials (attached) from the individuals who engaged with Mary Wolf and from those who attended a wellbeing workshop indicated that the wellbeing program is helping people.

Having quick and easy access to counseling or coaching services is essential as people often don't ask for help because they don't know where to start. It is difficult to estimate the number of sessions that will be needed during the second year of the program. This past year, eight assessments were conducted, but more people are now aware of the program so we are estimating counseling/coaching for 10 individuals in year two. Additionally, we estimate that Mary will provide Wellness Workshops in five dental offices (30+ individuals) and we expect the webinars to be attended by at least 100 individuals.

Each of the following functions would offer education about wellness and promote Mary's availability:

- A wellbeing article in each quarterly SDDA newsletter
- Two wellbeing webinars
- A presentation during the SDDA Annual Session
- “Wellbeing” Wednesday posts on Facebook
- Wellbeing tips in six e-news email blasts
- A wellbeing page on the SDDA web site
- Brief presentations at district dental society meetings

Rather than a single assessment, this coming year, Mary will provide three-session counseling/coaching for 10 or more individuals:

- First session assessments help to understand unique situation and determine the level of care needed
- Sessions two and three will be for building a strategy to improve the presenting issue
- Recommendations, resources, and referrals will be suggested

The total program budget for year-two (June 1, 2022 to May 31, 2023) is \$21,000. Mary Wolf's retainer is \$16,000. A communications consultant will be used to produce the weekly "Wellness Wednesday" posts and manage website resources at an estimated cost of \$3,000. An additional \$2,000 is estimated for a presenter at the SDDA Annual Session in 2023. Again this year, we are requesting \$9,000 from the Board of Dentistry. The South Dakota Dental Foundation has already committed to funding \$9,000 toward year two of the program. The SDDA is prepared to supply additional funding as needed for the program and will commit staff to manage the program.

Sincerely,

A handwritten signature in black ink, appearing to read "Paul Knecht", with a stylized flourish at the end.

Paul Knecht
Executive Director

South Dakota Dental Association Testimonials May 2021-June 2022

Assessments:

“I’m so thankful that I reached out to Mary and took advantage of the Be Well program. I’ve been struggling at home with my teenage adopted daughter. We have faced a lot of hardships in our family dealing with the drug addiction of our daughter. As a result, I face a lot of guilt as a parent. Mary’s words helped me realize that I need to give myself some grace. She reminded me of everything I have done for my child and it’s important to take care of myself too. I’m so grateful for the resources she gave me to continue on this journey. I really didn’t realize how much I needed outside help until I met with Mary. I’m in a leadership role in dentistry and I’m always taking care of others needs and today I realized it’s okay to take care of myself too.”

"I am so grateful the SDDA is working with Mary Wolf to provide assessments for dentists in our state (at no charge!). I have been considering counseling for a while now due to several life circumstances. I know counseling would help me to grow both personally and professionally, but I have been resistant to schedule anything on my own. Speaking with Mary helped encourage me that there is no reason "too small" to speak with a counselor. She also guided me to two professionals she thought would be a good fit for me. This was immensely helpful, as I am unfamiliar with any counseling professionals in this area. I know pursuing counseling, something I've been thinking about for at least a year, is going to help me be a better leader, dentist, parent, and spouse. I am so thankful for Mary's guidance and for the SDDA's support."

“My husband and I met with Mary to work through some issues with our teenage son. Mary was a great resource of encouragement and positive motivation to get through difficult times. Mary gave us hope to be well again!”

“The session was very helpful in identifying my causes of anxiety and giving me actionable strategies to help me conquer my anxiety.”

Wellness Workshops

“Our goal in bringing Mary Wolf into our office to have the staff meet her face to face was to introduce them to the wellness initiative that the South Dakota Dental Association has taken on. We wanted them to have a face associated with the name that they have been given as a resource. Our goals were met 100 percent! Mary's presentation introduced some broad concepts of wellness and mental health, as well as gave us tactical, practical advice to make each day a little better. It was an hour very well spent. Our team members are our practices greatest assets, investing this one hour on their wellness and mental health was a privilege and an honor to provide them.” - Dr. Jaclyn Schuler and Dr. Samantha Kappenman – Dakota Dental.



South Dakota State Board of Dentistry

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BOARD APPROVED COURSES:

DENTISTS

Nitrous Oxide Permit: 20:43:09:05

1. Nitrous Oxide Courses taken through American Dental Association Commission on Dental Accreditation (ADA CODA) accredited dental, dental hygiene or dental assisting schools.
2. Western Dakota Technical Institute (WDTI) Nitrous Oxide course (Approved until CODA Accreditation is completed). *Operational as of June 17, 2016.*

Host Permit: 20:43:09:04.04

1. Host Permit Courses
 - i. Safe Sedation Training (SST)
 - Sponsor: American Society of Anesthesiologists (ASA)
 - Nine modules must be completed: Course Introduction; Continuum of Sedation; Pre-Procedure Patient Evaluation and Preparation; Rescue; Respiratory Complications; Patient Safety Monitoring; Airway Assessment and Management; Sedation Pharmacology; and Recovery.
 - ii. On Demand Assistant Course
 - Sponsor: American Dental Society of Anesthesiology (ASDA)
 - Six courses must be completed: Anesthetic Drugs; Common Airway Complications; Identifying Roles in an Anesthetic Emergency; Emergency Scenarios: An Interactive Experience; Intraoperative + Postoperative Patient Assessment; and Preoperative Assessment
2. ACLS: 20:43:09:04.04 (3)
 - a. American Heart Association Advanced Cardiac Life Support (ACLS)
 - b. American Heart Association Pediatric Advanced Life Support (PALS)

Moderate Sedation Permit: 20:43:09:04

1. Moderate Sedation Courses
 - i. Intravenous Conscious Sedation Course
 - Location: Augusta, GA
 - Sponsor: Augusta University Dental College of Georgia
 - Hours: At least 60. Patients: At least 20
 - ii. Modular Series in Moderate Sedation (previously titled *Medical Emergencies, Local Anesthesia and Moderate Sedation in Dental Practice*)
 - Location: Dayton, OH.
 - Sponsor: Miami Valley Hospital
 - Hours: At least 60. Patients: At least 20
 - iii. Parenteral Moderate Sedation (previously titled *Learn IV Sedation*)
 - Location: Portland, OR.

- Sponsor: Oregon Academy of General Dentistry
 - Hours: At least 60. Patients: At least 20
 - iv. IV Sedation Training for Dentists
 - Location: Various Locations in the United States.
 - Sponsor: Conscious Sedation Consulting
 - Hours: At least 60. Patients: At least 20
 - v. ADA CODA accredited General Practice or Periodontal Residency that meets the regulatory requirements
 - Location: Various.
 - Hours: At least 60. Patients: At least 20.
 - vi. IV Sedation for Dentistry at Idaho State University and Meharry Medical College
 - Location: Idaho State University and Dental School Satellite Campus
 - Sponsor: Idaho State University and DOCS Education
 - Hours: At least 60. Patients: At least 20
 - vii. Moderate Sedation Certification Course (*formerly Moderate Sedation Training Course*)
 - Location: Varies
 - Sponsor: Dentinomics
 - Hours: At least 60. Patients: At least 20
 - ix. AAID MaxiCourse Program and Clinical Residency in Implant Dentistry
 - Location: Puerto Rico
 - Sponsor: Advanced Dental Implant Institute
 - Hours: At least 60. Patients: At least 20
 - x. Clinical Intravenous Sedation
 - Location: Los Angeles, CA.
 - Sponsor: The Herman Ostrow School of Dentistry of USC
 - Hours: At least 60. Patients: At least 20
 - *This course is currently not offered, with no anticipated start date.*
2. ACLS: 20:43:09:04(3)
- a. American Heart Association Advanced Cardiac Life Support (ACLS)
 - b. American Heart Association Pediatric Advanced Life Support (PALS)

General Anesthesia and Deep Sedation Permit: 20:43:09:03

1. General Anesthesia and Deep Sedation Program: 20:43:09:03 – Programs are set forth in rule. These are not Board approved.
2. ACLS: 20:43:09:03(3) –
 - a. American Heart Association Advanced Cardiac Life Support (ACLS)
 - b. American Heart Association Pediatric Advanced Life Support (PALS)

Cardiopulmonary Resuscitation (CPR)

1. American Heart Association Basic Life Support (BLS) Provider
2. American Red Cross for the Professional Rescuer or the Healthcare Provider
3. Military Training Network (MTN) Healthcare Provider Course
4. American Heart Association Advanced Cardiac Life Support (ACLS)
5. American Heart Association Pediatric Advanced Life Support (PALS)

Regional Examination Equivalency

1. California State Board Dental Exam – 1973 - 1994
 2. Washington State Board Dental Exam – 1986 and 1987
 3. Arizona State Board Dental Exam – 1972
 4. Florida State Board Dental Exam – 1986
 5. Nevada State Board Dental Exam - 1997
-

DENTAL HYGIENISTS (DH):

DH Nitrous Oxide Permit: 20:43:09:06

1. Nitrous Oxide Courses taken through ADA CODA accredited dental, dental hygiene or dental assisting schools.
2. Western Dakota Technical Institute (WDTI) Nitrous Oxide course (Approved until CODA Accreditation is completed). *Operational as of June 17, 2016.*

DH Local Anesthesia Permit: 20:43:09:06.01

1. Local Anesthesia Courses taken through ADA CODA accredited dental or dental hygiene schools.

Cardiopulmonary Resuscitation (CPR)

1. American Heart Association Basic Life Support (BLS) Provider
2. American Red Cross for the Professional Rescuer or the Healthcare Provider (BLS)
3. Military Training Network (MTN) Healthcare Provider Course
4. American Heart Association Advanced Cardiac Life Support (ACLS)
5. American Heart Association Pediatric Advanced Life Support (PALS)

Regional Examination Equivalency

1. California Dental Hygiene State Board Exam—1988
-

REGISTERED DENTAL ASSISTANTS (RDA)

RDA: 20:43:08:03

1. ADA CODA accrediting dental assisting programs.
2. Western Dakota Technical Institute (WDTI) dental assistant training program (non-accredited). *Discontinued as of May 20, 2016.*
3. Western Dakota Technical Institute (WDTI) dental assistant program (Approved until CODA Accreditation is completed). *Operational as of May 21, 2016.*
4. South East Technical Institute (SETI) dental assisting program (non-accredited). *SETI discontinued its dental assisting program effective May 12, 2011.*
5. DANB Certified Dental Assistant (CDA) Certification (three components: Radiation Health and Safety, Infection Control and General Chairside Assisting)
6. Lake Area Technical Institute (LATI) expanded functions dental assistant continuing education course.
7. Southeast Technical College (STC) dental assistant program (pending CODA accreditation. Approval for graduates between 10/23/2020 and 10/31/2022.)

RDA Nitrous Oxide Permit: 20:43:09:06

1. Nitrous Oxide courses taken through ADA CODA accredited dental, dental hygiene and dental assisting schools.
2. Western Dakota Technical Institute (WDTI) Nitrous Oxide course (Approved until CODA Accreditation is completed). *Operational as of June 17, 2016.*

Cardiopulmonary Resuscitation (CPR)

1. American Heart Association Basic Life Support (BLS) Provider
 2. American Red Cross for the Professional Rescuer or the Healthcare Provider (BLS)
 3. Military Training Network (MTN) Healthcare Provider Course
 4. American Heart Association Advanced Cardiac Life Support (ACLS)
 5. American Heart Association Pediatric Advanced Life Support (PALS)
-

RADIOGRAPHERS

Radiographer: 20:43:07:07

1. 16 hour Radiography courses taken through ADA CODA accredited dental, dental hygiene or dental assisting programs.
 2. 16 hour Radiography courses taken through Western Dakota Technical Institute (WDTI). WDTI offers a standalone 16 hour course or a course that students in the Dental Assisting program complete while completing the Dental Assisting program. WDTI provides a radiography certificate upon completion of the radiography component.
 3. 16 hour Radiography courses taken through Southeast Technical College (STC) with a completion date after October 12, 2018.
 4. 16 hour Radiography courses taken through Accelerated Dental Assisting Academy (ADAA) with a completion date after October 18, 2019.
 5. Radiography component of Dental Assisting National Board (DANB).
 6. Department of the Air Force, Ellsworth Air Force Base 16 hour radiography course taught by Ms. Luann F. Brownson, offered to personnel (active duty, reserve, guard, Red Cross or GS) working as dental technicians at the Ellsworth Air Force Base.
-

PERMIT TO MONITOR PATIENTS UNDER ANESTHESIA – DH, RDA & DA

DH, RDA and DA Monitoring Moderate and Deep/General: 20:43:09:10

1. Dental Anesthesia Assistant National Certification Examination (DAANCE)
 - Sponsor: American Association of Oral and Maxillofacial Surgeons (AAOMS)
 - Hours: 36
2. Anesthesia Assistants Review Course (AARC)
 - Sponsor: American Association of Oral and Maxillofacial Surgeons (AAOMS)
 - Hours: 12
3. Assistant Sedation/Anesthesia Course
 - Sponsor: American Dental Society of Anesthesiology (ADSA)
 - Hours: 12
4. Assistant Sedation/Anesthesia Course – On Demand CE Course (Online)
 - Sponsor: American Dental Society of Anesthesiology (ADSA)
 - Hours: 12. Twelve individual one hour assistant courses must be completed. All twelve certificates must be submitted with the application. If ADSA offers more than 12 courses, you can choose the 12 you would like to complete.
5. Conscious Sedation Consulting Online Sedation Course.
 - Sponsor: Conscious Sedation Consulting
 - Hours: 8. Eight individual one hour courses must be completed: A Culture of Safety; Patient Assessment; Sedation; Pain; Patient Monitoring; Adverse Events – Airway & Respiratory; Adverse Events – Cardiac & Neurological; and Recovery and Discharge. All eight certificates must be submitted with the application.

6. Sedation and Anesthesia in the Dental Practice
 - Sponsor: South Dakota Dental Association
 - Hours: 8
7. Intravenous Conscious Sedation Course, GRU, College of Dental Medicine
 - Sponsor: Augusta University Dental College of Georgia
 - Hours: 40
8. Assisting on the Sedated Patient – A Certification Course for Assistants
 - Sponsor: Dentinomics
 - Hours: 8
9. Monitoring of Sedation/General Anesthesia Patients for Dental Procedures and intravenous insertion
 - Sponsor: Saint Louis University Center for Advanced Dental Education
 - Hours: 24

Cardiopulmonary Resuscitation (CPR)

1. American Heart Association Basic Life Support (BLS) Provider
 2. American Red Cross for the Professional Rescuer or the Healthcare Provider (BLS)
 3. Military Training Network (MTN) Healthcare Provider Course
 4. American Heart Association Advanced Cardiac Life Support (ACLS)
 5. American Heart Association Pediatric Advanced Life Support (PALS)
-

Host Permit Courses:

American Society of Anesthesiologists (ASA) Safe Sedation Training (SST):

This is an online course with nine modules that must be completed.

Module 1: Course Introduction

Module 2: Continuum of Sedation

Module 3: Pre-Procedure Patient Evaluation and Preparation

Module 4: Rescue

Module 5: Respiratory Complications

Module 6: Patient Safety Monitoring

Module 7: Airway Assessment and Management

Module 8: Sedation Pharmacology

Module 9: Recovery

American Dental Society of Anesthesiology (ADSA) On Demand Assistant Courses:

The six individual online courses listed below must be completed.

1. Anesthetic Drugs (1 hour)
2. Common Airway Complications (1 hour)
3. Identifying Roles in an Anesthetic Emergency (1 hour)
4. Emergencies Scenarios: An Interactive Experience (1.5 hours)
5. Intraoperative + Postoperative Patient assessment (1.5 hours)
6. Preoperative Assessment (1.5 hours)

Moderate Sedation Course Information Packet

The following information on each Moderate Sedation course has been provided by the course Sponsor.

Number on list	Title of Course	Sponsor	Meet ADA Guidelines	AGO Pace or ADA CERP	Minimum of 60 hours instruction	Minimum of 20 patients managed	Compromised airway and IV access	Does course director have discipline	Course Director has 3 years exp/ residency training	Participant to faculty ratio (4:1 max)	Participant evaluation and feedback	Additional clinical experience available if needed	Certify competency	Facility	Location	Type of facility	Notable changes since last review
ii.	Intravenous Conscious Sedation Course	Augusta University Dental College of Georgia	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Dental College of Georgia	Augusta GA	Dental School	Additional Day Per Week of Instruction
iii.	Modular Series in Moderate Sedation	Dept of Medical Education Miami Valley Hospital	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	5 Rivers Dental Center, Miami Valley Hospital	Dayton, OH	Hospital	Course Name Updated
iv.	Parenteral Moderate Sedation	Oregon Academy of General Dentistry	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Oregon Academy of General Dentistry	Tigard, OR	Dental CE Facility	None
v.	Clinical Intravenous Sedation	The Herman Ostrow School of Dentistry of USC	Course not being offered at this time														
vi.	IV Sedation Training for Dentists	Conscious Sedation Consulting	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Multiple Locations	Nationally	Dental office, dental school, or surgical center	None
ix.	DOCS/ Idaho State University IV Sedation Certification	Idaho State University	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Idaho State University Satellite Campus	Louisville, KY	Dental School	None
x.	Moderate Sedation Certification Course	Dentinomics	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	PEARL Dental Care	St George, UT	Dental Office	Course Name Updated
xi.	AAID Max/Course Program and Clinical Residency in Implant Dentistry	Advanced Dental Implant Institute	Yes	Yes	yes	yes	yes	no	yes	yes	yes	yes	yes	The Advanced Dental Implant Institute	Guaynabo, PR	Surgical Center	None



South Dakota State Board of Dentistry

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Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.
If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Intravenous Conscious Sedation Course

Course Sponsor: Dental College of Georgia at Augusta University

Name of person submitting information: Lynn Thigpen, Dept of Oral & Maxillofacial Surgery, GC-1042

Email address: lbthigpen@augusta.edu

Phone: 706-721-1447

Title: DCG CE Coordinator

Date: 04/13/2022

Course Director:

Name: Dr. Henry "Butch" Ferguson

License Number and State: DND12107/GA

Email: HEFerguson@augusta.edu

Phone: 706-721-5465

Name of the facility where the course is presented: Dental College of Georgia at Augusta University

Location: 1430 John Wesley Gilbert Drive, Augusta, GA 30912

Course is presented at a: ☐ Dental Office ☒ Dental School ☐ Surgical Center
☐ Hospital ☐ Other: _____

Is the Course Sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

AGD PACE Provider Number: 12/31/2021

ADA CERP Provider Number: 12/31/2021

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☒ Yes ☐ No

If yes, please summarize the changes below:

Moderate Sedation Course Review

4/13/2022

Has this course changed since the last time it was evaluated by the Board (annual evaluation) YES

The Oral and Maxillofacial Clinic extended the didactic week by one day. The faculty felt we have too much information to pack in to five days.

The didactic course now begins on Tuesday and ends Sunday.

The clinical days and hours remain the same.

The total CE hours are now 119.50

Is the Course Sponsor AGD PACE or ADA CERP approved: YES

AGD PACE Provider Number: 12/31/2021

ADA CERP Provider Number: 12/31/2021

We submitted our ADA CERP Application for re-accreditation December 2021. We are supposed to have our approval/changes/revision letter from the ADA CERP by the end of May. The ADA CERP approved AU to continue using 12/31/2021 on all of our materials.

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: _____

Date: _____

Printed Name: _____

Intravenous Conscious Sedation Course 2022

Augusta University
Dental College of Georgia Department
of Oral and Maxillofacial Surgery

Classroom Session All Students

COURSE INFORMATION FOR IV SEDATION COURSE

The following is the course schedule for the IV Conscious Sedation Course. We will try to adhere to the schedule as much as possible. However there will be occasions when we will have to change the order of the lectures or the speakers. The faculty for this course also have hospital and clinic coverage duties/responsibilities. There will be times when either the lecture or the lecturer will have to be moved or changed. This will be rare, but due to the nature of a hospital and clinical practice at a level one trauma center these changes may have to be made. It will not affect the total hours of the course or the clinical practice time.

Effective 01/01/2021 the Didactic portion of the course will be six days. This decision was made because participants were attending 7:30 am – 10 pm on Wednesdays, Thursdays and Fridays. You should arrive in Augusta, Georgia on the Monday before the start of class on Tuesday. We start at 7:30 am on Tuesday. The course participants have been divided into one person groups for those taking the entire course. During the classroom/ didactic portion, all groups participate in the classroom activities, and training with the interactive simulation mannequin.

For those returning for the clinical/hands on training portion, there will be a clinical start on the Monday following the completion of the Sunday classroom activities, and every following Monday until all participants have received training. Exceptions will be made for Monday holidays where there will be a 4 day week. Scheduling will be coordinated by Continuing Education.

This should be an intensive, informative and enjoyable educational experience for all of us. It never ceases to amaze us that we can learn so much from the CE participants. Most of you bring with you a great deal of clinical experience and practice management skills. We are looking forward to working and interacting with you all.

For the classroom portion of training: the participant will be given the sedation text upon arrival. A flash drive will be mailed to you prior to your arrival. All presentations plus extra material will be on the flash drives. If there is anything covered during the presentations, not on the drive, alert the program director. **It is recommended that you load the material on your laptop, and review it prior to arrival. Bring the flash drive with you since we may make some additions to it during the course. You should bring a laptop with you that is able to read power point presentations. A pretest and posttest will be administered.**

There are millions of patients who cannot receive routine dentistry and associated care because of fears, anxieties, and phobias. Managing these fears, anxieties and phobias is a special “gift” that can profoundly change your professional life. During the didactic portion of training, you will be **immersed** in information and dialogue which will provide the participant the skills to manage patient anxieties, fears, and phobias in a safe, predictable, safe and independent manner. In addition to being immersed in the sedation protocols and techniques, the management of office emergencies will be comprehensively addressed. There will be a thorough overview of critical factors needed to manage office emergencies. This includes, overview of the physical plant, emergency equipment, review of emergency drug pharmacology and indications, discussion of the emergency “Action Plan”, overview of the provider and ancillary staff responsibilities, and review of specific office emergency scenarios and their management.

A block of instruction will be provided for hands on simulation training with the high-fidelity simulation mannequin. The participants will be required to make real time responses to commonly occurring anesthetic and non-anesthetic office emergency scenarios. Also during this block of instruction with the simulation mannequin, the participants will have dedicated hands on training involving basic and advanced airway management and resuscitation techniques which includes use of both basic and advanced airway adjuncts. Lastly, discussions will be directed to preparing the participants for the office anesthesia examination required for certification to provide conscious sedation.

The IV Sedation Course faculty have responsibilities relating to coverage of OMS Clinic and Operation Room activities. Many of the activities are emergent /urgent and cannot be rescheduled. Because of this, we may have to alter the order of the presentations as scheduled. However, all material will be covered

ACLS: Advanced Cardiac Life Support is mandatory for parenteral sedation. ACLS will be offered to any participants who request it. The ACLS training will take place on the Wednesday, Thursday, and Friday evenings after completion of the sedation didactic training. **The ACLS portion of the course times are subject to change so we have extended the course by one day!**

For the hands on clinical patient care portion of the course: the scheduled participant will start on the Monday following completion of the Sunday classroom activities. The day will start at 7:30 a.m. with the participant meeting with the clinic nurse to orient, review the daily schedule, discuss patients where needed, and assemble the sedation armamentarium and drugs. Follow on participants should arrive in Augusta on the Sunday to start Monday at 7:30 as detailed above (unless otherwise instructed)

While engaged in the clinical hands on training, each participant will provide the patient assessment, establishment of intravenous access, delivery of sedation medications, patient monitoring, oversight of patient recovery from sedation, and assessment for discharge. All questions/concerns will be directed to the clinical nurse, course director or attending faculty.

Because of the significant learning opportunities available, and ability to interact with the clinical faculty, nurses and staff, participants are encouraged to bring their ancillaries to participate with them in the hands on clinical training. Coordination with the CE Department and registration is required if this option is taken. Each clinical group should finish before 5:00 pm on the final clinical Friday. Groups will finish the final day with the post test, course after-action review and final comments with the course director.

It is mandatory that each participant query their State's Board of Dentistry to confirm the Boards requirements for number of patients to be managed, and level of sedation which will be recognized by the Board for case acceptance.

**Dr. H. W. Ferguson
Course Director
I.V. Conscious Sedation CE course
Associate Professor Oral and Maxillofacial Surgery
Augusta University
Dental College of Georgia**

Intravenous Conscious Sedation Patient Management in Dental Practice
TUESDAY - DAY ONE Classroom/Didactic Session

7 - 7:30am Continental Breakfast provided
Registration and Course Introduction

7:30 – 8:00am **Written Pre-Test - Dr. Ferguson**
Objective(s) To determine the participants, present level of patient management techniques, conscious sedation modalities and pain control methods

8- 9am **Philosophy and rationale for Intravenous Sedation - Dr. Ferguson**
Objective(s): Discussion of the philosophy and indications for iv sedation, with review of the sedation continuum, definitions of the different levels of sedation, overview of advantages, disadvantages, commonly occurring complications, and adverse events.

9-10am **Requirements for IV Sedation -- Ferguson**
Objective(s): To provide an over view of the requisites for performing safe, efficient, and independent iv conscious sedation. This presentation will highlight the key components of the pre-anesthetic, peri-anesthetic and post-anesthetic management of the sedation patient.

10-11am **Routes of Administration – Dr. Ferguson**
Objective(s): Review the various routes of administration for sedation medications and discussion of advantages and disadvantages of each

11-12pm **IV Sedation Patient Monitoring – Dr. Ferguson**
Objective(s): Review of the sedation continuum, with emphasis on the importance of patient monitoring to maintain the appropriate levels of sedation, recognize changes which may put the patient in danger, and maintain the needed margins of safety. Patient vital sign monitoring, oxygen saturation, and End Tidal CO₂ monitoring techniques and armamentarium will be discussed.

12 - 1pm **Lunch Munch and Learn (lunch provided) – Dr. Ferguson**
Continuation of morning's didactic presentations, course participant question, answer and review

1– 2pm **ADA Guidelines for the Use of IV Sedation - Ferguson**
Objective(s): To review the ADA's guidelines for providing safe and effective sedation and anesthesia to the dental patient. The incorporated discussions will provide definition of critical anesthesia terms, clear definitions of the various levels of sedation, and the critical actions and responsibilities within each level of sedation and anesthesia which must be followed by the provider to deliver efficient sedation with a high margin of safety.

**2-4pm Pharmacology of Benzodiazepines, and Their
Reversal Agents –**

Objective(s): Identify drugs, classifications, interactions, effects, reversal agents, where drugs act and the drug degradation routes

4– 5pm Pharmacology Local Anesthesia –

Objective(s): Discuss the pharmacology, physiology, and specific profiles of commonly used dental local anesthetic agents

5- 6pm IV Sedation Patient Assessment

Objective(s): To examine and discuss the components of the IV sedation patient assessment process. In so doing, the student will recognize patient assessment as the primary tool for identifying the overall level of the health of the patient, and its value in assessing the level of risk of treating/sedating the patient.

**6 - 9pm Advanced Cardiac Life Support Training – Ms. Shawn Neal
(Dinner will be Provided)**

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

WEDNESDAY - DAY TWO Classroom/Didactic Session

7:30 am Continental Breakfast Provided

**8-10am Basic Airway Management and Resuscitation part I – Dr.
Holzhaur**

Objective(s): To review relevant airway anatomy, respiratory physiology and the effects of sedative drugs on respiration; to discuss the importance of basic airway assessment by way of the history and physical assessment/examination; to review the causes and signs of airway obstruction and ventilatory distress with emphasis on managing airway obstruction and ventilatory distress/impairment with basic and advanced airway management techniques, use of basic and advanced airway adjuncts and equipment.

**10-11am IV Conscious Sedation Documentation and Review of the
Sedation Armamentarium – Nurse Graham, Dr Holzhaur**

Objective(s): Review the documentation necessary to perform IV Conscious Sedation in the dental office. This will include the patient anesthesia record and what must be documented to accurately fulfill the anesthesia record's function as a medico-legal document. The discussion will have emphasis on timing, medications used, recording patient vital signs, intraoperative monitoring data, and the patient's progression to recovery, to clearly evaluate discharge criteria for appropriate patient dismissal. Also reviewed will be pertinent items of the pre anesthetic work up, patients past medical and

past anesthetic history, and important questions which should be asked. A review of the necessary armamentarium for IV sedation, and sedation fluids will be demonstrated.

11– 12pm Overview of Venipuncture Anatomy and Technique – Dr. Holzaur, Nurse Graham

Objective(s): To review the basic vascular anatomy of the upper arm, forearm and dorsum of the hand in recognizing appropriate venous structures which might be employed to gain venous access, and the locations of other vascular structures which should be avoided. Basic venipuncture techniques will be demonstrated and basic complications will be discussed.

12– 1pm Lunch Munch and Learn (lunch provided) – Dr. Ferguson
Continuation of morning's didactic presentations, course participant question, answer and review

1-3pm Venipuncture and Intravenous Access Hands on Exercise for all Participants – Dr Holzaur, Nurse Graham

Objective(s) Review the armamentarium of IV sedation; recognize the tourniquet, catheters, tubing, drug ports, and recommended IV fluids; review in real time the vascular anatomy, and the venipuncture techniques. Each participant will have opportunities to assemble and prepare the infusion setup, perform the venipuncture, conform flow and properly stabilize the infusion setup.

3-5pm Pharmacology of Adjunctive Anesthetic Agents – Dr. Ferguson

Objective(s): Review several medications many of which are not classified as anesthetic medications which can be used before an anesthetic is administered as premedications and during anesthesia to augment anesthetic effects or diminish undesirable side effects. The medications will be discussed in regard to their classifications, pharmacologic actions, and indications for use

5-6pm The Role of Nitrous Oxide in Conscious Sedation - Dr. Ferguson

Objective(s): Discuss history of nitrous oxide and role of inhalation sedation in dentistry; identify equipment used in inhalation sedation; understand patient selection, indications and contraindications for inhalation sedation; and explain function of equipment, and risk management.

6- 9pm Advanced Cardiac Life Support Training – Ms Shawn Neal
(Dinner will be Provided)

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

THURSDAY - DAY THREE Classroom/Didactic Session

7:30 am **Continental Breakfast provided**

8-10am **Basic Airway Management and Resuscitation part II – Dr. Ferguson**

Objective(s): To continue discussion on airway management and resuscitation for the sedation dentist with special focus on the importance of a basic airway assessment by way of the history and physical assessment/examination; reviewing the causes and signs of airway obstruction and ventilatory distress, discussing management strategies with emphasis on managing airway obstruction and ventilatory distress/impairment with basic and advanced airway management techniques, and discussion of the indications for use of basic and advanced airway adjuncts and equipment.

10-11am **Misconceptions in the management of Office Emergencies – Dr. Ferguson**

Objective(s): To discuss how medical emergencies in the dental office are a reality, and can happen anytime, anyplace and to anyone; discuss how many dental practices are unprepared to handle them, and embrace several well-known misconceptions associated with managing office emergencies; to discuss the common misconceptions and how they can be avoided in properly addressing and managing an emergent medical problem.

11-12pm **Review of Basic Emergency Medications, Pharmacology and Indications - Dr. Ferguson**

Objective(s): To review Emergency Drug Kit (EDK), and the basic emergency medications recommended by the ADA, their pharmacology and indications. Also discussed are medications which should be available for the provider practicing office intravenous sedation.

12 – 1pm **Lunch Munch and Learn (lunch provided)– Dr. Ferguson**
Continuation of morning's didactic presentations, course participant question, answer and review

1-3pm **Anesthetic Management of Common Systemic Illnesses/Conditions Part I – Dr Ferguson**

Objective(s): To highlight many of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral. The discussion will emphasize review of the basic pathophysiology, sedation indications, contraindications, and basic sedation/anesthesia strategies for safe patient sedation outcomes

3– 5pm **Factors Critical to Managing Office Medical Emergencies – Dr. Ferguson**

Objective(s): To recognize and appreciate the many factors which are critical, and must be present to allow the provider, ancillaries and staff to efficiently, effectively and predictably manage an emergent medical event in the office. The discussion will

highlight appropriate emergency equipment, airway management, medications, and proper training for the Dentist and staff.

5- 6pm Office Emergency prevention, Recognition, and the Basic Action Plan– Dr. Ferguson

Objective(s) To appreciate that “an ounce of prevention is worth a pound of cure” by reviewing tools possessed by the provider which can assist with establishing risk of patient treatment, discussing common symptoms which suggest a problem is at hand, and reviewing the Basic Action Plan which offers the provider a mental flow chart to step by step manage the problem and identify when the next level of care must be summoned.

**6- 9pm Advanced Cardiac Life Support Training – Ms. Shawn Neal
(Dinner will be Provided)**

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

FRIDAY- DAY FOUR Classroom/Didactic Session

**7-8am Continental Breakfast Provided for Munch and Learn –
Dr. Ferguson**

Objective(s): To review and answer questions from the past three days of training and with the upcoming simulation exercises with the high fidelity Simulation Mannequin, to discuss the group dynamics necessary for proper management of an office emergency

8-12 pm Harrison Medical Commons Simulation Lab

**8 – 9:30am Review of Basic and Advanced Airway Adjuncts
Hands on Airway Management Skill Stations – Dr. Ferguson,
Sim Lab Personnel**

Objective(s) To review upper and lower airway anatomy, and to expose the participants to common airway management techniques, and basic and advanced airway adjuncts. Using the Simulation Mannequin as the primary teaching tool, the participant will have the opportunity to review discussed airway management techniques, discuss indications for airway adjunct use, and experience the real time placement of commonly used airway adjuncts with emphasis on both the placement of commonly employed supraglottic devices, and the confirmation of appropriate placement.

**9:30 – 12pm Management of Commonly Occurring Office Emergencies and
Adverse Sedation Events Using the High Fidelity Simulation
Mannequin (Sim Man)**

Objective(s): To engage each participant with an office emergency or adverse sedation

event where the participant on the “hot seat”, using the monitored high fidelity simulation mannequin will have to diagnose the problem, activate the basic action plan, call for assistance, and manage the team members while providing the appropriate treatment(s) under real time. All scenarios will have an after-action review to discuss what was done right, and where improvements could be made.

12 – 1pm Lunch Munch and Learn (lunch provided) – Dr. Ferguson

Objective(s): To review and discuss each office emergency or adverse anesthesia event from the simulation exercises, with the intent to highlight appropriate actions and discuss how other activities should be modified, omitted, or approved to provide the most efficient and predictable patient outcomes. A point of emphasis will be how the group is managed and delegation of activities.

**1-3pm Anesthetic Management of Common Systemic
Illnesses/Conditions Part II – Dr. Ferguson**

Objective(s): To highlight many of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral. The discussion will emphasize review of the basic pathophysiology, sedation indications, contraindications, and basic sedation/anesthesia strategies for safe patient sedation outcomes

**3-6pm Management of Commonly Occurring Dental Office Medical
Emergencies and Adverse Events Part I - Dr. Ferguson**

Objective(s): To review commonly occurring medical emergencies with discussion of the pathophysiology, review of the signs and symptoms, implementation of the Basic Action Plan with appropriate management strategies and approaches, and importance of instituting early involvement of the EMS when necessary.

SATURDAY - DAY FIVE Classroom/Didactic Session

**7-8am Continental Breakfast Provided for Munch and Learn
Patient recovery and Discharge - Dr. Ferguson**

Objective(s): To review the monitored patient and discuss the critical findings suggestive of appropriate recovery from sedation for patient discharge, and emphasize importance of discharge to escort in wheelchair.

**8 - 10am Management of Commonly Occurring Dental Office Medical
Emergencies and Adverse Events Part II - Dr. Ferguson**

Objective(s): To continue discussion and review of commonly occurring medical emergencies, discussion of the pathophysiology, review of the signs and symptoms, implementation of the Basic Action Plan, appropriate management strategies and approaches, and importance of instituting early involvement of the EMS when necessary

**10-12pm Anesthetic Management of Common Systemic
Illnesses/Conditions Part III – Dr. Ferguson**

Objective(s): To continue review and discussion of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral.

12 – 1pm Lunch Munch and Learn (lunch provided)– Dr. Ferguson

Objective(s): To review, discuss and ask questions pertaining to the common office emergencies and common systemic co-morbidities which the sedation dentist must be able to manage or avoid.

**1-2pm Sedation and Special Patient Populations
Sedation and the Geriatric Patient
Sedation of the Obese Patient – Sedation Course Faculty**

Objective(s): Identify the anatomic, physiologic and functional differences of the geriatric and obese patient populations and how these factors must be understood and managed for the safe and predictable use of sedation agents.

**2- 4pm From Pre-sedation Evaluation to Patient Discharge: Putting It
All Together – Sedation Course Faculty**

Objective(s): To review and discuss the key activities and important considerations in the out patient office intravenous conscious sedation progression. Key items of discussion will include the pre sedation evaluation, activities on the day of procedure, NPO considerations, patient recovery protocols, and patient discharge.

SUNDAY - DAY FIVE Classroom/Didactic Session

Schedule will be updated over the coming months and we will send out to potential participants at that time.....

**MONDAY DAY SIX
CLINICAL PATIENT CARE**

7-7:30am Review of Sedation Principles – Nurse Graham

Objective(s): prior to live patient treatment basic sedation principles and venipuncture technique will be reviewed.

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic

Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm

Lunch

1 – 3pm

Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3 - 4pm

Common Dosing Calculations

Objective(s): To review common calculations and dilutions with sedation drugs and local anesthetics, with emphasis on how to calculate toxic drug levels, deliver emergency doses, and how to convert pounds to kilograms

4– 6pm

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation – Dr. Ferguson

Objectives(s): What oral drugs are effective? What is the goal of oral pre-medication? Can oral pre-medication combined with Nitrous Oxide play a role in Conscious sedation? Complications of oral sedation. Contraindications of oral pre-medication. What are the Limitations of oral pre-medication.

TUESDAY DAY SEVEN CLINICAL PATIENT CARE

7-7:30am

Review of patient monitoring – Nurse Graham

Objective(s): To review the monitoring modalities needed for IV sedation vital sign monitoring and their importance to an uneventful sedation experience. .

7:30-8am

Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm

Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm

Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 5pm Preparation for the Office Anesthesia Evaluation Pt I – Dr. Ferguson, Sedation Course Faculty

Objective(s) to prepare the participants for the office evaluation. The presentation will provide a review of important considerations in the office physical plant and IV treatment rooms, adjunctive equipment, back up equipment, instrumentation, emergency drug kits, drug preparation and security, record keeping, and monitoring requirements. State requirements may vary. Information should be available through the participant's state web sites. This is the responsibility of the participant.

5 – 6pm Managing Emergencies: 9 Key Elements of Office Emergency Management - Dr. Ferguson

Objective(s): To review key elements which will aid the practitioner and his/her staff in the management of office emergencies. This presentation will review key elements which will assist the provider in preparing both the office physical plant and personnel, as well as actual management of the patient with a medical emergency.

**WEDNESDAY DAY EIGHT
CLINICAL PATIENT CARE**

7-7:30am Review of airway management techniques – Nurse Graham

Objective(s): To review basic airway management techniques and emphasize the need of the sedation student to be ever vigilant to drug induced changes in airway mechanics. .

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8 - 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 4pm Preparation for the Office Anesthesia Evaluation PT II Dr. Ferguson, Sedation Course Faculty

Objective(s) to prepare the participants for the office evaluation. The presentation will provide a review of important considerations in the office physical plant and IV treatment rooms, adjunctive equipment, back up equipment, instrumentation, emergency drug kits, drug preparation and security, record keeping, and monitoring requirements. State requirements may vary. Information should be available through the participant's state web sites. This is the responsibility of the participant.

4- 6pm Interactive Office Emergency Scenarios - Dr. Ferguson

Objective(s): Office emergency scenarios with specific signs, symptoms and factors will be presented to the participant. Specific to the described scenarios, will be an interactive discussion between participant and faculty where the participants will verbally detail the diagnosis, action plan with specific patient management strategies, to include activation of EMS as needed. After the management plan is provided by the participant, it will be discussed and critiqued by the faculty. Predisposing actors and related pathophysiology of the individual medical emergencies will be reviewed.

**THURSDAY DAY NINE
CLINICAL PATIENT CARE**

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the

advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 4pm Review of Prevention, Recognition, and Implementation of the Basic Action Plan- Dr Ferguson

Objective(s) To review preventive measures, signs and symptoms which may suggest an upcoming emergent event, and implementation of the Basic Action Plan which is designed to assist the provider in determining if the problem at hand is one which can be managed on site, or if the next level of care is required.

4- 6pm Interactive Office Emergency Scenarios - Dr. Ferguson

Objective(s): Office emergency scenarios with specific signs, symptoms and factors will be presented to the participant. Specific to the described scenarios, will be an interactive discussion between participant and faculty where the participants will verbally detail the diagnosis, action plan with specific patient management strategies, to include activation of EMS as needed. After the management plan is provided by the participant, it will be discussed and critiqued by the faculty. Predisposing actors and related pathophysiology of the individual medical emergencies will be reviewed.

FRIDAY DAY TEN

CLINICAL PATIENT CARE Group

7-7:30am Review of IV Sedation Record Keeping – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8 - 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3 - 4pm

Review of sedation principles and pearls- Dr Ferguson

Objective(s) To highlight up 10 days of comprehensive training and review key sedation principles and knowledge pearls for safe, uneventful, and predictable patient sedation experiences. The discussions will emphasize good risk management, proper patient selection, proper written consent; detailed sedation plan documentation, and monitoring,

4 – 5pm

IV Sedation Post-test

Questions and Answers, Complete course critique - Dr. Ferguson

Objective(s): to administer the IV Sedation Post Test.

To review sedation cases and associated management questions or problems.

The discussions will emphasize the importance of Dentist and staff training through CE, staying current with national and state rules and changes; good record keeping and periodic review and process improvement..

FL/NY RESIDENTS ONLY (THREE ADDITIONAL CLINICAL DAYS)

MONDAY, DAY ELEVEN

FL/NY RESIDENTS ONLY CLINICAL PATIENT CARE

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

**TUESDAY, DAY TWELVE
CLINICAL PATIENT CARE**

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

**WEDNESDAY, DAY THIRTEEN
CLINICAL PATIENT CARE**

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

CURRICULUM VITAE

Name and Present Position:

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Citizenship: USA

Education:

B.A. 1976 Slippery Rock State College
Slippery Rock, PA 16057

D.M.D. 1980 University of Pittsburgh School of
Dental Medicine, Pittsburgh, PA 15222

Post Graduate Education:

Certificate 1991 Oral and Maxillofacial Surgery Residency Program
Eisenhower Army Medical Center
Fort Gordon, GA 30905-5650

Board Certification:

Diplomate American Board of Oral and Maxillofacial Surgery
ABOMS Recertification September 2003
Diplomate National Dental Board of Anesthesiology 2001

Fellowships:

Fellow American Association of Oral and Maxillofacial Surgeons
Fellow American College of Oral and Maxillofacial Surgeons
Fellow American Dental Society of Anesthesia

Professional Society Membership:

American Dental Association
Georgia Dental Association
American Association of Oral and Maxillofacial Surgery
American College of Oral and Maxillofacial Surgeons
American Dental Society of Anesthesia
National Society of Oral and Maxillofacial Surgeons
Georgia Society of Oral and Maxillofacial Surgeons
American Dental Education Association

State License:

Georgia	Active
South Carolina	Active
Pennsylvania	Inactive

Hospital Affiliations:

May 2004- present	MCG/GHSU/GRU/AU Medical Center Augusta, Georgia MCG/GHSU/GRU Children's Medical Center/ CHOG (Children's Hospital of Georgia, formerly CMC Children's Medical Center Augusta, Georgia
May 2004-Present	Veterans Administration Hospital and Medical Center Augusta, Georgia
April 2006-present	Augusta State Medical Prison Grovetown, Georgia
June 1994-March 2004	Eisenhower Army Medical Center Fort Gordon, Georgia
Jan 1992-June 1994	Ireland Army Community Hospital Fort Knox, Kentucky
July, 1991-Dec, 1994	William Beaumont Army Medical Center Fort Bliss, Texas
July 1987-July 1991	Eisenhower Army Medical Center Fort Gordon, Georgia

Professional Appointments:

June 2006-present	Vice Chair Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912
Jun 2005-June 2006	Interim Chairman Department of Oral and Maxillofacial Surgery MCG School of Dentistry Augusta, GA 30912
May 2005-Dec 2017	Director of Post Graduate Training Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912 Department of Oral and Maxillofacial Surgery Augusta, GA 30912

May 2004-present	Associate Professor Department of Surgery Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Augusta, GA 30912
Apr 2004-present	Associate Professor Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912 College of Dental Medicine Department of Oral and Maxillofacial Surgery Augusta, GA 30912
Mar 2004-Apr 2004	Awaiting faculty appointment to MCG
Mar 2003-Mar 2004	Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA Mentor/Teaching Faculty, Oral and Maxillofacial Surgery Residency Program Teaching Faculty, for Graduate Dental Education Programs US Army Dental Activity Fort Gordon GA 30905
Feb 2001-Mar 2003	Chairman, Department of Oral and Maxillofacial Surgery Eisenhower Army Medical Center, Fort Gordon, GA 30905 Program Director, Oral and Maxillofacial Surgery Residency Training Program Eisenhower Army Medical Center, Fort Gordon, GA 30905 Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA
Feb 2001-July 2002	Chairman, Department of Hospital Dentistry Eisenhower Army Medical Center, Fort Gordon, GA 30905

Jul 1994-Aug 1999	Chief, Dental Services 249th General Hospital Fort Gordon, GA.
Mar 1998-Feb 2001	Assistant Chairman, Department of Oral and Maxillofacial Surgery Eisenhower Army Medical Center Fort Gordon, GA
	Assistant Program Director, Oral and Maxillofacial Surgery Residency Training Program
Jul 1994-Mar 1998	Mentor, Oral and Maxillofacial Surgery Residency Program
	Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA
Nov 1992-July 1994	Adjunct Assistant Professor, Department of Surgical and Hospital Dentistry, University of Louisville School of Dentistry, Louisville, KY
Jan 1992-July 1994	Assistant Chief, Oral and Maxillofacial Surgery Service Staff Oral and Maxillofacial Surgeon Ireland Army Community Hospital Fort Knox, KY Mentor in Oral and Maxillofacial Surgery for Advanced Education in General Dentistry and Post Graduate Training in Orthodontic Residency Programs
July 1991-Dec 1991	Staff, Oral and Maxillofacial Surgery Mentor, Oral and Maxillofacial Surgery Residency Program, William Beaumont Army Medical Center, Fort Bliss, TX
1987-1991	Residency in Oral and Maxillofacial Surgery Eisenhower Army Medical Center Fort Gordon, GA
1985-1987	General Dental Officer Fort Meade, MD

1984-1985 General Dental Officer
Chief, Oral Surgery Svc, Carius Dental Clinic
10th MED DET
Youngsan, Korea

1980-Dec 1983 General Dental Officer
Fort Gordon, GA

Teaching Affiliations:

Jan 2006-present Course Director, Advanced Oral and Maxillofacial Surgery
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

June 2005-present Co-Course Director, Intravenous Conscious Sedation Course
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

Apr 2004- present Department of Oral and Maxillofacial Surgery
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

April 2004-present Department of Surgery
Augusta University Medical Center (formerly the Medical College of
Georgia, Georgia Health Sciences University, Georgia Regents University
Augusta)
Augusta, GA 30912

July 1994-Mar 2004 Eisenhower Army Medical Center
Fort Gordon, GA

Sept 1994-Aug 1998 USADENCOM Sponsored Army Implant Course Faculty

Nov 1992-July 1994 Adjunct Assistant Professor, Department of
Surgical and Hospital Dentistry,
University of Louisville School of Dentistry,
Louisville, KY

Jan 1992-July 1994 Ireland Army Community Hospital
Fort Knox, KY

July 1991-Dec 1991 William Beaumont Army Medical Center,
Fort Bliss, TX

Committees:

Sept 2006 –present	MCG School of Dentistry Nobel Biocare Operations Committee
May 2005 – present	MCG Medical Center OR Committee
May 2005 – present	MCG School of Dentistry Facilities and Equipment Committee
Feb 2005 – Mar 2006	Secretary Graduate and Post Graduate Section American Dental Education Association (ADEA)
Mar 2005 – Mar 2007	Chairman Elect, Graduate and Post Graduate Section American Dental Education Association (ADEA)
Mar 2007 – Mar 2008	Chairman, Graduate and Post Graduate Section American Dental Education Association (ADEA)
May 2004-present	MCG School of Dentistry Implant Committee
July 2004–2006	MCG School of Dentistry Admissions Committee
June 2005-present	MCG School of Dentistry Advanced Education Committee
January 2013-present	Promotion and Tenure Committee
April 2001-April 2005	Member, American Association of Oral and Maxillofacial Surgeons Committee on Membership
April 2005-October 2010	Chairman, American Association of Oral and Maxillofacial Surgeons Committee on Membership

Certifications:

- Advanced Trauma Life Support (ATLS)
- Advanced Cardiac Life Support (ACLS)
- Pediatric Advanced Life Support (PALS)
- Basic Life Support (BLS)-

Awards, Honors and Decorations

- Outstanding Faculty Award MCG School of Dentistry 2006-07
- Surgeon General's "A" Proficiency Designator in Oral and Maxillofacial Surgery
- Meritorious Service Medal
- Army Commendation Medal (X4)
- Army Achievement Medal
- National Defense Service Medal
- Expert Field Medical Badge

- Parachutist Badge
- Army Service Ribbon
- Overseas Service Ribbon

Publications:

Sutley, SH, Ferguson, HW, Quigley, NC: Infection Control in Oral Surgery; AGD Update Series June 1993.

Moody, John B., Quigley, Nicholas, Ferguson, H.W., Sutley, Stephen H: Odontogenic Keratocyst. General Dentistry Vol 45 #2, March-April 1997, pp 172-176.

Wright, William, Ferguson, H.W., Drugs Used in Oral and Maxillofacial Surgery, EAMC Publication, 1996.

John W. Hellstein; Ronald L. Roholt; Henry W. Ferguson, The case of a subtle expansion of the mandible. Journal of Contemporary Dental Practice 2002;3(4):93-95.

Hellstein JW, Roholt RL, Ferguson HW
AAOMP case challenge: "The case of a subtle expansion of the mandible".
J Contemp Dent Pract.[Electronic Resource] 2002 Nov 15;3(4):66-72.

Fallah DM, Baur DA, Ferguson HW, Helman JI
Clinical application of the temporoparietal-galeal flap in closure of a chronic oronasal fistula: review of the anatomy, surgical technique, and report of a case.
J Oral Maxillofac Surg. 2003 Oct;61(10):1228-30.

Velez, Martin R., Ferguson, Henry W., Dorsett, Cecil, Hansen, Karla,
Lemierre's syndrome: a case report.
J Oral Maxillofac Surg. 2003 Aug; 61(8):968-71.

Clark,C., Strider, J., Hall, C. Ferguson, HW.
Distraction osteogenesis in irradiated rabbit mandibles with adjunctive hyperbaric oxygen therapy.
J Oral Maxillofac Surg. 2006 Apr;64(4):589-93.

Ferguson,HW, Stevens, MR
Advances in head and neck radiotherapy to the mandible
Oral and Maxillofacial Surgery Clinics of North America. Nov 2007 19 (4):553-563

Ferguson, HW,
Preprosthetic Surgical Considerations in Textbook of Complete Dentures, 6th Ed
Rahn AO, Ivanho JR, Plummer KD, Peoples Medical Publishing House, Shelton, Connecticut
2009, pp65-85

Wayne W. Herman¹, DDS, MS; Henry W. Ferguson², DDS;
Dental Care for the patient with heart failure: an update
J Am Dent Assoc, July 2010, Vol 141, No 7, 845-853

Rafik A. Abdelsayed, DDS, Suash Sharma, MD and Henry Ferguson, DDS
Fibrous Cortical defect (nonossifying fibroma) of the mandibular ramus: report of two cases
Oral Surg oral Med Oral path Oral Radiol Endo 2010;110:504-508

Etezadi A, Ferguson H, Emam HA, Walker P.
Multiple Remediation of soft tissue reconstruction in osteoradionecrosis of mandible: a case report
J Oral Maxillofac Surg. 2013 Jan;71(1):e1-6. doi: 10.1016/j.joms.2012.09.011

Ferguson, HW
Postoperative Cognitive Dysfunction
OMS Knowledge Updates (to be released summer 2013)

Table Clinics:

Third International Conference on Head and Neck Cancer
San Francisco, California July 26-30, 1991

Arcuri, Michael R, Ferguson, HW, Autogenous Bone Grafts with Titanium Implants for
Segmental Mandibular Defect Reconstruction

Arcuri, MR, LaVella WE, Hoffman HH, Ferguson HW: Implant Fixation in Irradiated Bone for
Intraoral Prosthetic Rehabilitation

Lectures/Presentations:

Georgia Society of Dental Assistants
Masters Inn Conference Center, Augusta, Ga.
Preparing the Office for Medical Emergencies
Pathophysiology and Management of Dental Emergencies
May 1995

EAMC
MED/SURG ward 10w
In-service lecture
Post-op Management of the OMS Patient

April 1995

EAMC

Dept of Family practice

Maxillofacial Trauma

Jan 4, 1996

USADENTAC, Ft Gordon

Rationale, Techniques, and Complications of Intravenous Access

Anatomy and Techniques for Venipuncture

January 1996

EAMC

Dept of OMS

Wound Healing

Local Flaps in Facial Reconstruction

PIG LAB/Hands on instruction

Jan 30, 1996

EAMC

Dept of Family practice

Odontogenic Infection

Mar 7, 1996

USADENTAC, Ft Gordon

Overview of Oral and Maxillofacial Surgery

Apr 16, 1996

Migrant Clinicians Network/_Migrant Stream Dental Forum

Sponsored By US Dept of Public Health

Stouffer Hotel

Nashville, Tenn.

Overview and Management of Medical Emergencies

May 1996

Stouffer Hotel

Nashville, Tennessee

Complications of Dentoalveolar Surgery

May 4-5, 1996

EAMC MED/SURG ward 10w

In-service Lecture

Post-op Management of the OMS Patient

May 9, 1996

USADENTAC, Ft Gordon, GA

Endodontics Residency Program

Anatomy of Odontogenic Space Infections

May 16, 1996

Craniofacial Implant Course

Menger Hotel

San Antonio, Texas

Surgical Management of the Atrophic Mandible and Maxilla in the Pre-implant Era

May 21-22, 1996

EAMC SICU

In-service Lecture

SICU Concerns/Post-op Management of the OMS Patient

Overview of Maxillofacial Surgery Which Requires SICU Care

June 27, 1996

USADENTAC, Ft Gordon

Dental Assistants Course

Office Emergencies

Overview of the SPARK KIT/EDK

July 22, 1996

USADENTAC, Ft Gordon

Periodontics Residency Program

Intravenous Sedation Course

Preparing the Office for Medical Emergencies

Management of Office Emergencies

Overview of the Medical History and Physical Exam

July 25, 1996

EAMC SICU

In-service Lecture

SICU Concerns/Post-op Management of the OMS Patient

Overview of Maxillofacial Surgery Which Requires SICU Care Aug 1, 1996

USADENTAC, Fort Stewart

Ft Stewart, Ga.

Management of Facial Trauma

Management of Soft Tissue Trauma

August 15, 1996

USADENCOM Short course in Oral and Maxillofacial Surgery

Sheraton Hotel, Augusta, Ga.

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

September 9-13, 1996

9th East Coast Migrant Stream Forum
Sponsored By US Dept of Public Health
Tampa Fla.
Office Emergencies
Preparing the Office for Emergencies
Nov 1996

Fort Stewart Dental Activity
Preparing the Office for Medical Emergencies
Pathophysiology and Management of Dental Emergencies
Nov 1996

European Dental Conference/OMS consultant
Sonthoffen, Germany
Implants: A Historical Overview
Surgical Management of the Atrophic Mandible and Maxilla In The Pre-implant Era
Current Implant Systems
Craniofacial Implants
Advanced Implant Surgery
Implant Complications
April 1997

USADENCOM Implant Course
Fort Hood, Texas
Surgical Management of the Atrophic Mandible and Maxilla in the Pre-implant Era
Advanced Implant Surgery
Biology of Bone Healing
May 1997

USADENTAC, Ft Gordon
Periodontics Residency Program
Intravenous Sedation Course
Overview of the Medical History and Physical Examination
Preparing the Office for Medical Emergencies
Management of Medical Emergencies
July 1997

USADENTAC, Fort Stewart, GA
Dental Activity Hunter Army Airfield
Savannah Dental Society
Hunter Army Airfield Officer's Club
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
August 16, 1997

Fort Bragg Dental Activity

Fort Bragg, NC

2year AEGD Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

Implant Complications

August 1997

Augusta Dental Society

West Lake Country Club

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

January 1997

Patrick Air Force base

Melborne, FLA

OMS Consultant Visit

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

April 1998

Mississippi Black Professional Conference/Mississippi Dental Association

Biloxi, Mississippi

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

May 1998

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV Sedation Course

Overview of the Medical History and Physical Examination

Preparing the Office for Medical Emergencies

Management of Medical Emergencies

July 1998

Fort Benning Dental activity

1year GDR Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

August 1998

USADENCOM Implant Course

Fort Bragg, North Carolina

Advanced Implant Surgery

Biology of Bone Healing

Sept 16-18, 1998

USADENCOM Implant Course

Fort Hood, Texas

Advanced Implant Surgery

Biology of Bone Healing

Sept 23-25, 1998

Medical College of Georgia

Biological Sciences Lecture Series

Physiology of Skin and Mucosa Healing

Physiology of Bone Healing

Maxillofacial trauma: Management of Hard and Soft Tissue Trauma

October 19, 1998

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV sedation Course

Overview of the Medical History and Physical Examination

Preparing the office for medical emergencies

Management of medical emergencies

July 26-28, 1999

USA DENTAC Fort Benning 1yr GDR Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

August 26-27, 1999

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV Sedation Course

Overview of the Medical History and Physical Examination

Preparing the Office for Medical Emergencies

Management of Medical Emergencies

July 10-12, 2000

USA DENTAC Fort Benning 1yr GDR Program
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
Maxillofacial Trauma
Management of Soft Tissue Wounds
Complications of Dentoalveolar Surgery
Aug 24-25, 2000

Medical College of Georgia
Biological Sciences Lecture Series
Physiology of Skin and Mucosa Healing
Physiology of Bone Healing
Maxillofacial trauma: Management of Hard and Soft Tissue Trauma
October 10, 2000

USADENTAC FT Gordon, Ga.
Dept of Periodontics
IV Sedation Course
Overview of the Medical History and Physical Examination
Preparing the Office for Medical Emergencies
Management of Medical Emergencies
July 16-18, 2001

USA DENTAC Fort Polk, LA
Complications of Dentoalveolar Surgery
Management of Odontogenic Infections
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Jan 6-8, 2002

USA DENTAC Fort Benning, GA 1yr GDR Program
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
Maxillofacial Trauma
Management of Soft Tissue Wounds
Complications of Dentoalveolar Surgery
Feb 21-23, 2002

USADENTAC FT Gordon, GA
Alternate Wartimes Roles Lecture Series
Indications For Intravenous Therapy
Regional Anatomy for Venipuncture
Techniques for Venipuncture
Complications, and Management of Complications of Venipuncture

March 21, 2002

Georgia State Department of Corrections Dental Service
Macon, GA

Identification and Management of Common Complications of Dentoalveolar Surgery
April 16, 2002

Academy Of General Dentistry Mastership Course
Atlanta, GA

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
What the Practitioner Should Know About Antibiotics Before Prescribing
Maxillofacial Trauma Overview
Management of Dentoalveolar Trauma
Management of Soft Tissue Wounds
Principles for Performing Complicated Extractions
Complications of Dentoalveolar Surgery
Preprosthetic Surgery For the General Dentist
Implant Applications in Oral and Maxillofacial Surgery
Advanced Implant Surgery
Biopsy Principles and Techniques
May 3-5, 2002

Madigan Army Medical Center
Tacoma, WA

Annual Army Oral and Maxillofacial Surgery Review Course
Implant History
Implant Geometries and Surface Characteristics
Implant Applications in Oral and Maxillofacial Surgery
May 7-10 2002

USADENTAC FT Gordon, GA
Alternate Wartimes Roles Lecture Series
810th Medical Company (DS), Durham, NC
Maxillofacial Trauma Overview
Management of Maxillofacial Hard and Soft Tissue Trauma
Etiology and Pathophysiology of Odontogenic Infections
Regional Anatomy of Odontogenic Infection (Fascial Spaces)
Surgical and Medical Management of Odontogenic Infections
June 11, 2002

USADENTAC FT Gordon, GA
Alternate Wartimes Roles Lecture Series
808th Medical Company (DS), Fort Sheridan, ILL
Maxillofacial Trauma Overview
Management of Maxillofacial Hard and Soft Tissue Trauma
Etiology and Pathophysiology of Odontogenic Infections
Regional Anatomy of Odontogenic Infection (Fascial Spaces)

Surgical and Medical Management of Odontogenic Infections

July 17, 2002

Medical College of Georgia

Biological Sciences Lecture Series

Physiology of Skin and Mucosa Healing

Physiology of Bone Healing

Maxillofacial trauma: Management of Hard and Soft Tissue Trauma

October 9, 2002

Medical College of Georgia

OMS Lecture Series

Implant Overview: Historical Overview, Bone physiology

April 2004

Medical College of Georgia

Conscious Sedation Course

Medical History Review of Systems for Conscious Sedation

Requirements for Conscious Sedation

May 6, 2004

Medical College of Georgia

OMS Lecture Series

Patient Diagnosis, Review of anatomical considerations, Basic Surgical techniques

May 2004

Medical College of Georgia

OMS Lecture Series

Advanced Surgical techniques, Clinical applications, Grafting techniques and materials

May 2004

Medical College of Georgia

OMS Lecture Series:Complications of Implant Surgery

May 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Host organism relationship, Host immune response, Local host defenses

June 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Microbiology of odontogenic infections, Anatomy of fascial space infections

June 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Diagnosis of odontogenic infections, Surgical and medical management

of odontogenic infections,

June 2004

Kenna S. Givens, MD Plastic Surgery Symposia

Overview of Endosseous Dental Implants

June 18, 2004

Medical College of Georgia

OMS Lecture Series

Complications of Dentoalveolar Surgery

June 29, 2004

MCG School of Dentistry Implant Course

Advanced Implant Surgery

Complications of Implant Surgery

July 12-15 2004

Area Health Education Centers Symposia

Overview of Oral and Maxillofacial Surgery

July 20, 2004

Medical College of Georgia

OMS Lecture Series

Nitrous Oxide Sedation: Indications, Contraindications

Pharmacology, Armamentarium, Technique

August, 17 2004

38th Parallel Dental Meeting

Yongsan, Korea

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

What the Practitioner Should Know About Antibiotics Before Prescribing

Maxillofacial Trauma Overview

Management of Dentoalveolar Trauma

Management of Soft Tissue Wounds

Principles for Performing Complicated Extractions

Complications of Dentoalveolar Surgery

Preprosthetic Surgery For the General Dentist

Implant Applications in Oral and Maxillofacial Surgery

Advanced Implant Surgery

Biopsy Principles and Techniques

Nov 27-Dec 3 2004

Academy Of General Dentistry Mastership Course

Atlanta, GA

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

What the Practitioner Should Know About Antibiotics Before Prescribing

Maxillofacial Trauma Overview

Management of Dentoalveolar Trauma

Management of Soft Tissue Wounds

Principles for Performing Complicated Extractions

Complications of Dentoalveolar Surgery

Preprosthetic Surgery For the General Dentist

Implant Applications in Oral and Maxillofacial Surgery

Advanced Implant Surgery

Biopsy Principles and Techniques

February 18-20, 2005

Fort Hood Texas Dental Activity

AEGD Program

Management of Odontogenic Infections

Maxillofacial Trauma Overview

Complications of Dentoalveolar Surgery

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Killeen, TX

April 1-2, 2005

AO ASIF

Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction

OR Nurse Course

General Principles of Orthognathic Surgery

Myrtle Beach, SC

November 29, 2005

MCG SOD Advanced Oral and Maxillofacial Surgery Course

Medico-legal Considerations

Major Pre-prosthetic Surgery

Infection 1

Infection 2

Biopsy Principles and Techniques

Management of Cysts and Benign Tumors

Overview of the Maxillary Sinus and Sinusitis

Salivary Gland Disease

Dentoalveolar and Soft Tissue Trauma

Diagnosis and Management of Facial Fractures

Correction of Dentofacial Deformities

Tempromandibular Disorders

Cleft Lip and Palate

Maxillofacial Reconstruction

Jan-May 2006

MCG SOD Department of Oral Medicine Lecture Series

Pulmonary Assessment

Pulmonary Disease

January 9, 2006

GEORGIA Academy of General Dentistry Annual Meeting

Alanta, GA

Oral Surgery Pearls for the General Dentist

February 4, 2006

MCG SOD Intravenous Conscious Sedation Course

Conscious Sedation Patient Management in Dental Practice

Introduction to 9 Key Elements of Office Emergency Management

Pharmacology of Adjunctive Anesthetic Agents

Office Emergencies: Preparation of the office for emergencies

Introduction to, Airway Management, Complications and Resuscitation

Preparing For an Office Evaluation

Introduction to Medical Emergency Management in the Dental Office

Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I

Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II

Sedation and the Geriatric Patient

From Presedation Evaluation to Patient Discharge: Putting It All Together

The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation

Augusta, GA

February 8-12, 2006

Augusta Tech Dental Assisting Program

Nitrous Oxide Inhalational Anesthesia:

Indications, Pharmacology, Armamentarium, Review of Technique

Augusta, GA

Feb 18, 2006

MCG SOD Oral Implantology Course

Overview Surgical Implant Placement

Dental Implant Site Development and Preservation

February 22, 2006

MCG SOD Medically Compromised Patient Course

Pulmonary Disease

March 6, 2006

AO ASIF

Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction

OR Nurse Course

General Principles of Orthognathic Surgery

Providence, RI

March 18, 2006

MCG SOD Intravenous Conscious Sedation Course
Conscious Sedation Patient Management in Dental Practice
Introduction to 9 Key Elements of Office Emergency Management
Pharmacology of Adjunctive Anesthetic Agents
Office Emergencies: Preparation of the office for emergencies
Introduction to, Airway Management, Complications and Resuscitation
Preparing For an Office Evaluation
Introduction to Medical Emergency Management in the Dental Office
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II
Sedation and the Geriatric Patient
From Presedation Evaluation to Patient Discharge: Putting It All Together
The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation
Augusta, GA
April 12-16, 2006

Tripler Army Medical Center
Department of Oral and Maxillofacial Surgery
Schofield Army Dental Activity 1 year GPR Program
Management of the Naso-Orbital-Ethmoid Fracture
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Complications of Dentoalveolar Surgery
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Advanced Implant Surgery
Honolulu, HI
May 12-14 2006

MCG SOD Intravenous Conscious Sedation Course
Conscious Sedation Patient Management in Dental Practice
Introduction to 9 Key Elements of Office Emergency Management
Pharmacology of Adjunctive Anesthetic Agents
Office Emergencies: Preparation of the office for emergencies
Introduction to, Airway Management, Complications and Resuscitation
Preparing For an Office Evaluation
Introduction to Medical Emergency Management in the Dental Office
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II
Sedation and the Geriatric Patient
From Presedation Evaluation to Patient Discharge: Putting It All Together
The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation
Augusta, GA

May 14-18, 2006

Georgia Dental Society
Annual Meeting
Complications of Dentoalveolar Surgery
Pearls for the General Dentist
Miami, Florida
June, 14 2006

AO ASIF
Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction OR
Nurse Course
General Principles of Orthognathic Surgery
Little Rock, AK
July 8, 2006

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant
Surgery
Augusta, GA
July 19, 2006

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
October 11-15, 2006

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
December 13-17, 2006

MCG SOD MCG SOD Advanced Oral and Maxillofacial Surgery Course
Lectures as noted in previous courses
Augusta, GA
January-May 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
January 17-21, 2007

MCG SOD Oral Implantology Course
Antral Augmentation
February 16, 2007

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 12, 2007

MCG SOD Medically Compromised Patient Course
Pulmonary Disease
March 8, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March 14-18, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May 9-13, 2007

Madigan Army Medical Center
Oral and Maxillofacial Surgery Short Course
Trauma in the Civilian World
Gun Shot Wounds & Reconstruction
Office Emergencies
Dental Implants & Pre-Prosthetic Surgery
Complications of Dentoalveolar Surgery
Tacoma, Washington
May 14-18, 2007

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant Surgery
Augusta, GA
July 19, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
August 15-19, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2007

MCG SOD SOD Advanced Oral and Maxillofacial Surgery Course
Lectures as noted in previous courses
Augusta, GA
January-May 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
January-February 2008

Academy Of General Dentistry Mastership Course
Atlanta, GA
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
What the Practitioner Should Know About Antibiotics Before Prescribing
Maxillofacial Trauma Overview
Management of Dentoalveolar Trauma
Management of Soft Tissue Wounds
Principles for Performing Complicated Extractions
Complications of Dentoalveolar Surgery
Preprosthetic Surgery For the General Dentist
Implant Applications in Oral and Maxillofacial Surgery
Advanced Implant Surgery
Biopsy Principles and Techniques
February 1-3, 2008

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 20, 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March-April 2008

MCG Dental Implantology Maxi Course
Implants and the Medically Compromised Patient

Atlanta, GA
April 19, 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May-June 2008

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant
Surgery
Augusta, GA
July 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
August-September 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2008

MCG SOD Department of Oral Medicine Lecture Series
Cardiac /Pulmonary Assessment
Jan 5, 2009

MCG SOD Department of Oral Medicine Lecture Series
Pacemakers, Defibrillators, and Arrhythmias
Jan 5, 2009

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 15, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March-April 2009

MCG SOD Department of Oral Medicine Lecture Series
Overview of Pulmonary Disease; Pulmonary Assessment

March 2, 2009

MCG SOD Department of Oral and Maxillofacial Radiology Lecture Series
Advanced Oral and Maxillofacial Imaging: It's application to the management of complex trauma, pathologic resection and reconstruction, and implant rehabilitation,
March 24, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May-June 2009

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant Surgery
Augusta, GA
July 2009

LAODI Implant Conference
Preparation of The office for emergencies
Review of the Emergency Drug Kit
Miami Hilton, Miami, Fla
August 20-21, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
August- September 2009

South Carolina State Dental Society
Bisphosphonate Associated Osteonecrosis of the Jaws
Marriott Hotel
Columbia, SC
October 6, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2009

Georgia AGD Fall CE/Hands on Surgery Course
Exodontia principles
Preprosthetic Surgery for the General Dentist
Complications of Dentoalveolar Surgery

Principles for the Management of Impacted Teeth
Intraoral Biopsy Principles
Bisphosphonate Induced Osteonecrosis of the Jaws
Pig jaw hands on Surgery Course
November 20-21, 2009
Athens, GA.

MCG SOD Last Chance CE Series
Preparation of the Office for Emergencies
December 4, 2009

Augusta Tech Dental Assisting Program
Overview of Nitrous Oxide/O2 Inhalation Sedation
Indications, Contraindications, Pharmacology, Armamentarium, and
Technique
Feb 15, 2010
MCG SOD

MCG/AAID Dental Implant Course
Dental implants and infection
Management of Office Emergencies /
Interactive maniquin simulation lab
March 4-7, 2010
Mariott Hotel, Augusta GA
MCG Interactive Simulation Lab

Georgia Academy of General Dentistry Master Trac Course
Hands on Surgery Course
Exodontia principles
Preprosthetic Surgery for the General Dentist
Complications of Dentoalveolar Surgery
Principles for the Management of Impacted Teeth
Intraoral Biopsy Principles
Bisphosphonate Induced Osteonecrosis of the Jaws
June 4-6, 2010
Hilton perimeter Hotel, Atlanta, GA

AO North America
Multispecialty ORP Course
RIF of Comminuted Mandible Fractures
June 27-27, 2010
Westin Lombard Yorktown Center
Lombard, Ill

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

August- September 2010

Georgia AGD Fall CE/Hands on Surgery Course

Review of Bisphosphonate Induced Osteonecrosis

Frequent Misconceptions in the Management of Office Emergencies

Preparation of the Office Physical Plant, and Personnel to Manage Office Emergencies

Review of Emergency Drugs

Review of Common Office Emergency Scenarios

Pig jaw hands on Surgery Course

September 17-18

Athens, GA.

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

November-December 10. 2010

American Dental Society of Anesthesia

General Anesthesia and Deep Sedation Winter Course

Pharmacologic and Other Considerations for the Prevention of Post Operative Nausea and Vomiting

Misconceptions in the Management of Medical Emergencies in the Dental office When Midazolam, Fentanyl, and propofol Aren't Doing the Job

Review of basic Emergency Drugs

Renaissance Chicago Hotel, Chicago, Ill December 5-6, 2010

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

Jan-Feb, 2011

American Society of Maxillofacial Surgeons Advanced Course

Maxillofacial Trauma/Facial Bone Osteotomies

Jacksonville. Fla

February 18-20, 2011

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
March-April, 2011

MCG/AAID Dental Implant Course
Dental implants and infection

March 3, 2011
Mariott Hotel, Augusta GA

Mongalo Implant Institute
Anatomical/ Surgical Considerations and Techniques for Antral Augmentation

May 11-14, 2011
Marriott Casa Magna
Peurta Vallarta, Mexico

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
May-June, 2011

Georgia Academy of General Dentistry Master Trac Course
Oral and maxillofacial Surgery Overview

June 5, 2011
Hilton perimeter Hotel, Atlanta, GA

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
August-September, 2011

Mongalo Implant Institute
Anatomical/ Surgical Considerations and Techniques for Antral Augmentation

September 20-24, 2011
Marriott Casa Magna
Peurta Vallarta, Mexico

GHSU CDM Continuing Education
Misconceptions in the Management of Emergencies in the Dental Office
Overview of Odontogenic Infection
Brasstown Lodge
Brasstown, GA
October 14-15, 2011

Fort Benning Dental Activity AEGD Program
Exodontial Principles
Impacted teeth/Complicated Dentoalveolar Surgery
Complications of Dentoalveolar Surgery
Preprosthetic Surgery
Fort Benning, GA November 16-17, 2011

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December, 2011

GHSU Last Minute CE
Review of management of Office Emergencies
Alumni Center GHSU
December 2, 2011

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
January 11-15, 2012 Classroom
January 16-February 24, 2012 Hands on Clinical Portion

MCG/AAID Dental Implant Course
Dental Implants and Infection
Healing of Dental Implants
Key Focus Points in the management of office Emergencies: The Doctor, the Ancillaries, and the Physical Plant/Equipment and Drugs
March 1, 2012
Wingate by Wyndam Hotel
Atlanta, GA 30312

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

March 14-18, 2012 Classroom

March 19-23, April 1- 27, 2012 Hands on Clinical Portion

Mongalo Live Implant Course

Overview of Antral Augmentation , Review of the Anatomy, Surgical Techniques,
And Management of Complications

March 25-31, 2012

Marriott Casa Magna, and The Mongalo Implant Institute

Puerto Vallarta, Mexico

AO Operating Room Personnel Course

Fundamentals of Orthognathic Surgery

May 5, 2012

Waverly Hotel

Atlanta, GA

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

May 16-20, 2012 Classroom

May 21-June 23, 2012 Hands on Clinical Portion

Palmetto Medical Dental and Pharmaceutical Association

Athletic Maxillofacial Trauma and Trauma Overview

Review of Odontogenic Infections and Their Management

May 26, 2012

Marriott Hotel

Columbia, SC

GHSU CE Course: Management of Emergencies in the Dental Office

Why is a strategy for managing office emergencies important

Misconceptions in the management of office emergencies

Management of common emergency scenarios

June 1-2, 2012

GHSU Allied Health Auditorium
Augusta, GA

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

May 16-20, 2012 Classroom

May 21-June 23, 2012 Hands on Clinical Portion

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

August 15-20, 2012 Classroom

August 20-September 21, 2012 Hands on Clinical Portion

Mongalo Live Implant Course

Overview of Antral Augmentation, Review of the Anatomy, Surgical Techniques,
And Management of Complications

September 9-15, 2012

Marriott Casa Magna, and The Mongalo Implant Institute

Peurta Vallarta, Mexico

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

October 17-21, 2012 Classroom

October 22-November 16, 2012 Hands on Clinical Portion

AO Operating Room Personnel Course

Fundamentals of Orthognathic Surgery

November 2, 2012

The Henry Hotel

Dearborn, MI

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

January 16-20, 2013 Classroom
January 20-February 22, 2013 Hands on Clinical Portion

MCG/AAID Dental Implant Course
Dental Implants and Infection
Healing of Dental Implants
Key Focous Points in the management of office Emergencies: The Doctor, the Ancillaries, and the Phsical Plant/Equipment and Drugs
March 7, 2013
Wingate by Wyndam Hotel
Atlanta, GA 30312

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
March 13-17, 2013 Classroom
March 18-April 26, 2013 Hands on Clinical Portion

Palmetto Medical Dental and Pharmaceutical Association
Overview of the Management of Office Emergencies with Emphasis on the Office/Physical Plant, the Equipment, the Doctor, the Ancillaries and Administrative Personal
Review of the Action Plan for Management of Office Emergencies
April 21, 2013
Marriott Hotel and Spa
Myrtle Beach, SC

Graduate Prosthetic Residency Program
Advanced Preprosthetic Surgery and Soft Tissue Management
GRU College of Dental Medicine
April 25, 2013

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 14-19, 2013 Classroom
May 20-June 28, 2013 Hands on Clinical Portion

Mongalo Live Implant Course
Overview of Antral Augmentation
Review of the Anatomy
Surgical Techniques Overview
Management of Complications
June 1-8, 2013
Bahia Principe Resort
Dominican Republic

GHSU CE Course: Management of Emergencies in the Dental Office
Why is a strategy for managing office emergencies important?
Misconceptions in the management of office emergencies
Management of common emergency scenarios
August 9-10, 2013
GHSU Allied Health Auditorium
Augusta, GA

AO Operating Room Personnel Course
Fundamentals of Orthognathic Surgery
September 7, 2013
Sheraton River Walk Hotel
Tampa, Florida

Hiossen Dental Implant Course
Surgical Anatomy for the Implant Dentist
Radiology for the Implant Dentist
Overview of Sutures and Suturing Techniques
Surgical Principles
Complications with Placing Implants
September 21, 2013
Comfort Suites Perimeter
Atlanta, GA 30312

Augusta Dental Society
Key Components in the Management of Office Emergencies
September 10, 2013
West Lake Country Club
Augusta, GA 30907

Hiossen Dental Implant Course
Live Hands on Training
Review of Surgical Technique
Patient Selection
September 28, 2013
Dr. Lattiere Private Office
Atlanta, GA 30312

GHSU CE Course: Management of Emergencies in the Dental Office
Why a Strategy for Managing Office Emergencies Important
Misconceptions in the Management of Office Emergencies
Management of Common Emergency Scenarios
Hands on Simulation Training
October 4-5, 2013
GHSU Allied Health Auditorium
Augusta, GA

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 16-20, 2013 Classroom
October 21-December 4, 2013 Hands on Clinical Portion

US Army DENTAC Fort Jackson
1 Year AEGD Program
Principles of Exodontia
Complicated Exodontia
Complications of Dentoalveolar Surgery
Preprosthetic Surgery
Odontogenic Infection Overview: Pathophysiology, Microbiology, Anatomic
Considerations, Diagnosis, Medical and Surgical Management
November 21-22, 2013
USADENTAC Fort Jackson, SC

Georgia Department of Corrections Dental Annual Meeting
Complicated Exodontia and Associated Complications of Dentoalveolar Surgery
December 19, 2013

Forsyth, GA

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses

GHSU CODM

Augusta, GA

January 15-19, 2014 Classroom

Jan 20-February 28, 2014 Hands on Clinical Portion

Georgia AGD Annual Meeting

Oral Surgery for the General Dentist

Suturing Techniques/Hands on Pig Lab

January 24-25, 2014

Marriott Century Center

Atlanta, GA 30345

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses

GHSU CODM

Augusta, GA

March 12-16, 2014 Classroom

March 17-May 2, 2014 Hands on Clinical Portion

MCG/AAID Dental Implant Course

Dental Implants and Infection

Healing of Dental Implants

Key Focus Points in the management of office Emergencies: The Doctor, the
Ancillaries, and the Physical Plant/Equipment and Drugs

March 13, 2014

Wingate by Wyndam Hotel

Atlanta, GA 30312

Graduate Prosthetic Residency Program

Management of Office Emergencies:

The Office, the Equipment, The Doctor and Ancillaries

GRU College of Dental Medicine

March 20, 2014

Mongalo Live Implant Training Course

Overview of Antral Augmentation

Surgical Anatomy for the Implant Dentist

Surgical Techniques Overview
Management of Complications
March 22-29, 2014
Los Mariner Resort and Spa
Dominican Republic

Gwinnett Medical Center's Facial Trauma and Reconstruction Conference
Naso-Orbital-Ethmoid (NOE) Fractures
Contemporary approaches to treatment of NOE fractures
A sequential operative treatment plan to address such injuries
Management and complications of these NOE Fractures
May 3, 2014
Gwinnett Medical Center
Gwinnett, Georgia

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 14-18, 2014 Classroom
May 19-June 27, 2014 Hands on Clinical Portion

Medical Emergencies in the Dental Office CE Course
Preparation for Emergencies: Review of the Office Physical Plant, Emergency Equipment, the Doctor, Ancillaries, and Staff
Preparation for Emergencies: Principles for Prevention, Aids to Recognition, and a Plan for Response
Patient Assessment and Special Populations: The Geriatric Patient; The Obese Patient; and The Pregnant Patient
Review and Management of Common Office Emergencies
June 20-22, 2014
Marina Inn at Grand Dunes
Myrtle beach, South Carolina

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
August 13-17, 2014 Classroom
August 18-September 26, 2014 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 15-19, 2014 Classroom
October 20-December 6, 2014 Hands on Clinical Portion

Mongalo Live Implant Training Course
Surgical Anatomy for the Implant Dentist
Basic Implant Surgical technique
Principles of Flap Design
Review of Suturing Techniques
Management of Complications
November 10, 2014
Los Mariner Resort and Spa
Dominican Republic

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
January 14-18, 2015 Classroom
January 19-March 5, 2015 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
March 11-16, 2015 Classroom
March 17-May 2, 2015 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 13-17, 2015 Classroom
May 18-July 1, 2015 Hands on Clinical Portion

GRU/AAID Maxi-Course.

Medical Evaluation for Dentoalveolar/Implant Surgery

Medical Emergencies and the Surgery Patient

Physiology of Inflammation, Wound Healing/Infection

Review of Osseointegration and What Effects it has During Healing Phase

May 14, 2015

GRU Alumni Center

Augusta, Georgia

GRU General Dentistry Symposium

Office Emergencies: Are You Ready?

Pharmacology of Basic Emergency Medications

Complex Exodontia for the General Practitioner

Pre-prosthetic Surgery for the General Practitioner

July 3-5, 2015

King and Prince Beach Resort

St. Simons Island, GA 31522

Oral Surgery Hands On Surgical Course

Complicated Exodontia

Principles of Flap Design

Review of Suturing Techniques

August 8, 2015

Biohorizons Implant Corporate Center

Birmingham. Alabama

GRU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

August 12-16, 2015 Classroom

August 17-October 2, 2015 Hands on Clinical Portion

Mongalo Oral Surgery Hands on Course

Complicated Exodontia

Overview of Preprosthetic Surgery

Principles of Flap Design

Review of Suturing Techniques

Complications of Dentoalveolar Surgery

August 22, 2015
Guadalajara, Mexico
Affordable Dentures and Implant Leadership Conference
Medical Emergencies in the Dental Practice:
Preparation of the Office for Medical Emergencies
Common Misconceptions in the Management of Office Emergencies
Pharmacology of Basic Emergency Medications

October 1, 2015
Hyatt Regency Resort and SPA
Scottsdale, Arizona

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 14-18, 2015 Classroom
October 19-December 5, 2015 Hands on Clinical Portion

Mongalo Third Molar Surgery Course
Complicated Exodontia
Overview of Preprosthetic Surgery
Principles of Flap Design
Review of Suturing Techniques
Techniques for Removal of Impacted Third Molars
October 22, 2015
Guadalajara, Mexico

Affordable Leadership Conference
A comprehensive review of Pre-prosthetic Surgery for the General Dentist
November 20, 2015
Airport Marriott
Atlanta, Georgia

Mongalo Live Implant Training Course
Surgical Anatomy for the Implant Dentist
Basic Implant Surgical technique
Principles of Flap Design
Review of Suturing Techniques
February 7, 2016
Guadalajara, Mexico

Academy of General Dentistry Master Track Symposium
Medical Evaluation of the Dentoalveolar Surgery Patient
Complex Exodontia for the General Dentist
Principles of Mucogingival Flap Design, Reflection, and Mobilization
Basic Suturing principles, Techniques, and Armamentarium
Review of Preprosthetic Surgery for the Dental Practitioner
Principles in the Management of the Impacted Third Molar for the General Dentist
Complications of Dentoalveolar Surgery
Odontogenic Infections Part 1:
 Host Defenses: Local, Cellular and Humoral
 Pathophysiology
 Microbiology
 Anatomic considerations
Odontogenic Infections Part 2:
 Radiologic Evaluation
 Diagnosis
 Management principles
 Principles of Treatment
Alveolar Ridge management: Socket Grafting
Misconceptions in the Management of Dental Office Medical Emergencies
Key Focus Points in the Management of Medical Emergencies
Evaluation of the Office, Equipment and Personnel for Medical Emergencies
Airway Management and Resuscitation for the Dental Practitioner
Prevention, Recognition, and Development of a Basic Action Plan
Management of Common Office Emergencies
Soft Tissue Biopsy Principles and Techniques for the General Dentist
May 6-7, 2016
Atlanta, GA

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
May 11-15, 2016 Classroom
May 16-July 1, 2016 Hands on Clinical Portion

Live Implant Training

Anatomic Considerations for the Maxilla and Mandible for the Implant Dentist:

“Identification of Anatomic Potholes “

Complex Exodontia

Principles for Mucogingival Flap Design Development and Mobilization

Suturing Principles and Armamentarium

Control of Hemorrhage and Hemostatic Agents for the Implant Dentist

Patient Evaluation

June 4-11, 2016

Guadalajara, Mexico

HIOSEN Implant Course

Anatomic Considerations for the Maxilla and Mandible for the Implant Dentist:

“Identification of Anatomic Potholes “Complex Exodontia

Principles for Mucogingival Flap Design Development and Mobilization

Suturing Principles and Armamentarium

Anatomic Considerations of the Maxillary Sinus, and Commonly Encountered Complications

Antral Augmentation using the Caldwell Luc Lateral Window Approach

Antral Augmentation using the Intracrestal approach

Antral Augmentation using the Lateral Window Kit

June 24-25, 2016

Atlanta, Georgia

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

August 11-14, 2016 Classroom

August 15- September 19, 2016

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

October 12-16, 2016 Classroom

October 17-December 5, 2016 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Principles Complex Exodontia Part I

Medicolegal Considerations

OMFS 5003

AU Educational Commons 1110

January 10, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

January 11-15, 2017 Classroom

January 15-February 27, 2017 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Principles of Complex Exodontia Part II

Principles of Tissue Re-approximation and Suturing

OMFS 5003

AU Educational Commons 1110

January 17, 2017

Factors Critical for Managing Office Medical Emergencies

Pharmacology of Emergency Medications

Georgia Academy of General Dentistry

Atlanta Century City Marriott Hotel

January 26-28, 2017

Advanced Oral and Maxillofacial Surgery

Microbiological and Anatomic Considerations of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 24, 2017

Anatomic Considerations for Maxillary and Mandibular Local Anesthesia

DANA 5002

CL 1103

January 30, 2017

Advanced Oral and Maxillofacial Surgery

Principles in the Diagnosis and Clinical Management of Odontogenic Infection

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 31, 2017

Advanced Oral and Maxillofacial Surgery

Oral Biopsy Principles and Techniques

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 7, 2017

Advanced Oral and Maxillofacial Surgery

Management of Odontogenic Cysts and Tumors

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 14, 2017

Advanced Oral and Maxillofacial Surgery

Anatomic and Clinical Consideration of the Maxillary Sinus

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 21, 2017

Indications for Orthognathic Surgery

Review of Commonly Used Orthognathic Surgery Osteotomies

Common Complications of Orthognathic Surgery

Georgia School of Orthodontics

Atlanta, Georgia

February 24, 2017

Advanced Oral and Maxillofacial Surgery

Salivary Gland Disorders

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 7, 2017

Orthodontic Lecture Series

Review of Head and Neck Anatomy for the Orthodontic Resident

Orthodontic Conference Room DCG

March 13, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Dentoalveolar and Soft Tissue Trauma

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 14, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

March 15-19, 2017 Classroom

March 20-May 5, 2017 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Management of Facial Bone Fractures

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 21, 2017

Advanced Oral and Maxillofacial Surgery

Correction of Dentoskeletal Deformities

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 28, 2017

Maxillary Sinus Grafting: Review of Common Techniques

Implant 5001

AU Educational Commons 1110

April 10, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Temporomandibular Disorders

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 11, 2017

Grad Pros Lecture Series

Suturing Principles and Techniques

Hands on Techniques Course

Grad pros Conference room

April 17, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Cleft Lip and Palate

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 18, 2017

Advanced Oral and Maxillofacial Surgery

Principles of Maxillofacial Reconstruction

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 25, 2017

Review of Head and Neck Anatomy for the Orthodontic Resident

Management of Office Medical Emergencies

Georgia School of Orthodontics

Atlanta, Georgia

April 28, 2017

Full Thickness Mucoperiosteal Flap Design and Execution

Graduate Prosthodontics

Grad Pros Conference Room DCG

May 8, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

May 17-21, 2017 Classroom

May 22-June 30, 2017 Hands on Clinical Portion

Oral Surgery for the General Dentist:

Patient Assessment

Complex Exodontia

Preprosthetic Surgery

Complications of Dentoalveolar Surgery

AGD Annual Meeting

Caesars Palace, Las Vegas
July 13-16, 2017

DCG Implant Symposia (CLCR 8014 Implant Dentistry Course)

Implant Informed Consent

Implant Risk Assessment and Management

Educational Commons

July 19, 2017

Brighter Way Dental Institute

Live Surgery Course Teaching Faculty

Phoenix, Arizona

August 2-5, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

August 16-20, 2017

August 21-September 5, 2017 Hands on Clinical Portion

Factors Critical For Managing Dental Office Medical Emergencies

Indications and Pharmacology of Emergency Medications

South Carolina Central District Dental Society meeting

Columbia, South Carolina

September 8, 2017

Overview of Preprosthetic Surgery

Pros 5001

AU DCG Simulation Lab

September 25, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

October 11-15, 2017 Classroom

October 16-November 30, 2017 Hands on Clinical Portion

Fundamentals in History Taking and Patient Assessment

SNDA Group Presentation
AU Educational Commons
October 24, 2017

Principles of Preprosthetic Surgery

Affordable Dentures and Implants
Airport Marriott Hotel
Atlanta, Georgia
November 3, 2017

Brighter Way Dental Institute

Live Surgery Course Teaching Faculty
Phoenix, Arizona
December 6-9, 2017

Principles Complex Exodontia Part I

Medicolegal Considerations
Advanced Oral and Maxillofacial Surgery
OMFS 5003
AU Educational Commons 1110
January 9, 2018

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
January 10-14, 2018 Classroom sessions
January 15-March 2, 2018

Principles of Complex Exodontia Part II

Principles of Tissue Re-approximation and Suturing
Advanced Oral and Maxillofacial Surgery
OMFS 5003
AU Educational Commons 1110
January 16, 2018

Microbiological and Anatomic Considerations of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series
AU Educational Commons 1110
January 23, 2018

Principles in the Diagnosis and Clinical Management of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 30, 2018

Oral Biopsy Principles and Techniques

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 6, 2018

Management of Odontogenic Cysts and Tumors

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 13, 2018

Complications of Dentoalveolar Surgery

TXPL 5002 Course

AU Educational Commons 1120

February 19, 2018

Anatomic and Clinical Consideration of the Maxillary Sinus

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 20, 2018

Salivary Gland Disorders

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 6, 2018

Overview of Dentoalveolar and Soft Tissue Trauma

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 13, 2018

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
March 14-18, 2018 Classroom Sessions
March 19-May 4, 2018

Management of Facial Bone Fractures

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
March 20, 2018

Correction of Dentoskeletal Deformities

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
March 27, 2018

Overview of Temporomandibular Disorders

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 10, 2018

Overview of Cleft Lip and Palate

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 18, 2018

Principles of Maxillofacial Reconstruction

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 25, 2018

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and

Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

May 16-20, 2018 Classroom Sessions

May 21-June 22, 2018 hands on Clinical

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

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Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

Aug 14-18, 2018 Classroom Sessions

Aug 19-Sept 27, 2018 hands on Clinical

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

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Augusta University Dental College of Georgia

Augusta, GA

Oct 16-20, 2018 Classroom Sessions

Oct 21-NOV 22, 2018 hands on Clinical

OMFS 5003 Advanced Oral Surgery Lecture Series

Patient Assessment

AU Education Commons1120

January 8, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Complex Exodontia Pt 1

AU Education Commons1120

January 15. 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Complex Exodontia Pt 2

AU Education Commons1120

January 22. 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Odontogenic Infection Pt 1

AU Education Commons1120

January 29. 2019

Implant Pathways Symposium

Complex Exodontia, Mucoperiosteal Flap Management, and Alveoloplasty for
Implant Placement

Patient Assessment

Factors critical to managing Office Emergencies

Review of the Indication and Pharmacology of Basic Emergency Drugs

Management of Frequently Occurring Office Medical Emergencies

Phoenix Downtown Renaissance Hotel

Phoenix, Arizona

Jan 31-Feb 3, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Odontogenic Infection Pt 2

AU Education Commons1120

February 5, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Maxillary Sinus Overview

AU Education Commons1120

February 19, 2019 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Biopsy Principles and Indications

AU Education Commons 1120

March 12, 2019. 2019

Intravenous Conscious Sedation Course

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Review of sedation principles and pearls
Augusta University Dental College of Georgia
Augusta, GA
Mar 13-17, 2019 Classroom Sessions
Mar 18-April 26, 2019 Hands on Clinical

OMFS 5003 Advanced Oral Surgery Lecture Series

Correction of Dentoskeletal Deformities
AU Education Commons1120
March 28, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Cleft Lip and Palate
AU Education Commons1120
April 18, 2019 2019

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Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

May15-19, 2019 Classroom Sessions

May 20-Jun 21, 2019 Hands on Clinical

Emergency Preparedness Lecture Series

Patient Assessment

Prevention, Recognition, Management and the Basic Action Plan

Factors Critical for management of Dental Office Emergencies

Airway Management and Resuscitation

Review of Emergency Medications

DCG Emergency Protocols

DCG

July 10, 2019

CLCR 8014 Implant Dentistry Course

Sinus Augmentation Techniques

Implant Informed Consent and Risk management

AU DCG

July 15,2019

Kiawah Island CE

Patient Assessment

Prevention, Recognition, Management and the Basic Action Plan

Review of Emergency Drugs for the Dental Practitioner

Management of Frequently Occurring Dental Office Emergencies

Complex Exodontia, Mucogingival Flaps and Alveoloplasty

Kiawah Island, SC

July 18-19,2019

Department of Periodontology Lecture Series

Review of Emergency Drugs and the Emergency Crash Cart

Hands on Demonstration

DCG Department of Periodontology

August 2, 2019

Intravenous Conscious Sedation Course

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Review of sedation principles and pearls

Augusta University Dental College of Georgia
Augusta, GA
August 14-18, 2019

Grad Pros Lecture Series

Interactive review of 13 Common Office Emergency Scenarios
Review of the Pathophysiology of the 13 Common Office Emergencies
Grad Pros Department
September 23, 2019

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation
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Review of sedation principles and pearls
Augusta University Dental College of Georgia
Augusta, GA
October 9-13, 2019

Grad Pros Lecture Series

Factors Critical for Managing Dental Office Emergencies
Prevention, Recognition, and Implementation of the Basic Action Plan
Grad Pros Department
October 14, 2019

Otolaryngology Lecture Series

Anatomic Basis for Local Anesthesia of the Fifth Cranial Nerve
AU Department of Otolaryngology
October 28, 2019

Last Chance CE

Oral Surgery for the General Practitioner
Complicated Exodontia, Flaps, Alveoloplasty and complications
Factors critical to managing office emergencies
Prevention recognition and management of office emergencies
Augusta University Dental College of Georgia
Augusta, GA
December 6, 2019

DCG Faculty Retreat

Cardiovascular Health Issues, Dental Management and Emergency Protocols
Augusta University Dental College of Georgia
Augusta, GA
December 18, 2019

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation
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Augusta University Dental College of Georgia

Augusta, GA

January 15-19, 2020

Intravenous Conscious Sedation Course

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Augusta University Dental College of Georgia
Augusta, GA
March 13-17, 2019

WEBINARS

Affordable Care Affiliated Dentists

Webinar on Oral Surgery for the General Dentist Part I
April 30, 2015

Affordable Care Affiliated Dentists
Webinar on Oral Surgery for the General Dentist Part II
May 7, 2015



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.

If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Modular Series in Moderate Sedation
Course Sponsor: Miami Valley Hospital Dept of Medical Education
Name of person submitting information: Daniel Becker, DDS
Email address: debecker@premierhealth.com Phone: 937 367 3653
Title: Series Director Date: 4/2/22

Course Director:
Name: Daniel Becker, DDS License Number and State: Ohio 14045
Email: debecker@premierhealth.com Phone: 937 367 3653

Name of the facility where the course is presented: Miami Valley Hospital
Location: 1 Wyoming St Dayton Oh 45409

Course is presented at a: ☐ Dental Office ☐ Dental School ☐ Surgical Center
☒ Hospital ☐ Other: _____

Is the Course Sponsor AGD PACE or ADA CERP approved? ☐ Yes ☒ No

AGD PACE Provider Number: _____

ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: Daniel Date: _____
 Printed Name: Daniel Becker, DDS Becker,
 DDS

Digitally signed by Daniel
 Becker, DDS Date: _____
 DN: cn=Daniel Becker, DDS,
 o=Miami Valley Hospital,
 ou=Medical Education,
 email=debecker@premiereh
 ealth.com, c=US
 Date: 2022.04.02 07:01:50
 -04'00'

For Office Use Only:

Version 22.0310

"Medical Emergencies, Local Anesthesia and Moderate Sedation in Dental Practice"

Presented by the Miami Valley Hospital Department of Medical Education

Important Notice Regarding State Dental Board Approvals !!!

The completion of this entire series fulfills the Ohio State Dental Board Requirements for training in Intravenous Sedation. Dentists from other states should confirm the course approval with their state dental board. [You may need to provide them a copy of this syllabus.]

Note to State Dental Boards: See final page for description of clinical IV experiences in Module 5.

This document details a series of courses (modules) that address management of office medical emergencies, Advanced Cardiac Life Support (ACLS), and moderate (conscious) sedation in dental practice. The complete series fulfills the "2016 Guidelines for Teaching Pain and Anxiety Control" as adopted by the American Dental Association and the American Dental Society of Anesthesiology. Courses in this series include:

- | | |
|-------------------------|--|
| <u>Session 1</u> | ◆ Module 1 - Medical Emergencies in Dental Practice (8 hr) |
| | ◆ Module 2 – Local Anesthetics and PO/Nitrous Oxide Sedation (16 hr) |
| ----- | |
| <u>Session 2</u> | ◆ Module 3 - Patient Monitoring: Physiological and Technical Considerations (8 hr) |
| | ◆ Module 4 - Advanced Cardiac Life Support (16 hr) |
| ----- | |
| <u>Session 3</u> | ◆ Module 5 - Intravenous Moderate (Conscious) Sedation (48 hr) |
| | 20 hr didactic / 28 hr clinical |
| ----- | |

The entire 5-module sequence is required for those wishing to train in intravenous moderate sedation and participants must score a minimum of 80% on each module's posttest to continue in the series. Questions are based on objectives listed on the first page of workbooks provided for each module and are thoroughly addressed in the prerequisite reading, pretests, and seminar lectures.

Modules 1 thru 4 can be taken individually as independent seminars if topics are of interest to dentists who do not wish to pursue training in IV Moderate Sedation.

The following pages contain detailed syllabi for each module. Direct any inquiries to the course director.

Daniel E. Becker, DDS
Dept of Medical Education
Miami Valley Hospital
1 Wyoming Street
Dayton, OH 45409

Telephone: 937/208-2144

E-Mail: debecker@premierhealth.com

Medical Emergencies in Dental Practice

Description:

A one-day (8 hours) lecture/participation seminar covering principles required for the recognition and treatment of medical urgencies and emergencies in the dental office. Dentists are encouraged to attend with at least one office auxiliary. Current American Heart Association certification in BLS for healthcare providers is strongly encouraged as a prerequisite to this seminar. Prerequisite reading and pretest will be mailed upon receipt of registration. Laboratory session includes managing simulated emergencies on human patient simulators (SimMan).

Objectives:

1. Discuss strategies for prevention of medical emergencies including appropriate patient evaluation and office/staff preparedness.
2. Demonstrate proper use of equipment and devices for respiratory and cardiovascular support and explain components of a complete primary assessment.
3. Explain the actions, effects, indications, and doses for useful emergency drugs and demonstrate their preparation and administration.
4. Describe the pathogenesis and appropriate protocols for managing medical complications that may present during dental treatment.

Prerequisite Reading: (Included in Course Workbook)

1. Becker DE, Rosenberg MB, Phero JC. Essentials of Airway management, oxygenation and ventilation Part 1: Basic equipment and devices. Anesth Prog. 2014;61(2):78-83.
2. Becker DE. Emergency Drug Kits: Pharmacological and Technical Considerations. Anesth Prog. 2014;61(4):171-79.
3. Becker DE. Management of Medical Urgencies and Emergencies (Topic Monograph)

Method of Evaluation:

1. Written posttest covering prerequisite reading and lectured material.
2. Laboratory checkoffs on airway management, vital signs, drug preparation and IM administration.

Laboratory Activities

Oxygenation/Ventilation/CPR	Drug Preparation
Turn on O ₂ Tank / Operate Flow Meter	Demonstrate EpiPen
Remove regulator and reattach	Prepare syringes from Amps, SDV & MDV
Place Nasal Cannula on Partner	
1 person BVM ventilations: (Apnea with pulse)	IM Injections
2-person BVM ventilations: (Apnea with pulse)	Needle gauges and lengths
2-Person CPR with BVM (May use 2-person BVM)	Prepare syringe (sterile normal saline)
Emergency Simulations (SimMan)	Perform IM deltoid on partner
Team Performance of Primary Assessment	Select & Prepare Site
Manage Selected Emergencies	Z-Track Administration

Oral and Nitrous Oxide Sedation

Description:

A two-day presentation of essential information required for the safe and effective use of nitrous oxide and sedative/anxiolytics administered PO for management of the anxious dental patient. Local anesthesia is reviewed and emphasized as the foundation upon which all minimal and moderate sedation regimens are employed. Prerequisite reading and pretest are mailed upon receipt of registration.

Module 1 Medical Emergencies is encouraged as pre-requisite for this seminar.

Objectives:

1. Define various terms related to pain & anxiety and distinguish dated Guedel stages of general anesthesia with the more contemporary concept of anesthetic components.
2. Characterize 5 levels of procedural sedation identifying clinical features that distinguish minimal, moderate, and deep sedation.
3. Contrast respiratory and cardiovascular changes that accompany the various sedation levels and general anesthesia.
4. Describe fundamental principles of pharmacodynamics and pharmacokinetics that provide the basis for the safe and effective use of procedural sedation.
5. Explain the mechanism of action for benzodiazepines and the principal pharmacokinetic parameters by which they are compared.
6. Describe the actions and effects of antihistamines, opioids, and alpha-2 agonists, noting their advantages and disadvantages for augmenting sedation by benzodiazepines alone.
7. Explain the mechanism of action for local anesthetics including their chemical properties that determine onset and duration.
8. Discuss potential adverse effects of local anesthetics and their maximum dosages, including calculations for each component found in various conventional formulations.
9. Describe essential pharmacological properties of vasopressors including their dosages, cardiovascular influences, and potential drug interactions.
10. Define MAC, including contemporary variations, and explain how it is altered by other drugs and patient variables.
11. Explain the pharmacokinetic principles of inhalation anesthetics that determine onset and elimination.
12. Compare the respiratory and cardiovascular effects of inhalation anesthetics and address putative side effects unique to nitrous oxide.
13. Distinguish the analgesic and anesthetic actions of nitrous oxide and discuss any contraindications for its use.
14. Describe the components, functions, and appropriate use of nitrous oxide/oxygen delivery systems, including methods to minimize exposure.
15. Describe appropriate monitoring for patients receiving nitrous oxide and/or enteral sedation.
16. Discuss relative contraindications and management of complications associated with nitrous oxide and/or enteral sedation, including the pharmacology and appropriate use of flumazenil for benzodiazepine reversal.
17. Describe appropriate regimens for enteral sedation, addressing special considerations for geriatric, obese and pediatric populations, and explain the potential hazards of combination regimens administered by PO, submucosal or IM routes.
18. Describe appropriate medical evaluation, patient instructions, records and discharge criteria when providing minimum and moderate sedation.

Prerequisite Reading: (Topic Monographs Provided in Course Workbook)

1. Becker DE. The Pharmacological Basis of Sedation.
2. Becker DE. Benzodiazepines and Adjunctive Drugs.
3. Becker DE. Local anesthetics.
4. Becker DE. Nitrous oxide and the Inhalation Anesthetics.
5. Becker DE, Shufflebarger S. Patient Assessment, Monitoring and Managing Complications.

Method of Evaluation:

1. Written posttest covering prerequisite reading and lectured material.
2. Laboratory and clinical check-off for airway management, monitoring, and management of simulated complications.

Laboratory Activities

Ventilation / Airway Adjuncts	Emergency Simulations (SimMan)
1 & 2 person BVM ventilation	Team Performance of Primary Assessment
Oropharyngeal Airways: Size, Insertion & BVM	Supplemental Oxygenation or Ventilations
i-gel Supraglottic Airways: Size, Insertion & BVM	Recognize and Manage Complications

Physiological and Technical Aspects of Patient Monitoring

Description:

A one-day (8 hour) lecture/laboratory seminar covering the general principles of autonomic, respiratory, and cardiovascular physiology essential to properly monitor and assess the sedated patient. Requisite methods of patient monitoring are presented, including practical experiences in their use. This course is one in a series of courses designed for training in intravenous moderate sedation. However, it is also useful as preparation for training in Advanced Cardiac Life Support or as general review for those already trained in sedation and anesthesia. Prerequisite reading and pretest are mailed upon receipt of registration.

Objectives:

1. Explain the rationale for patient monitoring and distinguish the ADA Guidelines for monitoring patients receiving moderate sedation from those receiving deep sedation and general anesthesia.
2. Describe the autonomic control of vital organ systems.
3. Explain general principles of synaptic transmission, including synthesis and termination of cholinergic and adrenergic neurotransmitters.
4. Describe the actions, effects, and indications for prototypic drugs that mimic and inhibit autonomic control.
5. Explain basic principles of ventilation, perfusion, and gas transport, including the oxygen-hemoglobin dissociation curve and information provided by arterial blood gases.
6. Define selected respiratory volumes and capacities, explaining the relationship of apneic oxygenation and functional residual capacity (FRC).
7. Distinguish obstruction from respiratory depression and explain hypercapnic and hypoxemic mechanisms that control ventilation and the way selected drug classes depress respiration.
8. Describe methods for monitoring respiratory function including the physiologic principles of pulse oximetry and capnography.
9. Describe the cardiac cycle in terms of pressure gradients and ventricular volumes and distinguish stroke volume from ejection fraction.
10. Explain the influences of preload, contractility and afterload on stroke volume and subsequent arterial pressure.
11. Explain principles of coronary perfusion and factors that determine myocardial oxygen consumption.
12. Explain the factors that sustain arterial blood pressure, distinguishing those that determine systolic and diastolic pressures.
13. Describe and demonstrate available systems for monitoring cardiovascular function, including technical aspects of electrocardiography.
14. State the intrinsic rates for the cardiac neural conduction system and explain how these are influenced by the autonomic nervous system.
15. Correlate the components of an electrocardiogram with the physiologic events in a cardiac cycle.
16. Interpret common atrial and ventricular dysrhythmias from single-lead ECG tracings

Prerequisite Reading: (Provided in Course Workbook)

1. Becker DE. Basic and clinical pharmacology of autonomic drugs. *Anesth Prog*. 2012;59(4):159-68.
2. Becker DE. Patient Monitoring (Topic Monograph)
3. Becker DE. Fundamentals of ECG interpretation. *Anesth Prog* 2006;53(2):53-64

Method of Evaluation:

1. Written post-test covering prerequisite reading and lectured information.

Laboratory Activities: Interpret dynamic monitoring of patients experiencing various complications: ECG, BP, SpO₂ and etCO₂

Advanced Cardiac Life Support

Description:

This course is a standard AHA Advanced Cardiac Life Support provider course, with emphasis on the dental office setting. (Two days -16 hours) Participants in the complete IV sedation series must complete this particular course. Certification from other ACLS courses is not accepted.

PREREQUISITE: Current BLS certification at Healthcare Provider Level is an ABSOLUTE requirement!! Participants attending their initial ACLS course are encouraged to attend Module 3 – Physiological and Technical aspects of Patient Monitoring.

CONTENT: Standard content of American Heart Association's curriculum with added applications and emphasis for the dental office setting; including anaphylaxis, asthma attack and hypertensive crisis. ALL laboratory sessions include recognition and management of complications on human patient simulators, "**SimMan.**" Cardiac arrest scenarios are managed using an AED rather than conventional defibrillators.

EXAMINATION: Standard written exam required by the American Heart Association for successful completion PLUS 20 Strip ECG Tracing ID and lab checkoffs on following table:

Activity	Grade (S or U)	
	1 st Attempt	2 nd Attempt
BLS (On Recorder Manikins):		
BVM ventilations: (Apnea with pulse) Q 6sec		
2-Person CPR: 30:2		
Airway Adjuncts (On Intubation Manikins):		
Pre-oxygenate with BVM		
Select and Insert Oral Airway		
LMA Inserted Correctly and Connected to BVM		
Confirmation of Placement		
Ventilations: (Apnea with pulse) Q 6 sec		
2-Person BLS: (Q 6 sec/ compressions uninterrupted)		
Mega Code Team Leader (On SimMan):		
Manage selected medical emergency		
Manage cardiac arrest		

Intravenous Moderate Sedation

Description:

A six-day lecture, laboratory and clinical presentation addressing the safe and effective use of intravenous sedation in dental practice. **The sequential completion of Module 1 (Medical Emergencies), Module 2 (PO & N₂O Sedation), Module 3 (Patient Monitoring) and Module 4 (ACLS provider course) are an absolute prerequisite** for participation in this final module of the complete series in IV moderate sedation. In addition, each participant must arrange for **8 hours of clinical experience** during which he or she manages and supports the airway of unconscious patients. This can occur in a hospital operating room or office of an oral surgeon or dentist anesthesiologist approved by the course director. Prerequisite reading and pretest are included in a workbook provided to each registrant.

Objectives:

1. Compare and contrast the principal pharmacokinetic processes as they pertain to drugs administered PO, IM and IV.
2. Describe basic principles of pharmacodynamics and distinguish peripheral and central actions and effects mediated at various receptors.
3. Compare diazepam and midazolam in terms of their pharmacokinetics, pharmacodynamics and dosage increments for IV sedation.
4. Compare diphenhydramine and promethazine in terms of their pharmacokinetics, pharmacodynamics and dosage increments for IV sedation.
5. Compare meperidine, fentanyl and nalbuphine in terms of their pharmacokinetics, pharmacodynamics and dosage increments for IV sedation.
6. Describe and demonstrate technical aspects of intravenous drug administration.
7. Explain and demonstrate appropriate patient assessment, education, monitoring, and sedation records, including appropriate discharge criteria.
8. Describe the recognition and treatment of local and systemic complications that can be associated with intravenous sedation. Include essential pharmacological features of any drugs indicated.
9. Describe essential aspects for medical evaluation of a patient for intravenous moderate sedation.
10. Demonstrate competent intravenous sedation technique including proper airway management, monitoring, drug titration, and time-oriented records.

Prerequisite Reading: (Provided in Course Workbook)

1. Becker DE. Intravenous Sedation: Technical considerations, patient management and nuisance complications. (Topic Monograph)
2. Becker DE. Pharmacokinetic Considerations for Moderate and Deep Sedation. *Anesth Prog* 2011; 58(4):166-173
3. Becker DE. Pharmacodynamic Considerations for Moderate and Deep Sedation. *Anesth Prog* 2012; 59(1):28-42
4. Becker DE. Haas DA. Recognition and management of complications during moderate and deep sedation. Part 1: Respiratory Considerations. *Anesth Prog* 2011; 58(2):82-92
5. Becker DE. Haas DA. Recognition and management of complications during moderate and deep sedation. Part 2: Cardiovascular Considerations. *Anesth Prog* 2011; 58(3):126-138.
6. Becker DE. Medical Evaluation. (Topic Monograph)

Method of Evaluation:

1. Written post-tests that are comprehensive over all prerequisite reading and lectured materials:
Exam 1 covers modules 1-3 and Exam 2 covers modules 1-5 (excluding ACLS).
2. Emergency simulation practical exam on human patient simulator (SimMan)
3. Clinical exam (mock IV sedation on partner using placebo)
4. Competence during IV sedation of clinic patients.
5. Satisfactory completion of 8-hour practicum managing airway of patient under deep sedation and/or general anesthesia.

Note to State Dental Boards: Clinical Experiences in IV Sedation:

Each doctor personally monitors and administers intravenous sedation to 20 patients while being provided dental treatment by staff dentists.

Daniel E Becker, DDS

Associate Director of Education Miami Valley Hospital



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Dayton, Ohio 45459
debecker@premierhealth.com
igybeck@earthlink.net

Education	<ul style="list-style-type: none"> • 1964 – 1968 Ohio University Athens, Ohio. BS Zoology • 1968 – 1972 Ohio State University Columbus, Ohio. DDS
Professional Experience	<ul style="list-style-type: none"> • 1972 – 1980 Private Practice Waynesville, Ohio • 1980 - Present IV Sedation Services for Dental Offices
Current Positions	<ul style="list-style-type: none"> • Associate Director of Education General Dental Practice Residency Miami Valley Hospital Dayton, OH • ACLS Instructor American Heart Association • Pharmacy and Therapeutics Committee and Sedation Committee Miami Valley Hospital
Previous Positions	<ul style="list-style-type: none"> • Professor, Life & Health Sciences Sinclair Community College Dayton, OH (1976-2009) • Chairman, Human Patient Simulation Training Subcommittee American Dental Society of Anesthesiology (2005-2013) • Associate Editor, Anesthesia Progress (Journal of American Dental Society of Anesthesiology) (2006-2014) • Chief, Dept. Oral and Dental Surgery (1980-1984) • Medical Staff Credentials Committee (1984-1985) • Infection Control Committee (1988-1990) Miami Valley Hospital • Board of Directors Dayton Dental Society 1984-1986 • Editor "Dayton Dentistry" 1985-1988 • President, Ohio Dental Society of Anesthesiology (1993-95) • Chairman, CE Curriculum Subcommittee American Dental Society of Anesthesiology (1993-1996)

Biographical Sketch:

Dr. Becker received a BS in Zoology at Ohio University in 1968 and his DDS from Ohio State University in 1972. He was a professor in Life & Health Sciences Sinclair Community College (1976-2009) and Associate Director of Education for the General Practice Dental Residency at Miami Valley Hospital in Dayton, Ohio until he retired in 2019. He has published numerous articles in scientific journals and textbooks, and lectures extensively for dental organizations, colleges and universities on topics related to pharmacology, sedation and anesthesia, medical assessment and medical emergencies. Dr Becker is noted for his pragmatism and ability to convert otherwise "dry" material into formats that are both entertaining and informative.

Publications

- Becker DE. Pharmacology for the Health Professional. Norwalk Ct: Appleton-Century-Crofts; 1985
- Becker DE. Life support training in hospital dental residencies. *J Hosp Dent Prac* 1980;14:111-112.
- Becker DE. Synopsis of endogenous opioid research. *Dent Hyg* 1982; 56:38-40.
- Becker DE. Aphthous ulcers of the mouth (letter). *N Engl J Med* 1985;313:330.
- Becker DE. Continuing education in preoperative sedation: Perspectives on educational methodology. *Anesth Prog* 1986;33(5): 258-261.
- Becker DE. Managing nausea and vomiting: physiological, pharmacological, and therapeutic considerations. *J Amer Dent Assoc* 1987;115: 292-294.
- Becker DE. Scientific principles of drug use in dental practice Part I: Clinical pharmacokinetics. *Compend Continu Educ Dent* 1988;9(1):46-54.
- Becker DE. Scientific principles of drug use in dental practice Part II: Clinical pharmacodynamics. *Compend Continu Educ Dent* 1988;9(2):148-154.
- Becker DE. Assessment and management of cardiovascular urgencies and emergencies: Cognitive and technical considerations. *Anesth Prog* 1988;35:212-217.
- Becker DE. The autonomic nervous system and related drugs in dental practice. Part I: Autonomic function, cholinergic and anticholinergic drugs. *Compend Continu Educ Dent* 1988;9(9):672- 679.
- Becker DE. The autonomic nervous system and related drugs in dental practice. Part II: Adrenergic agonists and antagonists. *Compend Continu Educ Dent* 1988;9(10):772-780.
- Becker DE. Principles of antimicrobial prophylaxis during surgical placement of implant prostheses. *J Oral Implantology* 1988;14(4):467-471
- Becker DE. The respiratory effects of drugs used for conscious sedation and general anesthesia. *J Amer Dent Assoc* 1989;119:153-156.
- Becker DE. Analgesic regimens in dental practice. *J Tenn Dent Assoc* 1990;70(1):18-22
- Becker DE. The pharmacological aspects of dental practice. Its more than Pen V's and T-3's. *Pharmacy Times*: July 1989.
- Becker DE. Management of respiratory complications in clinical dental practice. Pathophysiological and technical considerations. *Anesth Prog* 1990;37:169-175
- Becker DE. Pharmacological considerations for conscious sedation: Clinical applications of receptor function. *Anesth Prog* 1991;38:33-38.
- Becker DE., Johnson P. Preoperative assessment. In: Dionne RA, Phero JC. Management of Pain and Anxiety in Dental Practice. Elsevier Science Pub. Co., New York, 1991.
- Becker DE. Considerations for selecting effective analgesic regimens in dental practice. *Gen Dent* 1992; 40(2):111-116.
- Becker DE. Clinical implications of autonomic pharmacology. *J Oral Maxillofac Surg* 1992;50:734-740.
- Becker DE., Moore PA. Pharmacologic considerations in implant dentistry. In: Misch CE. Contemporary Implant Dentistry. Mosby-Year Book, Inc., 2nd Ed, St. Louis, 1999.
- Becker DE. Vasopressors in local anesthetics: Controversies revisited. *J Tenn Dent Assoc* 1994;74(1): 18-21.
- Becker DE. Drug interactions in dental practice: A summary of facts and controversies. *Compendium* 1994; 15(10):1228-44.
- Becker DE. Management of allergic and pseudoallergic reactions. *Dent Clin North Am* 1995;39(3): 577-586.
- Becker DE. Drug Therapy in Dentistry. Hayden-McNeil Publishing, Inc., 3rd Ed, Westland, WI. 1998
- Dionne RA, Phero JP, Becker DE. Management of Pain & Anxiety in the Dental Office. W.B. Saunders / Elsevier Science Pub, St. Louis, 2002.
- Phero JC, Becker DE. Rational use of analgesic combinations. In: Moore PA, Hersh EV. Dental Therapeutics Update. *Dent Clin N Am* 2002;46(4):691-705.
- Phero JC, Becker DE, Dionne RA. Contemporary trends in acute pain management. *Curr Opin Otolaryngol Head Neck Surg* 2004;12(3):209-16.
- Becker DE, Phero JC. Drug Therapy in Dental Practice: Nonopioid and Opioid Analgesics. *Anesth Prog* 2005;52:140-49
- Becker DE. Fundamentals of ECG interpretation. *Anesth Prog* 2006;53(2):53-64
- Becker DE, Reed KL. Essentials of local anesthetic pharmacology. *Anesth Prog* 2006;53(3):98-108.

- Becker DE. Drug therapy in Dental Practice: General Principles. Part 1-Pharmacokinetic considerations. *Anesth Prog* 2006;53(4):140-146.
- Becker DE. Drug therapy in Dental Practice: General Principles. Part 2-Pharmacodynamic considerations. *Anesth Prog* 2007;54(1):19-23.
- Becker DE, Haas DA. Management of complications during moderate and deep sedation: Respiratory and cardiovascular considerations. *Anesth Prog* 2007;54(2):59-68.
- Becker DE. Cardiovascular Drugs: Implications for Dental Practice Part 1-Cardiotonics, diuretics and vasodilators. *Anesth Prog* 2007;54(4):178-186.
- Becker DE. Cardiovascular Drugs: Implications for Dental Practice Part 2-Antihyperlipidemics and antithrombotics. *Anesth Prog* 2008;55(2): 49-56.
- Becker DE. Psychotropic Drugs: Implications for Dental Practice. *Anesth Prog* 2008;55(3): 89-99.
- Becker DE, Rosenberg M. Nitrous oxide and the inhalation anesthetics. *Anesth Prog* 2008;55(4): 124-31.
- Becker DE, Casabianca AB. Respiratory Monitoring: Technical and Physiological Considerations. *Anesth Prog* 2009;56(1):14-20
- Casabianca AB, Becker DE. Cardiovascular Monitoring: Technical and Physiological Considerations. *Anesth Prog* 2009;56(2):53-60.
- Becker DE. Preoperative Medical Evaluation: Part 1: General principles and cardiovascular considerations. *Anesth Prog* 2009;56(3):92-102.
- Becker DE. Preoperative Medical Evaluation: Part 2: Pulmonary, endocrine, renal and miscellaneous considerations. *Anesth Prog* 2009;56(4):135-144.
- Diaz M, Becker DE. Thermoregulation: Physiological and Clinical Considerations during Sedation and General Anesthesia. *Anesth Prog* 2010;57(1):25-33.
- Becker DE. Pain Management Part 1: Managing acute and postoperative dental pain. *Anesth Prog* 2010;57(2):67-9.
- Becker DE. Nausea, vomiting and hiccups: A review of mechanisms and treatment. *Anesth Prog* 2010;57(4):150-7.
- Becker DE. Adverse drug interactions. *Anesth Prog* 2011; 58(1):31-41.
- Becker DE, Haas DA. Recognition and management of complications during moderate and deep sedation. Part 1: Respiratory Considerations. *Anesth Prog* 2011; 58(2):82-92
- Becker DE, Haas DA. Recognition and management of complications during moderate and deep sedation. Part 2: Cardiovascular Considerations. *Anesth Prog* 2011; 58(3):126-138
- Becker DE. Pharmacokinetic Considerations for Moderate and Deep Sedation. *Anesth Prog* 2011;58(4):166-173
- Becker DE. Pharmacodynamic Considerations for Moderate and Deep Sedation. *Anesth Prog* 2012;59(1):28-42.
- Becker DE, Reed KL. Local anesthetics: Review of Pharmacological Considerations. *Anesth Prog* 2012;59(2): 59:90-102.
- Becker DE. Basic and clinical pharmacology of autonomic drugs. *Anesth Prog*. 2012;59(4):159-68.
- Becker DE. Basic and clinical pharmacology of glucocorticosteroids. *Anesth Prog*. 2013;60(1):25-31.
- Becker DE, Rosenberg MB., Phero JC. Procedural sedation for adult dental procedures. *Int Anesthesiol Clin*. 2013;51(2):97-111.
- Becker DE. Antithrombotic drugs; Pharmacology and implications for dental practice. *Anesth Prog*. 2013;60(2):72-80.
- Becker DE. Antimicrobial drugs. *Anesth Prog*. 2013;60(3):111-123.
- Becker DE. Drug allergy and implications for dental practice. *Anesth Prog*. 2013;60(4):188-197.
- Becker DE. Adverse drug reactions in dental practice. *Anesth Prog*. 2014;61(1):26-34.
- Becker DE, Rosenberg MB, Phero JC. Essentials of Airway management, oxygenation and ventilation Part 1: Basic equipment and devices. *Anesth Prog*. 2014;61(2):78-83.
- Rosenberg MB, Phero JC, Becker DE. Essentials of Airway management, oxygenation and ventilation Part 2: Advanced Airway Devices: Supraglottic Airways. *Anesth Prog*. 2014;61(3):113-118.
- Becker DE. Emergency Drug Kits: Pharmacological and Technical Considerations. *Anesth Prog*. 2014;61(4):171-79.



South Dakota State Board of Dentistry

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Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.
If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Parenteral Moderate Sedation

Course Sponsor: Oregon Academy of General Dentistry & OHSU

Name of person submitting information: Kenneth Reed

Email address: klrdmd@gmail.com Phone: 520-370-3693

Title: Course Director Date: March 25, 2022

Course Director:

Name: Kenneth Reed License Number and State: D6566 OR

Email: klrdmd@gmail.com Phone: 520-370-3693

Name of the facility where the course is presented: Oregon Academy of General Dentistry

Location: 13333 SW 68th Parkway, #010 Tigard, OR 97223

Course is presented at a: ☐ Dental Office ☐ Dental School ☐ Surgical Center
☐ Hospital ☒ Other: CE facility

Is the Course Sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

AGD PACE Provider Number: 219322

ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: _____ Date: March 25, 2022

Printed Name: Kenneth L. Reed, DMD

KLR = Kenneth L. Reed, DMD
SFM = Stanley F. Malamed, DDS
AJO = Amanda J. Okundaye, DDS
AMF = Andrea M. Fonner, DDS
JWB = Jason W. Brady, DMD
JAK = Jeff A. Kobernick, DMD
Short bios: <https://www.learnivsedation.com/gallery>

January 6:

Introduction KLR (2 hours)
History of Anesthesia KLR (2 hours)
Definitions KLR (1 hour)
Patient Evaluation JWB (3 hours)

January 7:

Physical Evaluation JWB (5 hours)
Pharmacology of the Benzodiazepines KLR (2 hours)
Case Selection & Assessment AJO (1 hour)

January 8:

Pediatrics AJO (1.5 hours)
IV Sedation Techniques AJO (1.5 hours)
Airway Management AMF (2 hours) AJO
Monitoring & Monitors AMF (2 hours) AJO

January 9:

Enteral Sedation KLR (1.5 hours)
Documentation Standards for Moderate Sedation AMF (1.5 hours) AJO
Venipuncture Techniques and Complications of Venipuncture AMF (2 hours) AJO

February 3:

Post-Operative Analgesics JAK (2 hours)
Nitrous Oxide SFM (2 hours)
Geriatrics SFM (2 hours)
Adjunctive Agents JAK (2 hours)

February 4:

ECG Interpretation SFM (2 hours)
Pharmacology of the Opioids KLR (2 hours)
Local Anesthesia KLR (2 hours)
Pharmacology of the Emergency Drugs KLR (2 hours)
Practical Aspects of IV Sedation AMF (1 hour)

February 5:

Medical Emergencies AJO/AMF (6 hours)
Rose Monitoring (1 hour)
State Board Exams KLR (1/2 hour)
Introduction to Sim-Man KLR (1/2 hour)

February 6:

Sim-Man KLR, AJO (5 hours)

Clinic:

March 10 KLR, AMF (4 hours lecture)

March 11 AJO, KLR, AMF

March 12 AJO, KLR, AMF

March 13 AJO, KLR, JAK

March 14 KLR, JAK

-OR-

April 7 KLR, AMF (4 hours lecture)

April 8 AJO, KLR, AMF

April 9 AJO, KLR

April 10 AJO, KLR, JAK

April 11 KLR, JAK

KENNETH L. REED

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Phone: 520.370.3693

March 1, 2022

EDUCATION & CERTIFICATIONS:

[ADBA](#) (Diplomate, [American Dental Board of Anesthesiology](#))

CERTIFICATE:

[Dental Anesthesiology](#)

[Lutheran Medical Center](#)

Brooklyn, NY

[FADSA](#) (Fellow in General Anesthesia of the [American Dental Society of Anesthesiology](#))

ACLS (Advanced Cardiac Life Support) - Current

BLS (Basic Life Support) – Current

PALS (Pediatric Advanced Life Support) - Current

ACLS Instructor:

1996 – 2000

BLS (CPR) Instructor:

2011 – 2013, 2002 – 2004, 1991 – 1993

ADVANCED TRAINING IN ANESTHESIOLOGY:

[Oregon Health Sciences University](#)

Portland, OR.

CERTIFICATE:

[Periodontology](#)

[Oregon Health Sciences University School of Dentistry](#)

Portland, OR.

Dentariae Medicinae Doctorae (DMD)

[Oregon Health Sciences University School of Dentistry](#)

Portland, OR.

B.A.
[The University of Arizona](#)
Tucson, AZ.

HONORS & APPOINTMENTS

2022 – Present	<u>Certified Parliamentarian</u> <u>American Institute of Parliamentarians</u>
2021 – Present	<u>Professional Registered Parliamentarian</u> <u>National Association of Parliamentarians</u>
2021 – Present	Secretary <u>American Dental Board of Anesthesiology</u>
2021 – Present	Director, Board of Directors <u>American Dental Board of Anesthesiology</u>
2021 – Present	Parliamentarian <u>Flying Samaritans, Arizona</u> Tucson, AZ
2021 - Present	Secretary <u>Flying Samaritans, Arizona</u> Tucson, AZ
2020	Dentist of the Year <u>Oregon Academy of General Dentistry</u> Tigard, OR
2020	Committee on Elections <u>American Institute of Parliamentarians</u> Schaumburg, IL
2020 – Present	Committee on Member Services <u>American Institute of Parliamentarians</u> Schaumburg, IL
2020 – Present	Oral Board Examiner <u>American Dental Board of Anesthesiology</u>
2019	2020 Annual Meeting and Programs Committee <u>American Society of Dentist Anesthesiologists</u>

2018 – Present	<u>International College of Dentists - Global Health Student Association (ICD-GHSA) NYU Langone Dental Chapter</u> Faculty Advisor Brooklyn, NY
2018 - Present	<u>Commission on Dental Accreditation</u> Site Visitor – Dental Anesthesiology Chicago, IL
2017 - 2019	Immediate Past President <u>American Dental Society of Anesthesiology</u> Chicago IL
2017 – Present	Advisory Board Dental Hygiene Program <u>Pima Community College</u> Tucson, AZ.
2016 – Present	Affiliate Assistant Professor Department of Periodontology <u>School of Dentistry</u> The Oregon Health Science University Portland, OR.
2015 – Present	Consultant Faculty <u>NYU Hospital</u> 545 1st Avenue Greenberg Hall New York, NY
2015 - 2017	President <u>American Dental Society of Anesthesiology</u> Chicago IL
2013 – Present	Associate Program Director Dental Anesthesiology <u>NYU Langone Hospital - Brooklyn</u> (formerly Lutheran Medical Center) Brooklyn, NY.
2013 - 2015	President Elect <u>American Dental Society of Anesthesiology</u> Chicago IL
2011 - Present	Member Anesthesia Committee <u>Arizona State Board of Dental Examiners</u>

2011 - Present	<p>Clinical Instructor Department of Dentistry Faculty of Medicine and Dentistry University of Alberta Edmonton, Alberta, Canada</p>
2011 – 2016	<p>Affiliate Assistant Professor Department of Restorative Dentistry School of Dentistry The Oregon Health Science University Portland, OR.</p>
2011 - 2013	<p>Vice President American Dental Society of Anesthesiology Chicago, IL</p>
2011 - 2013	<p>Chair Committee on Ethics & Bylaws American Dental Society of Anesthesiology</p>
2011 - 2013	<p>Chair Committee on Heidbrink Award American Dental Society of Anesthesiology</p>
2011 - 2013	<p>Chair Committee on Annual Meetings & Programs American Dental Society of Anesthesiology</p>
2011 - 2012	<p>Member Committee on Annual Meetings & Programs: IFDAS 2012 American Dental Society of Anesthesiology</p>
2011 - 2017	<p>Member Committee on Strategic Planning American Dental Society of Anesthesiology</p>
2011 - 2017	<p>Member Committee on Research & Essay Awards American Dental Society of Anesthesiology</p>
2011 - 2019	<p>Member Committee on Examinations American Dental Society of Anesthesiology</p>
2011 – 2018	<p>ADA Seminars Series Bare Bones Basic Emergency Drug Kit</p>

	On-line CE course http://www.adaceonline.org
2011 – 2019	American Dental Association (ADA) - Consultant Chicago, IL.
2010 - 2019	Fellow American College of Dentists (ACD)
2010 – 2015	Course Faculty Airway Management Course American Dental Association
2010 – Present	Attending in Anesthesiology Graduate Pediatric Dentistry NYU Langone Hospital - Brooklyn (formerly Lutheran Medical Center) Brooklyn, NY.
2009 – Present	Attending in Anesthesiology Dental Anesthesiology NYU Langone Hospital - Brooklyn (formerly Lutheran Medical Center) Brooklyn, NY.
2009 – 2015	Associate Professor in Residence The University of Nevada Las Vegas School of Dental Medicine Las Vegas, NV.
2008 - 2011	Chair Committee on Continuing Education American Dental Society of Anesthesiology
2008 – 2010	Chair Subcommittee: Parenteral Sedation Certifying Course American Dental Society of Anesthesiology
2008 – 2019	Consultant Committee on Membership and Component Development American Dental Society of Anesthesiology
2008 – 2010	Member Committee on Dental Education Arizona State Dental Association
2008 – 2009	Co-Chair Subcommittee: Enteral Sedation Courses: Chicago, Las Vegas

and Charleston
[American Dental Society of Anesthesiology](#)

2006 – 2016	Chair ADA Standards Committee Working Group 4.32 on Syringes, Cartridges, and Needles
2006 – 2008	Chair Committee on Membership and Component Development <u>American Dental Society of Anesthesiology</u>
2006 – 2011	Chair and Fellow Committee on Examinations <u>American Dental Society of Anesthesiology</u>
2004 – 2016	Assistant Editor <u>Anesthesia Progress</u>
2004 – 2010	Scientific Advisory Panel <u>Journal of Endodontics</u>
2003 – 2011	Board of Directors <u>American Dental Society of Anesthesiology</u>
2003 – 2006	Advisory Board Dental Hygiene Program <u>Pima Community College</u> Tucson, AZ.
2003 – 2006	Chair Committee on Continuing Education <u>American Dental Society of Anesthesiology</u>
2003 – 2006	Chair Committee on Technology <u>American Dental Society of Anesthesiology</u>
2002 – 2010	Member Continuing Education Committee <u>Southern Arizona Dental Society</u>
2001 – 2016	Editorial Review Board <u>Anesthesia Progress</u>
2000 – 2007	Delegate <u>American Dental Society of Anesthesiology</u>

2000 – 2013	Assistant Director Advanced Education in General Dentistry Arizona Region Lutheran Medical Center Brooklyn, NY.
1999 – 2016	Clinical Associate Professor Endodontics, Oral and Maxillofacial Surgery and Orthodontics The Ostrow School of Dentistry of the University of Southern California Los Angeles, CA.
1999 - 2000	Chair Subcommittee on Clinical Sedation American Dental Society of Anesthesiology
1999 – 2000	Chair Subcommittee on Medical Emergencies American Dental Society of Anesthesiology
1997 - 2019	Member Continuing Education Committee American Dental Society of Anesthesiology
1997 - 2004	Consultant and Attending Department of Dentistry Veterans Administration Medical Center Tucson, AZ
1997 - 2006	Member Anesthesia Committee Arizona State Board of Dental Examiners
1996 - 1998	Delegate Arizona Dental Association
1996 - Present	Consultant & Expert Witness Arizona State Board of Dental Examiners
1995 - 1997	Member Council on Membership Recruitment & Retention Arizona Dental Association
1994 - 1998	Member Council on Communications Arizona Dental Association

1994 - Present Evaluator
On-Site Inspector for Anesthesia
[Arizona State Board of Dental Examiners](#)

1993 Adjunct Faculty
Distinguished Teaching Award
[Pima Community College](#)

1993 - 2006 Adjunct Faculty
[Pima Community College](#)

JOURNAL REVIEWER

2020 - Present [British Medical Journal – Case Reports](#)

2012 – Present Scientific Advisory Panel
[Journal of Endodontics](#)

2013 – 2016 [Indian Journal of Critical Care Medicine](#)

2012 – 2016 [Journal of Oral and Maxillofacial Surgery, Medicine and Pathology](#)

2012 – 2016 [Journal of Dentistry](#)

2011 – Present [JADA](#)
The publication of the American Dental Association

2008 – 2016 [Special Care in Dentistry](#)
The publication for the [Special Care Dentistry Association](#)

2004 – 2010 Scientific Advisory Panel
[Journal of Endodontics](#)

2001 – 2016 Editorial Review Board
[Anesthesia Progress](#)
The publication for the [American Dental Society of Anesthesiology](#), et. al.

1997 - Present [Anesthesia Progress](#)
The publication for the [American Dental Society of Anesthesiology](#), et. al.

1993 - 2016 [General Dentistry](#)
The publication for the [Academy of General Dentistry](#)

PROFESSIONAL AFFILIATIONS

[American Dental Association](#)
[American Dental Society of Anesthesiology](#)
[American Society of Dentist Anesthesiologists](#)
[Arizona Dental Association](#)
[Delta Sigma Delta Professional Dental Fraternity](#)

EMPLOYMENT

2013 – Present	Associate Program Director Dental Anesthesiology Residency <u>NYU Langone Hospital - Brooklyn</u> (formerly Lutheran Medical Center) Brooklyn, NY.
2013 – Present	Attending in Anesthesia Dental Anesthesiology Residency California Region <u>NYU Langone Hospital - Brooklyn</u> Brooklyn, NY.
2010 – Present	Attending in Anesthesia Graduate Pediatric Dental Residency <u>NYU Langone Hospital - Brooklyn</u> Brooklyn, NY.
2009 – Present	Attending in Anesthesia Dental Anesthesiology Residency <u>NYU Langone Hospital - Brooklyn</u> Brooklyn, NY.
2009 – 2011	Flight Instructor Tucson Aeroservice Center Tucson, AZ.
2009 – Present	Flight Instructor Self Employed
2000 – Present	Attending in Anesthesia Advanced Education in General Dentistry <u>NYU Lutheran Medical Center</u> Brooklyn, NY.
2000 – 2013	Assistant Director Advanced Education in General Dentistry

Arizona Region
[Lutheran Medical Center](#)
Brooklyn, NY.

1998 – Present [Kenneth L. Reed DMD, PC.](#)
Arizona
Anesthesia for Dentistry

1991 - 2001 Tucson Dental Specialties, P.C.
Tucson, AZ
Periodontics

RESEARCH

1989 - 1991 Primary Investigator

A pilot study comparing ketoprofen and acetaminophen with hydrocodone for the relief of post-operative periodontal discomfort. *Anesthesia Progress* 44:49-54 1997.

1988 - 1989 Primary Investigator

Will a block injection of bupivacaine given at the end of a periodontal surgery decrease the quantity of opioid analgesics taken by a patient?

1988 Primary Investigator

A review of 300 current active patient's charts at the Oregon Health Sciences University School of Dentistry to determine the most commonly taken drugs, the average number of drugs taken, the average patient age, and the percent of patients taking drugs.

PUBLICATIONS

Working with a Dentist Anesthesiologist. Reed, KL Okundaye, AJ. in Wright's Behavior Management in Dentistry for Children, Second Edition. Editor: Kupietzky, A. Wiley. 2021.

Management of Emergencies Associated with Sedation for The Pediatric Dental Patient. Reed, KL Okundaye, AJ. in Wright's Behavior Management in Dentistry for Children, Second Edition. Editor: Kupietzky, A. Wiley. 2021.

Local and Regional Anesthesia in Dental and Oral Surgery in Complications of Regional Anesthesia: Principles of Safe Practice in Local and Regional Anesthesia. Malamed SF, Reed KL, Okundaye AJ & Fonner AM. Chapter 21, Pages 341-358. Editors: Finucane & Tsui. Springer; 3rd ed. 2017.

Post-Operative Pain Management Strategies for Acute Dental Pain. Fonner, AM & Reed, KL. *Decisions in Dentistry*. Belmont Publications. 3(3):29-30,32-33. 2017.

Responding to Cardiac Arrest. Fonner, AM & Reed, KL. Decisions in Dentistry. Belmont Publications. 2016 2:7, 48-51.

Anesthetic Adversity: Failed Sedation. Stevens, RL & Reed, KL. Anesthesia Complications in the Dental Office. Editors Bosack, R & Lieblich, S. Wiley June 2015.

Section Editor, Section 3: Oral and Maxillofacial Surgery/Pain Control 2.0 Local Anesthesia in Mosby's Review for the NBDE Part II, Second edition. Mosby. June 2014.

Why Capnography? Okundaye, AJ, Reed, KL, Fonner, AM. The Pulse. 2014. 46;1, 2-4.

Working with a Dentist Anesthesiologist. Reed, KL Okundaye, AJ. in Behavior Management in Dentistry for Children. Editors: Wright, GZ., Kupietzky, A. Wiley. April, 2014.

Management of Emergencies Associated with Pediatric Dental Sedation. Reed, KL Okundaye, AJ. in Behavior Management in Dentistry for Children. Editors: Wright, GZ., Kupietzky, A. Wiley. April, 2014.

Be Prepared - How to Manage a Medical Emergency in the Dental Office. Fonner, AM. Reed, KL. Dimensions of Dental Hygiene. Belmont Publishing. 11(5): 48-51. May 2013.

Local Anesthesia Part 2: Technical Considerations. Reed, KL., Malamed, SF., Fonner, AM. Anesth Prog 59:127-137, 2012.

Local Anesthetics: Review of Pharmacological Considerations. Becker, DE. & Reed, KL. Anesth Prog 59:90-102, 2012.

TCI (Target Controlled Infusion). Reed, KL. The Pulse. 2011 44:3, 20-21.

The impact of regulation on enteral sedation in dentistry. In: Boynes SG, ed: Dental Anesthesiology: A Guide to the Rules and Regulations of the United States of America. Stevens RL, Reed KL. Chicago, No-No Orchard Publishing; 2011:41-43.

Allergy & Anaphylaxis. Reed, KL. Inside Dentistry. Pages 126-127. March 2011.

Needle Breakage: Incidence and Prevention. Malamed, SF., Reed, KL., Poorsattar, S. Dent Clin N Am 54 (2010) 745-576.

Basic Management of Medical Emergencies: Recognizing a Patient's Distress. Reed, KL. JADA 2010;141(5 suppl):20s-24s.

The History and Current Status of Anesthesiology in Dentistry, 2008. Reed KL. NV Dent Assn J, 11:1, pp 15-18, Spring 2009.

Chapter 36: The Geriatric Patient in Sedation: A Guide to Patient Management 5th ed. Mosby 2009. Malamed, SF. primary author

Chapter 38: The Physically Compromised Patient in Sedation: A Guide to Patient Management 5th ed. Mosby 2009. Malamed, SF. primary author

Chapter 39: Neurologic Illnesses and Other Conditions in Sedation: A Guide to Patient Management 5th ed. Mosby 2009. Malamed, SF. primary author

Section Editor, Section 3: Oral and Maxillofacial Surgery/Pain Control 2.0 Local Anesthesia in Mosby's Review for the NBDE part II Mosby 2007.

Essentials of Local Anesthetic Pharmacology. Becker, D. & Reed, KL. Anesth Prog 53(3): 98-109, 2006.

Chapter 38: The Physically Compromised Patient in Sedation: A Guide to Patient Management 4th ed. Mosby 2005 Malamed, SF. primary author

Chapter 39: Neurologic Illnesses and Other Conditions in Sedation: A Guide to Patient Management 4th ed. Mosby 2005 Malamed, SF. primary author

A Brief History of Anesthesiology in Dentistry. Reed KL Texas Dent Assn J, 119(3): 219-225. March 2002.

Internet Resources for Dental Anesthesia. Rosenberg M, Reed KL Anesth Prog (1999 Winter) 46(1):30-6.

A pilot study comparing ketoprofen and acetaminophen with hydrocodone for the relief of postoperative periodontal discomfort. Reed KL, Smith JR, Lie T, Adams DF Anesth Prog (1997 Spring) 44(2):49-54

Local Anaesthetics in Dentistry Reed, KL Pharma Projects (UK) vol. 1, issue 6: 13-16 April 1996.

Pharmacology in Dentistry Monthly Column Reed, KL., 1994 - 1998 Inscriptions - Journal of the Arizona Dental Association

Advanced Techniques of Local Anesthetic Injection. Reed KL Gen Dent (1994 May-Jun) 42(3):248-51

Sonic Scalers: A Review. Reed KL Gen Dent (1992 Jan-Feb) 40(1):34-6.

1991 – 1994 Contributing Editor, Periodontal Abstracts Journal of the Western Society of Periodontology

PROFESSIONAL LICENSES & GENERAL ANESTHESIA PERMITS:

2016 – 2019	Nevada #6842
2013 – 2019	California #63092

1990 – Present Arizona #4183
1989 – Present Oregon #D6566

CONTINUING EDUCATION:

More than 10,000 hours of continuing education in anesthesia and related topics given.

AVIATION:

[Airline Transport Pilot](#), Airplane Multi-Engine Land
[Commercial Pilot](#), Airplane Single Engine Land
[Certificated Flight Instructor](#), Airplane Single Engine Land
Certificated Flight Instructor, Instrument Airplane Land
Certificated Flight Instructor, Airplane Multi-Engine Land
Advanced Ground Instructor
[Remote Pilot](#), Small UAS (Commercial Drone Pilot)
Board of Directors, [Flying Samaritans](#)
Secretary, [Flying Samaritans](#)
Command Pilot, [Angel Flight West](#)
Safety Officer, Arizona Wing [Angel Flight West](#)
Homeland Security Emergency Air Transportation System ([HSEATS](#))
[Veterans Airlift Command Pilot](#)

PARLIAMENTARY LAW:

[Certified Parliamentarian](#), American Institute of Parliamentarians
[Professional Registered Parliamentarian](#), National Association of Parliamentarians
Parliamentarian, [Flying Samaritans Arizona, Tucson Chapter](#)
Chair, Committee on Bylaws, [Arizona Professional Registered Parliamentarians](#), [National Association of Parliamentarians](#).
Committee on Member Services, [American Institute of Parliamentarians](#), Schaumburg IL.



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.

If a completed form is not returned by the date above, your course cannot be approved.

Course Title: DOCS/Idaho State University/Meharry Medical College IV Sedation Certification

Course Sponsor: Idaho State University and Meharry Medical College

Name of person submitting information: J. Kathleen Marcus, Esquire

Email address: kathleen.marcus@strategicdentistry.com Phone: 206-305-4889

Title: General Counsel Date: April 12, 2022

Course Director:

Name: Anthony Feck, DMD License Number and State: KY 5580

Email: tony@tonyfeck.com Phone: (859) 223-4644

Name of the facility where the course is presented: Dental Wellness of Lexington

Location: 527 WELLINGTON WAY, STE. 120, Lexington, KY, 40503

Course is presented at a: ☐ Dental Office ☐ Dental School ☐ Surgical Center
☐ Hospital ☒ Other: Dental School Satellite Campus

Is the Course Sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

AGD PACE Provider Number: 217651

ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: J. Kathleen Marcus

Digitally signed by J. Kathleen Marcus
Date: 2022.04.12 12:34:38 -0400

Date: 04/12/2022

Printed Name: J. Kathleen Marcus, Esquire

2022

<u>Module 1 (Chapters 1-6)</u>		Instructor	Segment Length
INTRODUCTION TO IV SEDATION DENTISTRY 1		Tony Feck	1:31:00
Workbook pages: I 1 - 8			0:12:00
IV SEDATION VOYAGE (ANATOMY & PHYSIOLOGY) 2		Tony Feck	1:07:42
Workbook pages: II 1 - 26			0:52:00
PHARMACOLOGY FOR THE IV SEDATION PROCEDURE 3		Tony Feck	2:21:29
Workbook pages: III 1 - 28			0:56:00
MONITORING FOR THE IV SEDATION PROCEDURE 4		Tony Feck	0:28:36
Workbook pages: IV 1 - 15			0:30:00
LOCAL ANESTHETICS 5		Tony Feck	0:27:23
Workbook pages: V 1 - 19			0:38:00
PRE-OPERATIVE ENTERAL SEDATION FOR IV SEDATION 6		Tony Feck	0:24:43
Workbook pages: VI 1 - 16			0:32:00
Test. End of Session 1			0:30:00
Office Hour Session 1 Review test and questions with instructor	Jerry Wellbrock		1:00:00
<u>Module 2 (Chapters 7-12)</u>		Instructor	Part 1 - Segment Length
NITROUS OXIDE 7		Tony Feck	1:13:01
Workbook pages: VII 1 - 36			1:12:00
AIRWAY MAINTENANCE & MANAGEMENT 8		Tony Feck	1:54:50
Workbook pages: VIII 1 -25			0:50:00
VENIPUNCTURE 9		Tony Feck	0:58:43
Workbook pages: IX 1 - 8			0:16:00
IV SEDATION PROTOCOLS 10		Tony Feck	0:30:03
Workbook pages: X 1 - 12			0:24:00
IV SEDATION COMPLICATIONS 11		Tony Feck	0:20:47
Workbook pages: XI 1 - 8			0:16:00
IV SEDATION CHALLENGES 12		Tony Feck	0:21:02
Workbook pages: XII 1 - 11			0:22:00
Test. End of Session 2			0:30:00
Office Hour Session 2 Review test and questions with instructor	Jerry Wellbrock		1:00:00
<u>Module 3 (Chapters 13-19)</u>		Instructor	Part 1 - Segment Length
NEW DRUGS 2018 13		Leslie Fang	1:17:40
Workbook pages: XIII 1 - 8			0:16:00
PATIENT ASSESSMENT 14		Leslie Fang	3:48:35
Workbook pages: XIV 1 - 35			1:10:00
PROSTHETIC JOINT 15		Leslie Fang	0:34:19
Workbook pages: XV 1 - 7			0:14:00
POST-SEDATION ANALGESIA 16		Leslie Fang	0:32:09
Workbook pages: XVI 1 - 4			0:08:00
BLEEDING DIATHESIS 17		Leslie Fang	0:32:16
Workbook pages: XVII 1 - 12			0:22:00
ANTIBIOTICS FOR ODONTOGENIC INFECTIONS 18		Leslie Fang	0:36:02
Workbook pages: XVIII 1 - 10			0:20:00
CARDIAC RHYTHM REVIEW 19		Leslie Fang	0:58:25
Workbook pages: XIX 1 - 19			0:38:00

**NEW ADA POLICY FOR OPIOID PRESCRIPTIONS
(to include T. C. A. § 63-1-402)**

Leslie Fang	2:24:04
	0:30:00
Jerry Wellbrock	1:00:00

Test. End of Session 3

Office Hour Session 3 Review test and questions with instructor

Instructor	Part 1 - Segment	Length
Leslie Fang		1:13:14
		0:42:00
Leslie Fang		0:45:47
		0:40:00

Module 4 (Chapters 20-24)

CASE EXAMPLES I 20

Workbook pages: XX 1 - 21

CASE EXAMPLES II 21

Workbook pages: XXI 1 - 20

IV SEDATION RECORD-KEEPING, DISPENSING, AND DEA COMPLIANCE 22

Workbook pages: XXII 1 - 16

IV SEDATION CASE EXAMPLES 23

Workbook pages: XXIII 1 - 16

OFFICE INSPECTION 24

Workbook pages: XXIV 1 - 8

Clinic instruction videos

Workbook page: Appendix Final Test. End of Session Didactic

Office Hour Session 4 Review test and questions with instructor -
Clinic instruction and review videos and full review of any chapters
that they want to go back over before the clinical session. They will
still have access to the full course. (Many will probably want to go
back to chapters 10-12 to review)

Jerry Wellbrock	1:00:00
Jim Bovia	3:30:00

Medical Emergency Training Video

Feck/Bovia	10:00:00
Feck	30:00:00

Didactic lectures at clinic site (day 1 session)

20 Patients - clinical 3 days

2:00:00

Final Exam - 75 Questions



ANTHONY S. FECK, DMD

860 Corporate Dr., Ste. 202
Lexington, KY 40503

(859) 223-4644
Tony@TonyFeck.com

Education:

1983 DMD University of Kentucky College of Dentistry - one of only three to graduate with High Distinction. Omicron Kappa Upsilon Honorary Dental Fraternity
1979 University of Kentucky

Postdoctoral Training:

2009 University of Kentucky – IV Sedation Mini Residency
2007 - Present Midwest Implant Institute
2002 - Present Advanced Cardiac Life Support Certified
2002 - Present John Kois – Kois Center for Advanced Dental Learning
2000 Montefiore Hospital IV Sedation Mini Residency, Bronx, NY
1998 - 1999 Misch Implant Institute
1995 - 1997 Peter Dawson – Center for Advanced Dental Studies
1983 - 2008 Over 2300 Hours of Continuing Education spanning the spectrum of the Dental Profession from Anesthesia to Implantology, Cosmetics, Endodontics, and Complex Restorative Dentistry.

Licensure and Certification:

1983 - Present Licensed to practice Dentistry in Kentucky
2006 - Present Anesthesia Permit in Kentucky

Faculty:

2009 - Present American Academy of Facial Esthetics
2000 - Present Dean of Faculty - Dental Organization for Conscious Sedation
2004 - Present New York University College of Dentistry, C.E. Division
2004 - Present Sunrise Dental Solutions, Owner & Director of Education
1996 - 2004 MasterPlan Alliance
1996 - 2000 Dental Boot Kamp Continuum
1983 - 1987 University of Kentucky College of Dentistry, Department of Periodontics

Study Clubs:

2007 - Present Band of Brothers Mastermind
2004 - 2007 Mile High Mastermind
2002 - 2004 Soaring Eagles Mastermind

Associations:

2003 - Present American Dental Society of Anesthesiology
2000 - Present Dental Organization for Conscious Sedation
1994 - Present International Congress of Oral Implantologists
1985 - Present Academy of General Dentistry
1983 - Present American Dental Association
2003 - 2007 Crown Council Qualified Member
2009 - Present American Academy of Facial Esthetics

Awards & Recognition:

2010 American Academy of Facial Esthetics Diplomate
2006 Dental Organization for Conscious Sedation Diplomate

2003	Dental Organization for Conscious Sedation Fellowship
2000	MAP recognition for Outstanding Performance
1999	MAP recognition for Dental Leadership

Community Service:

1983 - 1996	Lions Club International
-------------	--------------------------

Family:

Spouse: Rebecca Eastman Feck

Children: Meredith (23), Travis (20)

Avocations:

Reading, Writing

Sports - Boating, Golf

Computers

Professional Experience:

1988 - Present	Speaker, Educator, Author on Dental Topics
1983 - Present	Private Practice

Positions Held:

2010 - Present	Director of IV Sedation – DOCS Education
2008 - Present	Chairman, Dentscubator General Dentistry Committee
2007- Present	Editor, DOCS Digest
2006 - Present	Dental Organization for Conscious Sedation, Dean of Faculty
2004 - Present	Sunrise Dental Solutions, President
2003 - 2006	Dental Organization for Conscious Sedation Vice-President
1997 - 1998	Managing Director of the Academy of Dental Consultants
1983 - 1987	Associate Professor, University of Kentucky College of Dentistry

Media Interviews:

2009	Dental Tribune International
2008	Dental Tribune International
2007	Sedation Dentistry
2005	Oral Cancer Detection
2001	Digital Radiographs

Published Manuals/Books:

2005	"Sedation Solutions"
2003	"Complex Adult Oral Sedation"
2002	"Adult Oral Sedation"
2002	"Anxiolysis – Beyond Valium"
2001	"Complex Sedation Patient"
2000	"The Essentials of Oral Sedation"

Dental Board Presentations:

2009	Texas
2009	Missouri
2009	Florida
2008	Missouri
2007	Arkansas
2007	North Carolina
2002	Texas

Clinics and Courses Presented To Universities or Professional Organizations:

August 2019	"Master Series: Advanced Sedation" "Oral Sedation Dentistry" "IV Sedation Recertification" Memphis, TN
July 2019	"IV Sedation Certification" Lexington, KY
June 2019	"IV Sedation Certification" Lexington, KY
May 2019	"IV Sedation Certification" Lexington, KY
May 2019	"Oral Sedation Dentistry" "Master Series: Advanced Sedation" "IV Sedation Recertification" Arlington, VA
April 2019	IV Sedation Certification Lexington, KY
February 2019	"Oral Sedation Dentistry" "Master Series: Advanced Sedation" San Diego, CA
December 2018	"Little Implant Co. Mini-Residency" Lexington, KY
November 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
November 2018	"Oral Sedation Dentistry" "Masters Series" Scottsdale, AZ
October 2018	"Nitrous Oxide & Single Dose Enteral Sedation" Las Vegas, NV
October 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
October 2018	"Enteral Sedation Recertification for California Dentists" Irvine, CA
September 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
August 2018	"Oral Sedation Dentistry" "Masters Series" "IV Sedation Recertification" Atlanta, GA
July 2018	"Sedation Dentistry" – for Implant Educators Tampa, FL
July 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
June 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
May 2018	"Oral Sedation Dentistry" "Masters Series" "IV Sedation Recertification" Chicago, IL

May 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
April 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
March 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
February 2018	"Oral Sedation Dentistry" "Masters Series" San Francisco, CA
February 2018	"OsteoReady Institute Mini-Residency" Lexington, KY
December 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
November 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
November 2017	"Oral Sedation Dentistry" "Masters Series" Seattle, WA
October 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
October 2017	"Nitrous Oxide/Single Dose Enteral Sedation" Dallas, TX
September 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
August 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
August 2017	"Oral Sedation Dentistry" "Masters Series" "IV Sedation Recertification" Memphis, TN
July 2017	"Sedation Dentistry" – for Implant Educators Tampa, FL
July 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
June 2017	"Oral Sedation Dentistry" California Implant Institute San Diego, CA
June 2017	"IV Conscious Sedation Recertification – Tennessee" Chattanooga Dental Care
May 2017	"Oral Sedation Dentistry" "Masters Series" "IV Sedation Recertification" Reston, VA
April 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
March 2017	"OsteoReady Institute Mini-Residency" Lexington, KY
February 2017	"OsteoReady Institute Mini-Residency" Lexington, KY

February 2017	"Oral Sedation Dentistry" "Advanced Sedation" Newport Beach, CA
February 2017	"Strategic Winning Attitude Team Training" Sunrise Dental Solutions Dallas, TX
January 2017	"OsteoReady Institute Mini-Residency" Lexington, KY

Dr. Feck has presented hundreds of courses between 2008 and 2020. For a full list, ask DOCS Education.

Sponsorship Affiliations

- Aurum Dental Laboratories
- Demandforce
- American Eagle Instruments – Manufacturers of the Feck Perio Profile Kit
- Golden Misch – Physics Forceps
- Dental Technology Consultants
- The Health Chair
- Darby Dental Supply
- Center For Employee Dispute Resolution
- Spectro-Shade Matching Instrument

Communication/Practice Management Lectures:

- Creator and Speaker for "Production Explosion" for Sunrise Dental Solutions
- Creator and Speaker for "The Ultimate Team" for Sunrise Dental Solutions
- Creator and Speaker for "Starting Point" for Sunrise Dental Solutions
- Creator and Speaker for "Own Your Market" for Sunrise Dental Solutions
- Instructor for "Hands-On Dental Boot Kamp"
- Co-Creator & Lead Speaker for "The Leadership Challenge"
- Co-Creator & Lead Speaker for "MAP II" of the Master Plan Alliance

Articles Published:

- | | |
|------|--|
| 2010 | Dentistry Today (April) – "Total Facial Esthetics For Every Dental Practice" |
| 2010 | California Dental Association Journal – "Evaluating the Potential Benefits of Combining Oral and IV Sedation Protocols in Treating the Anxious Dental Patient" |
| 2009 | Aurum Ceramic Continuum - "Be An Agent of Change – Become a "Dentreprenuer" |
| 2009 | Dental Economics – "Profitability Comparison of Three Forms of Sedation" |
| 2009 | Dental Products Shopper – "The Sedation Driven Practice – A Business Model" |
| 2008 | Dental Tribune UK - "Thriving In An Economic Downturn" |
| 2008 | Dental Economics – "Sedation Architectonics" |
| 2008 | DOCS Digest – "Post-Operative Analgesia for Sedation Patients" |
| 2008 | Dental Tribune – "Recession Proof Your Practice" |
| 2008 | Dental Tribune – "The Five Words To More High Quality New Patients" |
| 2008 | Dental Economics – "Incorporating Sedation Dentistry Into Your Practice" |
| 2006 | Compendium of Continuing Dental Education – "Local Anesthesia Aided by Oral Conscious Sedation" |
| 2005 | Journal of the Academy of General Dentistry – "Oral Conscious Sedation" |
| 2003 | Dentistry Today – "Anxiolysis in General Dental Practice" |
| 1999 | Dental Products Report – "Marketing for the Dental Practice" |
| 1998 | Dental Economics – "Treatment Planning" |
| 1983 | Journal of the American Student Dental Association – "Acupuncture" |



Leslie Shu-Tung Fang, MD, PhD

151 Merrimac Street, 3rd Floor
Boston, Massachusetts 02114

lfang@partners.org

Education

1967	BSc	University of Illinois, Champaign-Urbana, Illinois (Bronze Tablet)
1969	MSc	University of Illinois, Champaign-Urbana, Illinois
1971	PhD	University of Illinois, Champaign-Urbana, Illinois
1974	MD	Physiology and Biophysics Harvard Medical School, Boston Massachusetts

Postdoctoral Training

Internship and Residencies:

1974-1975	Internship in Medicine, Massachusetts General Hospital
1975-1976	Assistant Resident in Medicine, Massachusetts General Hospital
1978-1979	Senior Resident in Medicine, Massachusetts General Hospital
1979-1980	Chief Resident in Medicine, Massachusetts General Hospital

Fellowship:

1976-1977	Clinical Fellow in Medicine (Nephrology), Massachusetts General Hospital
1977-1978	Clinical and Research Fellow in Medicine (Nephrology), Massachusetts General Hospital

Licensure and Certification:

1975	Massachusetts License Registration
1975	American Board of Internal Medicine, Diplomate
1980	American Board of Internal Medicine, Diplomate in Subspecialty of Nephrology

Academic and Hospital Appointments

Academic Appointments:

1967-1971	Teaching Assistant, Department of Physiology and Biophysics, University of Illinois, Champaign-Urbana, Illinois
1971	Instructor, Department of Physiology and Biophysics University of Illinois, Champaign-Urbana, Illinois
1974-1979	Teaching Fellow in Medicine, Harvard Medical School
1979-1983	Instructor in Medicine, Harvard Medical School
1983- Present	Assistant Professor in Medicine, Harvard Medical School

Hospital Appointments:

1980-1984	Assistant in Medicine, Massachusetts General Hospital
1980-1997	Clerkship Director, Core Clerkship in Medicine,

1980-Present	Massachusetts General Hospital Staff Physician, Renal Unit, Massachusetts General Hospital
1984-1990	Assistant Physician, Massachusetts General Hospital
1990-1993	Associate Physician, Massachusetts General Hospital
1993-Present	Physician, Massachusetts General Hospital

Hospital Service Responsibilities:

1980-Present	Attending Physician, Medical Service Massachusetts General Hospital
1980-Present	Attending Physician, Renal Service, Massachusetts General Hospital
1980-Present	Attending Physician, Primary Care Unit, Massachusetts General Hospital
1980-1990	Assistant in Medicine, Massachusetts General Hospital
1980-1997	Associate Director, Hemodialysis Unit, Massachusetts General Hospital
1984-1988	Co-Director, Chronic Ambulatory Peritoneal Dialysis Unit, Massachusetts General Hospital
1980-1997	Associate Director, Hemodialysis Unit Massachusetts General Hospital
1989-1997	Firm Chief, Bauer Firm, Medical Services, Massachusetts General Hospital

Major Administrative Responsibilities

1986-1987	Acting Program Director, Department of Medicine, Massachusetts General Hospital
1989-1997	Clerkship Director, Advanced Clerkship in Medicine, Massachusetts General Hospital
1989-1997	Firm Chief, Walter Bauer Firm, Medical Service, Massachusetts General Hospital
1991-1994	Coordinator, Private Service Team IV, Medical Service, Massachusetts General Hospital
1991-1992	Coordinator, Private Service Team V, Medical Service, Massachusetts General Hospital

Major Committee Assignments

Harvard Medical School:

1981-1997	Committee on Clinical Clerkship, Harvard Medical School
1984	Committee on Minority Recruitment, Harvard Medical School
1985	Committee on Student Evaluation, Harvard Medical School
1986	Committee on Stress in Residency Training, Harvard Medical School
1987-1988	Committee on Educational Evaluation, Surgery Core Clerkship Site Visits, Harvard Medical School
1987	Program on Student Evaluation, New Pathway Program Harvard Medical School
1988-1997	Committee of Medical Clerkship Directors, Harvard Medical School
1989	Chairman, Committee on Education, Core Clerkship in Surgery, Harvard Medical School
1991-1997	Committee on Years III and IV, New Pathway Program, Harvard Medical School
1991-1997	Committee on Years I and II, New Pathway Program,

1992	Harvard Medical School Faculty Council,
1993-1996	Harvard Medical School Curriculum Committee, Health Science and Technology Program (Harvard-MIT)
1994-1996	Committee on Enrichment of Clinical Clerkship Health Science and Technology Program (Harvard-MIT)
1994-1996	Screening Committee Harvard Medical School
1994	Faculty Council Harvard Medical School
1994	Docket Committee, Faculty Council, Harvard Medical School
1995	Faculty Council Harvard Medical School
1995-96	Curriculum Committee, Year III and IV Harvard Medical School
1996	Faculty Council Harvard Medical School
1997	Faculty Council Harvard Medical School
1998	Faculty Council Harvard Medical School
1999	Faculty Council Harvard Medical School

Hospital:

1980-1997	Internship Selection Committee, Massachusetts General Hospital
1982-1985	Committee on Teaching and Education, Massachusetts General Hospital
1982-1985	Executive Committee on Teaching and Education, Massachusetts General Hospital
1983-1993	Physician Advisory Committee, Utilization Review Committee, Massachusetts General Hospital
1983-1994	Executive Committee, Utilization Review, Massachusetts General Hospital
1985-1997	Clinical Advisory Committee, Medical Service, Massachusetts General Hospital
1989-1997	Chairman, Internship Selection Committee, Medical Service, Massachusetts General Hospital
1989-1997	Residency Selection Committee, Psychiatry Department Massachusetts General Hospital
1989-1997	Residency Selection Committee, Medicine-Pediatrics Program, Massachusetts General Hospital
1989-1997	Committee on Minority Recruitment, Massachusetts General Hospital
1989-1997	Committee on Clinical Teaching, Massachusetts General Hospital
1990-1997	Training Program Committee, Medical Service, Massachusetts General Hospital
1991-1993	Emergency Department Task Force, Massachusetts General Hospital
1991-1997	Clinical Practice Advisory Committee, Massachusetts General Hospital
1991-1992	Tower II Space Allocation Committee, Massachusetts General Hospital
1991-1992	Emergency Department Space Allocation Committee, Massachusetts General Hospital
1991-1993	Clinical Practice Information Committee,

1992-1994	Massachusetts General Hospital Executive Committee, Massachusetts General Professional Corporation Massachusetts General Hospital
1992-1994	Chairman, Information Resources Committee, Massachusetts General Professional Corporation Massachusetts General Hospital
1992-1994	US Healthcare Negotiating Team, Massachusetts General Professional Corporation Massachusetts General Hospital
1992-1996	Global Fee Analysis Team Massachusetts General Professional Corporation Massachusetts General Hospital
1992-1997	Committee on Promotions Clinician-Teacher Track Massachusetts General Hospital
1993-1995	Information Technology Committee (ITAB) Massachusetts General Hospital
1993-1994	Executive Committee, Massachusetts General Professional Corporation Massachusetts General Hospital
1993-1995	Executive Committee on Information System Massachusetts General Hospital
1994-1996	Steering Committee, Alumni Association Massachusetts General Hospital
1994-1997	Clinical Practice Council, Department of Medicine Massachusetts General Hospital
1994-1997	Task Force on Integrated Health Care Delivery System Massachusetts General Hospital
1994-1997	Clinical Practice Committee, Massachusetts General Hospital
1994-1997	Task Force on the Evaluation of Laboratory Systems Massachusetts General Hospital
1995-1997	Physician Information Resource Committee Massachusetts General Hospital
1995-1997	Governing Board, Medical Services Associates Massachusetts General Hospital
1995-1997	Executive Board, Medical Services Associates Massachusetts General Hospital
1996-1997	Clinical Director, Medical Services Associates Massachusetts General Hospital

Professional Societies

1980-Present	International Society of Nephrology
1980-Present	American Medical Association
1982-Present	American Society of Transplant Physicians
1990-Present	Association of Clerkship Directors in Internal Medicine
1993-Present	American Society of Nephrology

Awards and Honors

1965	Phi ETA Sigma
1966	Phi Kappa Phi
1966	Gregory Scholar, University of Illinois
1967	Phi Beta Kappa
1965-1967	James Scholar, University of Illinois
1967	Bronze Tablet, University of Illinois
1969	Sigma Xi
1970	Phi Sigma
1974	Alpha Omega Alpha

1983	Boylston Society Award for Excellent in Clinical Teaching, Harvard Medical School
1989	Teaching Award for Excellence in Clinical Teaching, Harvard Medical School
1993	Faculty Award for Excellence in Clinical Teaching Harvard Medical School
1994	Teaching Award for Excellence in Clinical Teaching Harvard Medical School
1996	Teaching Award for Excellence in Clinical Teaching in Primary Care Massachusetts General Hospital
1998	The Alfred Kranes Award for Excellence in Clinical Teaching Massachusetts General Hospital
1999	Psychiatry Resident Award for Contribution to the Residency Selection Process Massachusetts General Hospital

Part II. Research, Teaching and Clinical Contributions

I maintain a busy international practice in medicine and nephrology and continue to teach from the clinical forum. In clinical teaching, my major focus has involved the development of an interactive platform to facilitate education. Using case-based method and an audience response system, students would participate interactively to manage patients through a large variety of clinical scenarios. Pre- and post-tests would allow teachers and participants alike to gauge the effectiveness of any educational session. Interactive teaching has been extended from the education of students, residents and fellows to physicians in the community, and, most recently, to dental professionals who are interested in optimizing management of medically complex patients.

Internship and Residency: Massachusetts General Hospital
Chief Residency: Massachusetts General Hospital
Fellowship in Nephrology: Massachusetts General Hospital

Board Certification in Medicine
Board Certification in Nephrology
Board Certification in Emergency Medicine

International Practice in Nephrology and Internal Medicine at Massachusetts General Hospital

Teaching Portfolio:

February 17, 2017	Sedation Voyage Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Airway Evaluation and Management Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Newport Beach, California

February 17, 2017	Cardiac Rhythm Review Dental Organization for Conscious Sedation Newport Beach, California
February 17, 2017	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Newport Beach, California
February 18, 2017	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Newport Beach, California
February 18, 2017	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Newport Beach, California
February 18, 2017	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Newport Beach, California
February 18, 2017	Assessment of Complicated Patient Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Seattle, Washington
February 19, 2017	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Newport Beach, California
February 19, 2017	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Newport Beach, California
March 4, 2017	Science of Sedation New York University New York, New York
March 4, 2017	Local Anesthetics: Practical Vignettes New York University New York, New York
March 4, 2017	Patient Assessment in the Dental Office New York University New York, New York
March 4, 2017	Pharmacology of Sedation Drugs New York University New York, New York

March 4, 2017	Management of Patients with Cardiovascular Disease New York University New York, New York
March 5, 2017	Metabolism of Drugs and Drug-Drug Interactions New York University New York, New York
March 5, 2017	Antibiotic Management of Odontogenic Infections New York University New York, New York
March 5, 2017	Antibiotic Prophylaxis: Myths and Reality New York University New York, New York
March 5, 2017	Management of Patients with Renal Disease New York University New York, New York
March 5, 2017	Management of Patients with Coagulopathy New York University New York, New York
March 5, 2017	Dental Management of Patients with Liver Disease New York University New York, New York
March 5, 2017	Medical Emergencies in the Dental Office New York University New York, New York
May 19, 2017	Sedation Voyage Dental Organization for Conscious Sedation Washington, DC
May 19, 2017	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Washington, DC
May 19, 2017	Evaluation of the Pediatric Patient Dental Organization for Conscious Sedation Washington, DC
May 19, 2017	Drug-Drug Interactions in Sedation Dentistry Dental Organization for Conscious Sedation Washington, DC
May 19, 2017	Evaluation of the Complicated Pediatric Patient Dental Organization for Conscious Sedation San Diego, California
May 19, 2017	Airway Evaluation and Management Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	General Principles of Pharmacology in Pediatric Sedation Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Pharmacology of Selected Drugs Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Management of Pediatric Emergencies Dental Organization for Conscious Sedation San Diego, California

May 20, 2017	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Management of Patients with Diabetes Dental Organization for Conscious Sedation Washington, DC
May 20, 2017	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Washington, DC
May 21, 2017	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Washington, DC
August 18, 2017	Sedation Voyage Dental Organization for Conscious Sedation Memphis, TN
August 18, 2017	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Memphis, TN
August 18, 2017	Evaluation of the Pediatric Patient Dental Organization for Conscious Sedation Memphis, TN
August 18, 2017	Drug-Drug Interactions in Sedation Dentistry Dental Organization for Conscious Sedation Memphis, TN
August 18, 2017	Evaluation of the Complicated Pediatric Patient Dental Organization for Conscious Sedation Memphis, TN
August 18, 2017	Airway Evaluation and Management in Pediatric Patient Dental Organization for Conscious Sedation Memphis, TN

August 19, 2017	Airway Evaluation and Management in IV Sedation Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Cardiac Rhythm Review Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Management of Pediatric Emergencies Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Memphis, TN
August 19, 2017	Management of Patients with Diabetes Dental Organization for Conscious Sedation Memphis, TN
August 20, 2017	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Memphis, TN
August 20, 2017	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Memphis, TN
August 20, 2017	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Memphis, TN
August 20, 2017	Management of Patients with Renal Disease Dental Organization for Conscious Sedation San Francisco, California
August 20, 2017	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation San Francisco, California
August 20, 2017	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Memphis, TN
August 20, 2017	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Memphis, TN
November 10, 2017	Sedation Voyage Dental Organization for Conscious Sedation Seattle, Washington

November 10, 2017	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Airway Evaluation and Management Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Cardiac Rhythm Review Dental Organization for Conscious Sedation Seattle, Washington
November 10, 2017	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Assessment of Complicated Patient Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Seattle, Washington
November 11, 2017	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Seattle, Washington
November 12, 2017	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Seattle, Washington
November 12, 2017	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Seattle, Washington
November 12, 2017	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Seattle, Washington
November 12, 2017	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Seattle, Washington

November 12, 2017	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Seattle, Washington
February 23, 2018	Sedation Voyage Dental Organization for Conscious Sedation San Francisco, California
February 23, 2018	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation San Francisco, California
February 23, 2018	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation San Francisco, California
February 23, 2018	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation San Francisco, California
February 23, 2018	Airway Evaluation and Management Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Cardiac Rhythm Review Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Assessment of Pediatric Patient Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Assessment of Complicated Patient Dental Organization for Conscious Sedation San Francisco, California
February 24, 2018	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation San Francisco, California
February 25, 2018	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation San Francisco, California
February 25, 2018	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation San Francisco, California
February 25, 2018	Management of Patients with Renal Disease Dental Organization for Conscious Sedation San Francisco, California

February 25, 2018	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation San Francisco, California
February 25, 2018	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation San Francisco, California
February 25, 2018	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation San Francisco, California
March 3, 2018	Science of Sedation New York University New York, New York
March 3, 2018	Local Anesthetics: Practical Vignettes New York University New York, New York
March 3, 2018	Patient Assessment in the Dental Office New York University New York, New York
March 3, 2018	Pharmacology of Sedation Drugs New York University New York, New York
March 3, 2018	Management of Patients with Cardiovascular Disease New York University New York, New York
March 3, 2018	New Drugs with Dental Implications New York University New York, New York
March 3, 2018	New Oral Anticoagulants (NOACs) New York University New York, New York
March 3, 2018	New Anti-platelet Drugs New York University New York, New York
March 3, 2018	Management of Patients with Hepatitis C New York University New York, New York
March 3, 2018	Management of Patients with Congestive Heart Failure New York University New York, New York
March 4, 2018	Metabolism of Drugs and Drug-Drug Interactions New York University New York, New York
March 4, 2018	Antibiotic Management of Odontogenic Infections New York University New York, New York
March 4, 2018	Antibiotic Prophylaxis: Myths and Reality New York University New York, New York
March 4, 2018	Management of Patients with Renal Disease New York University New York, New York

March 4, 2018	Management of Patients with Coagulopathy New York University New York, New York
March 4, 2018	Dental Management of Patients with Liver Disease New York University New York, New York
March 4, 2018	Medical Emergencies in the Dental Office New York University New York, New York
May 18, 2018	Sedation Voyage Dental Organization for Conscious Sedation Chicago, Illinois
May 18, 2018	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Chicago, Illinois
May 18, 2018	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Chicago, Illinois
May 18, 2018	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Chicago, Illinois
May 18, 2018	Airway Evaluation and Management Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Cardiac Rhythm Review Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Chicago, Illinois
May 19, 2018	Assessment of Complicated Patient Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Chicago, Illinois

May 20, 2018	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Chicago, Illinois
May 20, 2018	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Chicago, Illinois
August 17, 2018	Sedation Voyage Dental Organization for Conscious Sedation Atlanta, Georgia
August 17, 2018	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Atlanta, Georgia
August 17, 2018	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Atlanta, Georgia
August 17, 2018	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Atlanta, Georgia
August 17, 2018	Airway Evaluation and Management Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Cardiac Rhythm Review Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Atlanta, Georgia
August 18, 2018	Assessment of Complicated Patient Dental Organization for Conscious Sedation Atlanta, Georgia

August 19, 2018	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Atlanta, Georgia
August 19, 2018	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Atlanta, Georgia
November 9, 2018	Sedation Voyage Dental Organization for Conscious Sedation Scottsdale, Arizona
November 9, 2018	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Scottsdale, Arizona
November 9, 2018	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Scottsdale, Arizona
November 9, 2018	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Scottsdale, Arizona
November 9, 2018	Airway Evaluation and Management Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Cardiac Rhythm Review Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Scottsdale, Arizona

November 10, 2018	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Scottsdale, Arizona
November 10, 2018	Assessment of Complicated Patient Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Scottsdale, Arizona
November 11, 2018	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Scottsdale, Arizona
February 22, 2019	Sedation Voyage Dental Organization for Conscious Sedation San Diego, California
February 22, 2019	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation San Diego, California
February 22, 2019	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation San Diego, California
February 22, 2019	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation San Diego, California
February 22, 2019	Airway Evaluation and Management Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Cardiac Rhythm Review Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation San Diego, California

February 23, 2019	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Assessment of Pediatric Patient Dental Organization for Conscious Sedation San Diego, California
February 23, 2019	Assessment of Complicated Patient Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Management of Patients with Renal Disease Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation San Diego, California
February 24, 2019	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation San Diego, California
May 17, 2019	Sedation Voyage Dental Organization for Conscious Sedation Arlington, Virginia
May 17, 2019	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Arlington, Virginia
May 17, 2019	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Arlington, Virginia
May 17, 2019	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Arlington, Virginia
May 17, 2019	Airway Evaluation and Management Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Arlington, Virginia

May 18, 2019	Cardiac Rhythm Review Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Arlington, Virginia
May 18, 2019	Assessment of Complicated Patient Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Arlington, Virginia
May 19, 2019	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Arlington, Virginia
August 16, 2019	Sedation Voyage Dental Organization for Conscious Sedation Memphis, Tennessee
August 16, 2019	Pharmacology of Pediatric Sedation Drugs Dental Organization for Conscious Sedation Memphis, Tennessee
August 16, 2019	Drug Metabolism and Drug-Drug Interactions Dental Organization for Conscious Sedation Memphis, Tennessee
August 16, 2019	Patient Assessment in the Dental Office Dental Organization for Conscious Sedation Memphis, Tennessee

August 16, 2019	Airway Evaluation and Management Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Patient Assessment for IV Sedation Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Cardiac Rhythm Review Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Medical Emergencies in IV Sedation Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Pharmacology of Sedation Drugs Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Management of Patients with Cardiovascular Disease Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Assessment of Pediatric Patient Dental Organization for Conscious Sedation Memphis, Tennessee
August 17, 2019	Assessment of Complicated Patient Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Metabolism of Drugs and Drug-Drug Interactions Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Antibiotic Management of Odontogenic Infections Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Antibiotic Prophylaxis: Myths and Reality Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Management of Patients with Renal Disease Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Management of Patients with Coagulopathy Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Dental Management of Patients with Liver Disease Dental Organization for Conscious Sedation Memphis, Tennessee
August 18, 2019	Medical Emergencies in the Dental Office Dental Organization for Conscious Sedation Memphis, Tennessee

Dr. Fang has presented hundreds of courses between 2007 and 2020. For a full list, ask DOCS Education.

Academic and Hospital Appointments

Academic Appointments:

Assistant Professor in Medicine, Harvard Medical School

Hospital Appointments:

Former Firm Chief, Walter Bauer Firm, Medical Service,
Massachusetts General Hospital

Physician, Massachusetts General Hospital

Publications in Dentistry

1. Sonis, ST, Fazio, RC, Fang, LST. Principles and Practice of Oral Medicine. Third Edition. WB Saunders, Philadelphia, in preparation
2. Sonis, ST, Fazio, RC, Fang LST. Oral Medicine Secrets. Hanley. 2003
3. Fang, LST and Fazio, RC. Antibiotics in Dentistry. CE Magic 2002
4. Fang, LST, Fazio, RC and Menhall, TW. Ultimate Cheat Sheets. The Practical Guide for Dentists. UCS 2007
5. Fang, LST and Menhall, TW. The Ultimate Basic Drug Kit for Medical Emergencies in the Dental Office. UCS 2007
6. Fang, LST and Menhall, TW. The Ultimate Advanced Drug Kit for Medical Emergencies in the Dental Office. UCS 2008
7. Fang, LST, Fazio, RC and Menhall, TW. Ultimate Cheat Sheets. The Practical Guide for Dentists. UCS 2008
8. Fang, LST and Menhall, TW. The Ultimate Basic Drug Kit for Medical Emergencies in the Dental Office. UCS 2009
9. Fang, LST and Menhall, TW. The Ultimate Advanced Drug Kit for Medical Emergencies in the Dental Office. UCS 2009
10. Fang, LST, Fazio, RC and Menhall, TW. Ultimate Cheat Sheets. The Practical Guide for Dentists. UCS 2009

Fellowship in Dentistry

Fellow of the Dental Organization for Conscious Sedation

Contributions in Dentistry

Bridging the disciplines of medicine and dentistry

Empowering the dental professional to consider the patient as a whole

Awards and Honors

- Boylston Society Award for Excellent in Clinical Teaching
Harvard Medical School
- Teaching Award for Excellence in Clinical Teaching,
Harvard Medical School
- Faculty Award for Excellence in Clinical Teaching
Harvard Medical School
- Teaching Award for Excellence in Clinical Teaching
Harvard Medical School
- Teaching Award for Excellence in Clinical Teaching in Primary Care
Massachusetts General Hospital
- The Alfred Kranes Award for Excellence in Clinical Teaching
Massachusetts General Hospital
- Psychiatry Resident Award for Contribution to the Residency Selection Process
Massachusetts General Hospital
- Best Doctor In America 2008
- Best Doctor In Boston 2007

Awards in Dentistry:

CRE Product of the Year 2004: Fang, LST and Fazio, RC. Antibiotics in Dentistry. CE Magic 2002

CE Best Educational Product of the Year 2008: Fang, LST, Fazio, RC and Menhall, TW. Ultimate Cheat Sheets. The Practical Guide for Dentists. UCS 2008

Professional Biography

In medicine:

Leslie S.T. Fang received his PhD degree in Physiology and Biophysics from the University of Illinois, Champaign-Urbana. At the University of Illinois, he was a Gregory Scholar and James Scholar and was elected to Phi Eta Sigma, Phi Kappa Phi, Phi Beta Kappa, Sigma Xi and Phi Sigma. He graduated as a Bronze Tablet Scholar. He did his medical training at Harvard Medical School and was elected to Alpha Omega Alpha as a junior. He did his residency training at the Massachusetts General Hospital where he served as Chief Medical Resident. He did his fellowship training in Nephrology at the Massachusetts General Hospital and is board certified in Internal Medicine and Nephrology.

He has been on the staff of Massachusetts General Hospital and on the faculty of Harvard Medical School. A clinician and a teacher, he maintains an active international practice in Internal Medicine and Nephrology and is a leading teacher at Harvard Medical School. At the Massachusetts General Hospital, he served as Chief of the Walter Bauer Firm and as the Clinical Director of the Governing Board of the Medical Services Associates. He has received numerous awards for excellence in teaching from Harvard Medical School and has served and chaired the Medical Internship Selection Committee at the Massachusetts General Hospital for two decades.

In the dental field:

He is the co-author of the major textbook Principle and Practice of Oral Medicine, Oral Medicine Secrets and has been heavily involved in the clinical teaching of Oral Medicine. He is the co-author of an interactive DVD on Antibiotics in Dentistry in the EndoMagic Interactive Teaching Series, which won the CRE product of the year award for 2004. He is the co-author of the recently released Ultimate Cheat Sheets: Practical Guide for the Dentist, The Ultimate Basic Drug Kit and The Ultimate Advanced Drug Kit for Medical Emergencies in the Dental Office.

The Ultimate Cheat Sheets won the CE Award for Best Educational Product of 2008.

He has been the featured speaker at many of the major dental meetings. He has been integrally involved in the EndoMagic course, providing an important bridge between the dental and the medical profession. He has also been involved with teaching of oral medicine at the Las Vegas Institute of Advanced Dentistry where he runs a one-day seminar on Medical Emergencies in the Dental Office. He is on the board of LVI Global. He is on the faculty of Dental Organization for Conscious Sedation and is instrumental in the design of the curriculum and the teaching of oral medicine pertinent to sedation.

BIBLIOGRAPHY

Original Reports:

1. Willis JS and Fang LST. Lithium stimulation of ouabain-sensitive respiration and Na-K-ATPase of kidney cortex of ground squirrels. *Biochim Biophys Acta*, 1970; 219: 486-9.
2. Fang LST and Willis JS. Increase of Na-K-ATPase activity in renal cortex of hamster (*Mesocricetus auratus*) during prehibernation cold exposure. *Comp Bioch Physiol*, 1974; 48: 687-98.
3. Fang LST, Tolkoff-Rubin NE, Rubin RH. Efficacy of single dose and conventional amoxicillin therapy in urinary tract infection localized by antibody coated bacteria technic. *N Eng J Med*, 1978; 298: 413-6.
4. Fang LST, Tolkoff-Rubin NE, Rubin RH. Infection localization and the antibiotic management of urinary tract infection. *Ann Rev Med*, 1979; 30: 225-39.
5. Rubin RH, Fang LST, Cosimi AB, Herrin JT, Varga PA, Russell PS, Tolkoff-Rubin NE. The usefulness of the antibody coated bacteria assay in the management of urinary tract infection in the renal transplant patient. *Transplant*, 1979; 27: 18-20.
6. Fang, LST, Tolkoff-Rubin NE, Rubin RH. Urinary tract infections in women. *Comprehensive Therapy*, 1979; 5: 20-25.
7. Rubin RH, Fang LST, Jones SR, Mumford RS, Slepach JM, Varga PA, Onheiber L, Hall CL, Tolkoff-Rubin, NE. Single dose amoxicillin therapy for urinary tract infection. *JAMA*, 1980; 244: 561-4.
8. Fang LST, Sirota SA, Ebert TE, Lichtenstein NE. Low fractional excretion of sodium in contrast media-induced acute renal failure. *Arch Intern Med*, 1980; 140: 531-3.
9. Fang LST. Single-dose therapy for uncomplicated urinary tract infections in women. *Family Practice*, 1981; 15: 55-59.
10. Tolkoff-Rubin NE, Weber D, Fang LST, Kelly M, Wilkinson R, Rubin RH. Single-dose therapy with trimethoprim-sulfamethoxazole for urinary tract infection in women. *Rev Inf Dis*, 1982; 4: 444-8.

11. Fang LST, Tolkoff-Rubin NE, Rubin RH. Clinical management of urinary tract infection. *Pharmacotherapy*, 1982; 2: 91-9.
12. Blackshear PJ, Fang LST, Axelrod L. Treatment of severe lactic acidosis with dichloroacetate. *Diabetes Care*, 1982; 5: 391-4.
13. Delmonico FL, Cosimi AB, Jaffers GJ, Schooley RT, Rubin RH, Tolkoff-Rubin NE, Fang LST, Russell PS. Immunological monitoring of diabetic and non-diabetic recipients of renal allografts. *J Surg Res*, 1983; 35: 271-4.
14. Fang LST. Contrast medium-induced acute renal failure. *Medical Grand Rounds*, 1983; 3: 263-271.
15. Nelson, PW, Cosimi AB, Delmonico FL, Rubin RH, Tolkoff-Rubin NE, Fang LST, Russell PS. Antithymocyte globulin as the primary treatment for renal allograft rejection. *Transplantation*, 1983; 27: 18-20.
16. Corwin HL, Schreiber, MJ, Fang LST. Low fraction excretion of sodium: occurrence with hemoglobinuric- and myoglobinuric-induced acute renal failure. *Arch Intern Med*, 1984; 144: 981-982.
17. Diamond, JR, Cheung JY, Fang LST. Nifedipine-induced renal dysfunction. Alterations in renal hemodynamics. *Am J Med*, 1984; 77: 905-9.
18. Delmonico FL, Wang CA, Tolkoff-Rubin NE, Fang LST, Herrin JT, Cosimi AB. Parathyroid surgery in patients with renal failure. *Ann Surg*, 1984; 200: 644-7.
19. Nelson PW, Delmonico FL, Tolkoff-Rubin NE, Cosimi AB, Fang LST, Russell PS, Rubin RH. Unsuspected donor pseudomonas infection causing arterial disruption after renal transplantation. *Transplantation*, 1984; 37: 313-4.
20. Thistlethwaite, JR, Cosimi AB, Delmonico FL, Rubin RH, Tolkoff-Rubin NE, Nelson PW, Fang LST, Russell PS. Evolving use of OKT3 monoclonal antibody for treatment of renal allograft rejection. *Transplantation*, 1984; 38: 695-701.
21. Zarich S, Fang LST, Diamond JR. Fractional excretion of sodium. Exceptions to its diagnostic value. *Arch Intern Med*, 1985; 146: 108-112.
22. Patel IH, Bornemann LD, Brocks VM, Fang LST, Tolkoff-Rubin NE, Rubin RH. Pharmacokinetics of intravenous amdinocillin in healthy subjects and patients with renal insufficiency. *Antimicrob Agents Chemother*, 1985; 28: 46-50.
23. Fang LST. Light chain nephropathy. *Kidney International*, 1985; 27: 582-92.
24. Corwin HL, Teplick RS, Schreiber MJ, Fang LST, Bonventre JV, Coggins CH. Prediction of outcome in acute renal failure. *Am J Nephrol*, 1987; 7: 8-12.
25. Delmonico FL, Auchincloss H, Rubin RH, Russell PS, Tolkoff-Rubin NE, Fang LST, Cosimi AB. The selective use of antilymphocyte serum for cyclosporine treated patients with renal allograft dysfunction. *Ann Surg*, 1987; 206: 649-54.
26. Fang LST. Management of urinary tract infections in women. *Comprehensive Therapy*, 1987; 13: 3-7.
27. Cosimi AB, Auchincloss H, Delmonico FL, Fang LST, Nathan DM, Tolkoff-Rubin NE, Rubin RH, Yang HC, Russell PS. Combined kidney and pancreas transplantation in diabetics. *Arch Surg*, 1988; 123: 621-5.
28. Fang LST. Urinalysis in the diagnosis of urinary tract infections. *Clinics in Lab Med*, 1988; 8: 567-576.
29. Delmonico FL, Conti D, Auchincloss H, Russell PS, Tolkoff-Rubin NE, Fang LST, Cosimi AB. Long-term, low-dose cyclosporine treatment of renal allograft recipients. A randomized trial. *Transplantation*, 1990; 49: 899-904.
30. Rabito, CA, Fang, LS, Waltman, AC. Renal function in patients at risk of contrast material induced acute renal failure: non-invasive, real-time monitoring. *Radiology*, 1993; 186: 881-884.
31. Yurcel, EK, Kaufman, JA, Prince, M, Bazari, H, Fang, LS, Waltman, AC. Time of flight renal magnetic resonance angiography: utility in patients with renal insufficiency. *Magn Reson Imaging* 1993; 11: 925-30.
32. Delmonico, FL, Tolkoff-Rubin, N, Auchincloss, H, Jr, Williams, WW, Jr, Fang, LST, Bazari, Grade: Honors, Farrell, ML, Cosimi, AB. Management of renal allograft recipient immunosuppressive protocols for long-term success. *Clin Transpl* 1994; 8: 34-39.
33. Thadhani, RI, Camargo, CA, Xavier, RJ, Fang, LS, Bazari, H. Atheroembolic renal failure after invasive procedures. *Medicine* 1995; 74: 350-8.
34. Rieumont, MJ, Kaufman, JA, Geller, SC, Yurcel, EK, Cambria, RP, Fang, LS, Bazari, H, Waltman, AC. Evaluation of renal artery stenosis with dynamic gadolinium enhanced magnetic resonance angiography. *A J Rad* 1997; 169:39-44
35. Fang, LST. SARS and the dentist. *Dentistry Today* 2004; 22: 14-16.

Reviews

1. Willis JS, Fang LST, Foster RF. The significance of membrane function in hibernation. In South FE, et al, eds. *Hibernation IV*. Amsterdam: Elsevier Publishing Company, 1972: 123-147.
2. Willis JS, Fang LST, Gitler c, et al. Perspectives on the role of membranes in hibernation and hypothermia. In South FE, et al, eds. *Hibernation IV*. Amsterdam: Elsevier Publishing Company, 1972: 281-288.
3. Fang LST.

Evaluation of hematuria
Evaluation of proteinuria
Approach to women with urinary tract infection
Approach to patient with nephrolithiasis
Management of chronic renal failure

In Goroll A, May LA, Mulley AG, eds. Primary Care Medicine, Philadelphia, Lippincott, 1981.

4. Fang LST.
Placement and care of peritoneal catheter
Electrolyte management
Acute renal failure
Peritoneal dialysis
Hemodialysis
Diuretic therapy
Hepatorenal syndrome

In Rippe JM and Csete ME, eds. Manual of Intensive Care Medicine, Boston, Little, Brown and Company, 1983.

5. Fang LST.
Fluid and electrolyte disorders
Acute renal failure
Chronic renal failure

In Walsh, ET, eds. Manual of Geriatric Medicine, Boston, Little, Brown and Company, 1983

6. Coggins CH, Fang LST. Nephrotoxicity of antibiotic, anesthetics and contrast agents.

In Brenner BM, Lazarus M, eds. Acute Renal Failure, WB Saunders, New York, 1983.

7. Fang LST.
Evaluation of hematuria
Evaluation of proteinuria
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Management of chronic renal failure

In Goroll A, May LA, Mulley, AG eds. Primary Care Medicine. Second Edition, Philadelphia, Lippincott, 1987.

8. Fang LST.
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Electrolyte management
Acute renal failure
Peritoneal dialysis
Hemodialysis
Diuretic therapy
Hepatorenal syndrome

In Rippe JM, ed. Manual of Intensive Care Unit Medicine. Second Edition, Boston, Little, Brown and Company, 1988.

9. Coggins CH, Fang LST. Acute renal failure associated with antibiotics, anesthetic agents and radiographic contrast agents. In Brenner, BM, Lazarus, M, eds. Acute Renal Failure. Second Edition, Churchill Livingstone, New York, 1988, 295-352.
10. Colvin RB, Fang LST. Interstitial Nephritis. In Tischer CC, ed. Renal Pathology, Philadelphia, Lippincott, 1988, 659-720.
11. Fang LST.
Management of acute renal failure

Therapy for specific forms of acute renal failure
Management of patients with chronic renal failure
Drug therapy in patients with renal insufficiency
Nephrolithiasis
The nephrotic syndrome
Renovascular hypertension
Renal manifestations of systemic diseases
Renal transplantation

In Larson EB, Ramsey PG, eds. Medical Therapeutics, Philadelphia, WB Saunders, 1989, 183-227.

12. Colvin RB, Fang LST. Interstitial Nephritis. In Tischer CC, ed. Renal Pathology, Second Edition, Philadelphia, Lippincott, 1993.

13. Fang LST.
Management of acute renal failure
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In Larson EB, Ramsey PG, eds. Medical Therapeutics, Second Edition, Philadelphia, WB Saunders, 1993.

14. Fang LST.
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15. Fang LST.
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16. Fang, LST.
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In Goroll, A, May, LA, Mulley, AG eds. Primary Care Medicine, Philadelphia, Lippincott, 2004

17. Fang, LST.
Evaluation of hematuria
Approach to women with urinary tract infection
Approach to patient with nephrolithiasis

In Goroll, A, May, LA, Mulley, AG eds. Primary Care Medicine, Philadelphia, Lippincott, 2004

Manuals and Textbooks

1. Fang LST. Manual of Clinical Nephrology. McGraw-Hill, New York, 1982.
 2. Sonis ST, Fazio RC, Fang LST. Principles and Practice of Oral Medicine. WB Saunders, Philadelphia, 1984.
 3. Sonis ST, Fazio RC, Fang LST. Principles and Practice of Oral Medicine. Second Edition. WB Saunders, Philadelphia, 1994.
 4. Sonis, ST, Fazio, RC, Fang, LST. Principles and Practice of Oral Medicine. Third Edition. WB Saunders, Philadelphia, in preparation
 5. Sonis, ST, Fazio, RC, Fang LST. Oral Medicine Secrets. Hanley and Balsey, Philadelphia 2004.
 6. Fang, LST and Fazio, RC. Antibiotics in Dentistry. CE Magic 2004.
 7. Fang, LST, Fazio, RC and Menhall, T. Ultimate Cheatsheets: The Practical Guide for Dentists. UCS Boston 2006.
 8. Fang, LST, Fazio, RC and Menhall, T. Ultimate Cheatsheets: The Practical Guide for Dentists. Canada. UCS Boston, 2007, 2008, 2009
 9. Fang, LST and Menhall, T. Ultimate Drug Kit, Basic Kit for Medical Emergencies in the Dental Office. UCS Boston, 2007, 2008, 2009
 10. Fang, LST and Menhall, T. Ultimate Drug Kit, Advanced Kit for Medical Emergencies in the Dental Office. UCS Boston, 2007, 2008, 2009
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Jerome P. Wellbrock, D.M.D., MAGD, DDL

Northern Kentucky Dental Medicine, PLLC

15 W. Southern Ave

P.O. Box 15130

Covington, Kentucky 41015

docjpw@fuse.net

859-491-1226 Office

Avocations:

Martial Arts Expert, carpenter, reading science journals, volunteer firefighter

Education:

1980 Doctorate Dental Medicine, University of Louisville School of Dentistry

1974 B.S. Biology, Northern Kentucky State College (now Northern Kentucky University)

Postdoctoral Training:

2010 University of Kentucky College of Dentistry
Parenteral IV Sedation in Dentistry, Program Completed Jan. 2010 to May 2010

2009 Certificate of Participation University of Medicine & Dentistry of New Jersey
Update in Orofacial Pain

2008 Certificate of Completion, University of Kentucky College of Dentistry
An Advanced and Comprehensive Program on Temporomandibular Disorders
and Orofacial Pain

Licensure and Certification:

Current BLS/AED for Medical Professionals

Current AHA ACLS

2010 - Present Anesthesia Permit in Kentucky Moderate Parenteral

1980 - Present Licensed to practice Dentistry in Kentucky

Faculty:

2019 – Present Idaho State University School of Dental Science GPR Affiliate Faculty

2016 – Present Oregon Health Science University Affiliate Faculty

2016 – Present DOCS Education IV Sedation Faculty

2013 – Present Dental Organization for Continuing Sedation Education (DOCS)

Study Clubs:

Past President L.D. Pankey Study Club of Kentucky

Associations:

Academy of General Dentistry

American Dental Association

American Dental Society of Anesthesiology

International Federation of Dental Anesthesiology Society

DOCS Education

Donated Dental Services

Past President, Northern Kentucky Dental Society 1991-1992, 1995-1996

Past Vice-President Kentucky Dental Association

Past Board Member Kentucky Academy of General Dentistry

Awards & Recognition:

- 2016 DOCS, Dental Organization for Continuing Sedation Education
Diplomate and Luminary Award
- 2013 Academy of General Dentistry, Life-Long Service Recognition Award
- 2001 Masters Academy of General Dentistry 8-4-01
- 1998 Kentucky Dental Association, Fellowship Award
- 1996 Fellowship American College of Dentistry 9-27-96
- 1993 Fellowship Academy of General Dentistry

Community Service:

- 1993-1995 Past President, Director Emeritus, Rosedale Manor Nursing Home, Active Board Member 15 years
- 1980–Present Founding Member Northern Kentucky State College Alumni Association now Northern Kentucky University
- 1984-1985 Founding Member of the Latonia Business Association, Past President
Volunteer/Professional Firefighter/EMT (7 years) Taylor Mill Fire Department
Volunteered – Northern Kentucky Medical Reserve Corp.

Professional Experience:

- 2013-Present Speaker, and Educator on Dental Topics
- 1980-Present Private Practice

Positions Held:

- 2013-Present DOCS Education Forum Moderator
- 2013-Present DOCS Education Faculty

Media Interviews:

- 2013-Present Contributor to The Incisor Newsletter

Associations:

- Academy of General Dentistry
- American Dental Association
- American Dental Society of Anesthesiology
- International Federation of Dental Anesthesiology Society
- DOCS Education
- Donated Dental Services
- Past President, Northern Kentucky Dental Society 1991-1992, 1995-1996
- Past Vice-President Kentucky Dental Association
- Past Board Member Kentucky Academy of General Dentistry

Clinics and Courses Presented to Universities or Professional Organizations:

- August 2019 Oral Sedation Recertification
Memphis, TN
- August 2019 IV Sedation Recertification
Memphis, TN
- August 2019 Master Series: Advanced Sedation
Memphis, TN
- August 2019 Airway Management Hands-on Program
Memphis, TN

July 2019	IV Sedation Certification Lexington, KY
June 2019	IV Sedation Certification Lexington, KY
May 2019	Oral Sedation Recertification Arlington, VA
May 2019	IV Sedation Recertification Arlington, VA
May 2019	Master Series: Advanced Sedation Arlington, VA
May 2019	Airway Management Hands-on Program Arlington, VA
May 2019	IV Sedation Certification Lexington, KY
April 2019	IV Sedation Certification Lexington, KY
February 2019	Oral Sedation Recertification San Diego, CA
February 2019	Master Series: Advanced Sedation San Diego, CA
February 2019	Airway Management Hands-on Program San Diego, CA
November 2018	Oral Sedation Recertification Scottsdale, AZ
November 2018	Master Series: Advanced Sedation Scottsdale, AZ
November 2018	Airway Management Hands-on Program Scottsdale, AZ
September 2018	IV Sedation Certification Lexington, KY
August 2018	Oral Sedation Recertification Atlanta, GA
August 2018	IV Sedation Recertification Atlanta, GA
August 2018	Master Series: Advanced Sedation Atlanta, GA
August 2018	Airway Management Hands-on Program Atlanta, GA
May 2018	Oral Sedation Recertification Chicago, IL
May 2018	IV Sedation Recertification Chicago, IL
May 2018	Master Series: Advanced Sedation Chicago, IL
May 2018	Airway Management Hands-on Program Chicago, IL
February 2018	Oral Sedation Recertification San Francisco, CA
February 2018	Master Series: Advanced Sedation San Francisco, CA

February 2018	Airway Management Hands-on Program San Francisco, CA
November 2017	Oral Sedation Recertification Bellevue, WA
November 2017	Master Series: Advanced Sedation Bellevue, WA
November 2017	Airway Management Hands-on Program Bellevue, WA
August 2017	Oral Sedation Recertification Memphis, TN
August 2017	IV Sedation Recertification Memphis, TN
August 2017	Master Series: Advanced Sedation Memphis, TN
August 2017	Airway Management Hands-on Program Memphis, TN
July 2017	IV Sedation Certification OSHU
May 2017	Oral Sedation Recertification Reston, VA
May 2017	IV Sedation Recertification Reston, VA
May 2017	Master Series: Advanced Sedation Reston, VA
May 2017	Airway Management Hands-on Program Reston, VA
February 2017	Oral Sedation Recertification Newport Beach, CA
February 2017	Master Series: Advanced Sedation Newport Beach, CA
February 2017	Airway Management Hands-on Program Newport Beach, CA

Dr. Wellbrock has presented dozens of courses between 2013 and 2020. For a full list, ask DOCS Education.





CAROL A. WILSON, DMD

527 Wellington Way, Ste.120

Lexington, KY 40503

859.223.4644

carolwilsondmd@yahoo.com

Education:

2006

DMD University of Kentucky College of Dentistry

With Distinction- Top 20% of Class, GPA 3.81

2002

Morehead State University

Summa Cum Laude, GPA 4.0

Postdoctoral Training:

Externship

Oral and Maxillofacial Surgery, University of Kentucky

University of Kentucky College of Dentistry

Chandler Medical Center

Lexington, KY 40536

859.323.5749

Externship

Jack Lenihan, DMD

800 Violet Road

Crittenden, KY 41030

859.428.3100

2018

Rutkowski PRP/PRF Bone Grafting Training

2017

DOCS & OHSU IV Sedation Training

2017

SWAT- Patient Relation

2016

DOCS Conscious Oral Sedation Training

2016

OsteoReady Implant Mini Residency (Now Little Implant Company)

2016

Advanced Cardiac Life Support Certified

2015

Facially Generated Treatment Planning, Spear Institute Seminar

2015

Dental Bootcamp

2015

Cerec Three Dimensional Imaging and Milling

2014

Sybron Endodontic Hands on Course

2010

Brasseler Endodontic Hands on Course

2006

Maintain CE for each renewal cycle courses include OSA, practice management, restorative dentistry, restoring the worn dentition, Implant restoration, OSHA and HIPPA compliance.

Licensure & Certification:

2006 - Present	Licensed to Practice Dentistry in Kentucky
2006 - Present	DEA Licensed
2006 - Present	Basic Life Support
2010	Dental Expert Witness - Nicholasville, KY
2006 - Present	Advanced Cardiac Life Support
2006 - Present	Anesthesia Permit in Kentucky - Moderate Parenteral

Faculty:

2019 - Present	DOCS Education IV Sedation Clinical Instructor
2018 - Present	Associate Clinical Instructor, Little Implant Company
2006 - 2007	Part time Prosthodontic Clinical Instructor, UKCD

Associations:

2002 - 2006	American Student Dental Association
2002 - 2006	American Association of Women Dentists
2006 - 2008	American Dental Association
2006 - 2008	Kentucky Dental Association
2006 - 2007	Lexington Dental Implant Society

Study Clubs:

2015 - Present	Spear Study Club
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Awards & Recognitions:

2006	Excellence in Prosthodontics
2006	Outstanding Radiology Student
2006	Omicron Kappa Upsilon Dental Honor Society
2004	Susan McEvoy Scholarship
2003 - 2006	Dean's Scholarship
2001 - 2002	Phi Kappa Phi Honoree and Scholarship Recipient
2001	Cardinal Key Inductee
2000	Harrison Electric Cooperative Scholarship
2000	General Human Science Scholarship
1999 - 2002	Presidential Scholarship, Governor's Scholar
1999 - 2002	Academic Honor's Scholarship

Institutional Committees:

2005 - Present	Associate Member of the UKCD Admissions Committee
2015 - 2016	Brookside Elementary Site Based Decision Making Council
2013 - 2014	President Jessamine Early Learning Village PTO
2004 - 2006	President American Association of Women Dentists
2004 - 2006	UKCD Student Clinical Advisory Committee
2004 - 2006	Voting Member of UKCD Admissions Committee
2003	Physiology Review Committee, Dental School Member
2002 - 2009	Professional Education Preparation Program (PEPP) Dental Experiential Coordinator
2000 - 2002	Baptist Student Union Council Member.
2000 - 2002	Student Alumni Ambassador, Secretary

National Presentations:

2000	"Application of Plato's 'Capital Ideas'", National Honors Conference, Washington, D.C
2000	"Euthanasia", National Honors Conference, Washington, D.C

Presentations To Predoctoral Students:

2007	Authored Prosthodontic Unit Exam, UKCD
2001	"Food Mythology, Food Symbolism, and the Manipulation of the American Consumer, Honor's Round Table
2001	"Beauty and Aesthetic Quality", Honor's Round Table

Media Content:

2019	Created YouTube Videos to Assist Participating Dentists in the DOCS IV Sedation Curriculum with record keeping and EKG Monitoring
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Professional Experience:

2016 - Present	Associate Dentist, Dental Wellness of Lexington
2017 - 2019	Locum Tenen Dentist, Dentistry for Today
2015 - 2017	Locum Tenen Dentist, Susan Couzens, DMD
2014 - 2016	Associate Dentist, Immediadent
2010 - 2014	Owner, Jessamine Dental
2009 - 2010	Locum Tenen Dentist, Malcom Miracle, DMD, Jessamine Dental
2006 - 2007	Part Time Faculty Member of Prosthodontics, UKCD
2006 - 2009	Associate Dentist, Jack Lenihan, DMD

Clinics & Courses Presented:

May 2018	IV Sedation Clinical Instruction for DOCS/OHSU Course
September 2018	IV Sedation Clinical Instruction for DOCS/OHSU Course
January 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course
April 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course
May 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course
June 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course
July 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course
September 2019	IV Sedation Clinical Instruction for DOCS/OHSU Course

Community Service:

2017 - Present	Associate Dentist, Dental Wellness of Lexington
2018, 2019	Volunteer at Smiles From the Heart, Bowling Green, KY
2017	Volunteer at Gift of Smiles, Lexington, KY
2016 - 2017	YMCA Assistant Soccer Coach
2015 - 2016	Council of Councils Site Based Council Jessamine County
2013 - 2014	Southland Christian Church Weekend Story Teller Youth

Ministry:

2012	Refuge Clinic
2013	Volunteer at Smiles From the Heart, Bowling Green, KY
2012, 2015	Presentation on Oral Health, Brookside Elementary
2007	YMCA Assistant Soccer Coach
2006 - 2011	Southland Christian Church "The Zone" Ministry
2004 - 2005	Sealant Project at Kentucky State Fair
2005	University of Kentucky Summer Dental Camp Counselor
2003, 2016	Jesus Prom
2002 - 2006, 2018	University of Kentucky College of Dentistry Fall Open House
2003 - 2005	Race for the Cure
2003	God's Pantry
2002, 2006	Saturday Morning Clinic

Private Practice

Phoenix Arizona General Dentist since June, 1989, concentrating on Full Mouth Reconstruction with an emphasis on Reconstructive and Cosmetic Dentistry.

Post-Doctorate Training

CAD/CAM Advanced Training – 2009

Advanced Laser Training for Diode, Erbium, Chromium, Yttrium, Scandium, Gallium, Garnett lasers

Dentrix Approved Beta Testing – 2005

ACLS Certified since 2013

Over 3,500 hours of continuing education since 1989 including: implants, advanced removable and fixed prosthetics, treatment planning, diagnosis, radiographs, CBCT scans, operative dentistry, dental management, OSHA training, sedation dentistry, and sleep apnea.

Home Address

104 Kenton Court

Nicholasville, KY 40356

859.492.2735

carolwilsondmd@yahoo.com





JAMES BOVIA, VP OF EDUCATION

Life Support Services, Inc.
4343 Concourse Dr, Ste. 300
Ann Arbor, MI 48108
(734) 973-9320
jamesbovia@gmail.com

Objective:

It is Jim's objective to enhance the ability of primary care physicians and dentists to deliver effective emergency treatment when presented with the rare occurrence until EMS arrives.

Employment:

1995-Present	Vice President – Life Support Services, Inc. Oversees the annual training of 16,000 medical professionals in Basic Life Support, Advanced Cardiac Life Support, Pediatric Advanced Life Support, and trauma management.
1994-2000 2004-2015	Paramedic – Huron Valley Ambulance.
2000-2004	Emergency room technician - University of Michigan Hospital .
1989-1994	Basic EMT Washtenaw county jail medical unit .
1989-1994	Fire fighter Sumpter twp fire fighter.

University of Michigan Emergency Department

Education:

1985	Lincoln High school
1988 - 1992	Life Support Services Inc. EMT and Paramedic training.

Consultant in Pre-Hospital Care and Acute Intervention:

2016 - Current	Lincoln High school
2010 - Current	Life Support Services Inc. EMT and Paramedic training.

Program Development:


2015	Designed an Emergency Management Course for Dentists incorporating advanced airway maneuvers.
2007	Customized the American Heart Association's Advanced Cardiac Life Support to fit the challenges of the free standing Dental office.

Has Provided Emergency Medical Training to the following organizations:

- Berry Center LLC
- Blake Woods Surgery Center
- Bloomfield Children's Dentistry
- Fred Bonine, DDS, Brighton, MI
- Cardiology & Vascular Associates
- Central Michigan Community Hospital
- Central Michigan University
- Chelsea Community Hospital
- Dental Organization for Conscious Sedation
- Eaton Rapids Medical Center
- Anthony Feck, DDS Lexington, KY
- Great Lakes Heart & Vascular Institute
- Harbor Beach Medical Center
- Henry Ford Hospital
- Independent Anesthesia
- Ingham Regional Medical Center Emergency Department
- LaRabida Children's Hospital
- NorthWest Anesthesia Seminars
- Oakwood Healthcare System
- Orthopedic Associates
- St Joes Mercy Livingston Hospital, Ann Arbor, Livingston, Pontiac, MI
- Government of Turks & Caicos
- University of Michigan Health Systems
- UnaSource Surgery Center
- VA Healthcare System
- Woods Mill Anesthesia

Home Address:

2178 Cobblestone Creek Dr.
Pinckney, MI 48169
(734) 368-3248





South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.

If a completed form is not returned by the date above, your course cannot be approved.

Course Title: _____

Course Sponsor: _____

Name of person submitting information: _____

Email address: _____ Phone: _____

Title: _____ Date: _____

Course Director:

Name: _____ License Number and State: _____

Email: _____ Phone: _____

Name of the facility where the course is presented: _____

Location: _____

Course is presented at a: Dental Office Dental School Surgical Center
 Hospital Other: _____

Is the Course Sponsor AGD PACE or ADA CERP approved? Yes No

AGD PACE Provider Number: _____

ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? Yes No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).		
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.		
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.		
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.		
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>		
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.		
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.		
The course has a clinical participant-faculty ratio of not more than four-to-one.		
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.		
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.		
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.		

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: Randy Pigg Date: _____

Printed Name: _____



IV Moderate Sedation Training Program for Dentists

updated **14Jan21**

Course Description: This course is designed to prepare the general dentist to incorporate techniques in intravenous conscious sedation into their practices. The course will include demonstrations, lectures and an intensive clinical component. There will be a total of 60 hours devoted to lecture and 40 hours of live clinical rotation where the participant will be responsible for individually performing moderate sedation on at least 20 dental patients while supervised.

Prerequisites: The participant must hold a dental or medical degree, must be licensed to practice dentistry or medicine in a given state and have current malpractice insurance. Current BCLS certification must be obtained prior to the course. Participants are to meet all prerequisites prior to first meeting.

Course Structure:

- (1) The lecture and demonstration portion of this course will consist of 60 hours of instruction.
- (2) Hands on airway management and medical emergency lab must be completed prior to scheduling clinical component.
- (3) Following completion of the lecture/demonstration series, the participant will be scheduled for a clinical participation component at which time he/she will improve his/her IV sedation and venipuncture techniques. The Oral and Maxillofacial Surgery collaboration members and/or anesthesiologist will supervise all activities with a 2 student to 1 faculty member ratio.
During this residency, the clinician will perform a minimum of 20 IV individually administered sedation cases on dental patients (typically cases lasting an hour or less, ie. simple extractions, FMD etc... on phobic patients). Clinical locations are typically ambulatory surgery centers, oral surgery offices or locations that are currently utilizing parenteral moderate sedation and have been inspected by state dental board and permitted to provide such service.
- (4) At the completion of the lecture portion, the clinician will be required to successfully complete a written examination.
- (5) Advanced Cardiac Life Support (ACLS) training must be obtained prior to scheduling clinical rotation.
- (6) Assisting/Monitoring staff will be required to attend portions of the didactic and clinical training.

Course Objectives:

- To prepare the dentist to incorporate safe IV sedation administration into practice

- Properly access and obtain appropriate medical history and assessment of patients to determine suitability of moderate sedation
- Understand the regulations and requirements of state legislation / dental boards, to adhere to national standards and guidelines
- To explain and understand agonist-antagonist effects and pharmacokinetic properties of commonly used sedative agents
- To recognize and react to medical emergencies while providing leadership and direction to others involved in resuscitative efforts
- Manage the airway using basic and advanced equipment and techniques
- Effectively utilize current monitoring, pharmaceuticals and rescue equipment

CE Hours: Approximately 100 hours.



Conscious Sedation Consulting, LLC is an ADA CERP Recognized Provider. *ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.*



Conscious Sedation Consulting LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this provider are accepted by the AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from January 1, 2018 to December 31, 2019.

Conscious Sedation Consulting
14252 County Road 251
Salida, CO 81201
“Creating a culture of safety through education.”



IV Sedation Training Program for Dentists Curriculum

Times are approximate and schedules may need to be adjusted by faculty.

Day 1

0700-0730 Registration Completion & Introductions

0730-0830 Overview of program

- Goals of Sedation

- Standards

- Practice Guidelines

- Anesthesia Theory

0830-0930 Anesthesia History

0930-1145 The Continuum of Sedation

- Minimal

- Moderate

- Deep Sedation

- General Anesthesia

- Guedel's Stages of Anesthesia

- Analgesia

- Sedation

- Delirium; Excitement

- General Anesthesia: plane I, II, III & IV

- Respiratory depression; cardiac arrest

1145-1200 Review

1200-1300 Lunch with faculty. Questions & Answers

1300-1330 ASA Physical Status Classification System

1330-1530 Patient Assessment

- Medical History

- Cardiac

- Pulmonary

- Hepatic

- Renal

- Neurologic

- Endocrine

- Gastrointestinal

- Hematology

- Musculoskeletal

- Surgical History

- Medications

- Allergies

- Laboratory Data

- Dental/Oral/Airway

- Social History

- NPO Status

- Informed Consent(s)

ASA Physical Status

1530- 1630 Potential Problem Patients

- Obese
- GERD
- HTN
- Sleep apnea
- Aspiration Risk
- Difficult Airway
- Asthma
- COPD
- Diabetes
- Allergies
- Chronic pain
- Renal
- Steroids
- Adrenal
- Geriatric
- Peds

1630-1730 Key Medications to watch for

- Antihypertensives (*beta blocker, ACE inhibitor*)
- Cardiac meds
- Anticoagulants
- Diabetic medications
- Steroids
- Thyroid replacement
- Renal medications
- Allergy medications
- Inhalers/Other respiratory meds
- Herbals

Factors that affect protective reflexes

- Alcohol
- Antipsychotics
- Cardiac arrest
- Cerebrovascular accident
- Depression of consciousness
- Depression of gag, coughing, swallowing reflexes
- Drug overdose
- Extremes of age
- Head injury
- Neurologic diseases
- Neuromuscularly impaired reflexes
- Opioids
- Sedatives
- Seizures
- Severe hypotension
- Stress
- Trauma

1730-1800 Review

Day 2

0730-1100 IV Access (Part 1)- didactic

- Definitions
- Armamentaria needed to start an I.V
- Cleanliness, sterility, prevention of infection, and sterile technique
- Set up and position all armamentaria prior to catheter insertion
- Vein anatomy, vein insertion sites, challenging I.V. insertions
- Tourniquet etiquette and study of the appropriate vein
- Vein anatomy, vein insertion sites, challenging I.V. insertions
- Catheter Fastening
- How to remove an I.V. catheter and drip
- Proper disposal of infectious armamentaria and I.V. drips
- Possible complications related to I.V. insertion and removal
- Hypotension
- Treatment of hypotension
- I.V. Anesthesia Armamentaria Checklist
- Quick and Practical Catheter Insertion

1100-1200 IV Insertions Demonstrations

1200-1300 Lunch with faculty

1300-1430 Essentials of IV Fluids

- Introduction - The Importance of Fluids
- The Cell – the cell membrane; lipid bilayer, semi-permeable membrane
- The Cell Environment
- Solids and Liquids
- Blood and Plasma; the purposes of blood
- Osmosis
- Hypotonic and Isotonic Fluids
- Physiology of the Cardiovascular System
- Autonomic Effects
- Atherosclerosis Effects
- NPO Effects
- Temperature/Oxygen/Metabolism
- Common Types of Fluids for Dental Anesthesia/Fluid Administration/Armamentaria
- Fluid Therapy

1430-1630 IV Access (Part II) - clinical

- Gathering equipment
- Site Selection
- Site preparation
- Insertions on simulator
- Discontinue IV

1630-1800 Live IV insertions practice on humans

1800-1830 Review

Day 3

0730-1100 Essentials of Monitoring Sedated Patients

Definitions

The 6 Critical Vital Signs

Blood Pressure

Pulse

Respirations

Temperature

SpO2

EtCO2, Capnometry and Capnography

Rules of Good Patient Monitoring

Continuum of Depth of Sedation

Patient Requirements for Sedation

Facility and Equipment Requirements for Sedation

The Physiology and Importance of the Six Critical Patient Vital Signs

Abnormal Vital Signs, and Vital Signs of Concern

Electrocardiogram

Normal and Abnormal Dysrhythmia

Non-Mechanical and Mechanical Assessment of Patient Vital Signs

The Rules of Good Patient Monitoring

Discussion

Dental Office Emergency Protocols

1100-1200 Equipment Demonstrations / hands on clinical**1200-1300 Lunch with faculty****1300-1530 Essentials of The Airway**

The Mouth

Cormack-Lehane Classification

Mallampati Classification

The Three Pharynges

Soft Tissue of Larynx

Cartilage of the Larynx

Anatomy of the Trachea

Paratracheal Anatomy

Head & Neck Considerations

Range of Motion

Obtaining & Maintaining Airway

Emergency Cricothyrotomy

1530-1800 Skills Lab, Demonstrations & Practice

Obtain Airway utilizing simulator and hands on with multiple devices

Bag Mask Ventilation

Oral Airways

Nasal airways

Laryngeal Mask Airways

King Airways

Endotracheal Intubation

Emergency Cricothyrotomy

1800-1830 Review**Day 4**



0730-1200 Dental Office Medical Emergencies (part I)

- Basic life support skills, including effective chest compressions,
use of an AED

- Fundamentals of ACLS and Updates

- What to do?

- Respiratory Arrest
- Cardiac Arrest
- Laryngospasm
- Bronchospasm
- Aspiration
- Obstructed Airway
- Allergic Reactions
- Seizures
- MI
- Intra-arterial Injections
- Hyper / Hypotension
- Hyper / Hypo Ventilation

1200-1300 Lunch

1300-1630 Dental Office Emergencies (part II)

- Related pharmacology

- Management of acute coronary syndromes (ACS) and stroke

- Effective communication as a member and leader of a resuscitation team

- Effective Resuscitation Team Dynamics

- Necessary Equipment

- Back Up & Redundant Systems

- Power Source / Batteries

- Oxygen

- Lighting

- Suction

- Manual Monitoring Devices

- Accessibility and Evacuation

- Setting up Mock Codes & Drills in the Office for Staff Training

- Documentation

- History

- Medical

- Surgery

- Anesthesia

- Allergies

- Sedation Related Forms

- Consent

- Intra-procedure record keeping

- Time; synchronized

- Vital signs

- Medications

- Patient Response

- Level of Consciousness



- Procedure Documentation
 - Complications
 - Continued Assessment
- Discharge Instructions
- Follow Up
- Adverse Event Reporting
- Signature of Pre-sedation Evaluator and Date/Time

1630-1700 Review

1700-1800 IV Skills Lab Practice - Live Humans

Day 5

0730-1200 Pharmacology & Pharmacokinetics

- Routes of Administration

- Inhalational

- Enteral

- Intranasal

- IM

- Parenteral

- IO

- Common Sedatives

- Nitrous Oxide

- Benzos

- Narcotics

- Antihistamines

- Hypnotics

- Synergistic Effects

- Reversal Agents

- Flumazenil

- Naloxone

- Time

- Emergency Medications

- Phenylephrine

- Albuterol

- Morphine

- Aspirin

- Nitroglycerin

- Sugar/Glucose

- Diphenhydramine

- Oxygen

- Atropine

- Ephedrine

- Epinephrine

- Vasopressin

- Dexamethasone

- Solu-Cortef

- Methylprednisolone

- Diazepam

- Midazolam



Succinylcholine
Lidocaine
Anti-Nausea/ Anti-Emetics

Ondansetron
Famotidine
Ranitidine
Metoclopramide
Dexamethasone

1200-1300 Lunch
1300-1330 Local Anesthetic Review
 Effective Local Decreases Need for Global Sedation
1330-1530 Nitrous Oxide
 How NO2 can help your sedation regimen
1530-1600 Pre-medications
 Synergism
1630-1730 Issues with Enteral Sedation Techniques
1730-1800 Review

Day 6

0730-1130 Sedation Regulations & Legal Considerations
 State Boards
 Requirements
 Training
 Equipment
 Staff
 Preparing for Inspection
 Continuing Education
 Continue Learning
 Facility Evaluation and Preparation
 Accreditation
 Malpractice Coverage
 Marketing
1130-1200 Review
1200-1300 Lunch with Staff
1300-1500 Clinical Judgment Game
 Case Presentations
 What would you do and why?
 Sedation case videos
 Resuscitation videos
1500-1700 Putting It All Together
 Final Q&A and Review
1700-1830 Testing

Day 7

0730-1230 Clinic
1230-1300 Lunch



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1300-1630 Clinic
1630-1730 Case Discussion & Review

Day 8

0730-1230 Clinic
1230-1300 Lunch
1300-1730 Clinic
1730-1830 Case Discussion & Review

Day 9

0730-1230 Clinic
1230-1300 Lunch
1300-1730 Clinic
1730-1830 Case Discussion & Review

Day 10

0730-1230 Clinic
1230-1300 Lunch
1300-1530 Clinic
1530-1700 Case Discussion & Final Examination

RANDY PIGG BSN

14252 County Road 251 Salida, CO 81201
PHONE 888 - 581 - 4448 • E-MAIL RANDY@SEDATIONCONSULTING.COM

EDUCATION

1982 - Lone Oak High School, Paducah, KY

- ☐ Diploma

1982-84 University of Kentucky, Lexington, KY

- ☐ Undergraduate Studies

1989-91 United States Army. Ft. Knox, KY, Ft. Sam Houston, San Antonio TX, Ft. Polk, Leesville, LA

- ☐ Combat Medic Training
- ☐ Emergency Medical Technician
- ☐ Expert Field Medical Badge

1991-93 Barnes College of Nursing at Washington University Medical Center, St. Louis, MO.

- ☐ Baccalaureate of Science in Nursing

WORK EXPERIENCE

1992-02 Barnes Jewish Hospital at Washington University Medical Center, St. Louis, MO

- ☐ Patient Care Technician
- ☐ Registered Nurse, Neurology Unit
- ☐ Registered Nurse, Emergency Department, Level I Trauma Center
- ☐ Night Shift Charge Nurse

2002-06 St. Joseph Hospital West, Lake St. Louis, MO

- Registered Nurse, Emergency Department, Level II Trauma Center

2006 – Present, Conscious Sedation Consulting LLC

- ☐ Founder & Chief Executive Officer

TRAINING / ASSOCIATIONS

1989 – Present, Basic Life Support Certified

1992 – Present, Advanced Cardiac Life Support Certified

1993 – Present, Trauma Nurse Core Curriculum Certified

1993 – Present, Member Emergency Nurses Association

2006 – Present; Founder and CEO of Conscious Sedation Consulting;
Provides hands on training for physicians, dentists, nurses and dental
assistants on intravenous access, medical emergency management and
airway management techniques nationally.

2008 - Present, Member American Society of Dental Anesthesiology

2010 - Present, Member Society of Ambulatory Anesthesia by the American Society
of Anesthesiologists

Steven F. Woodring, DO

Board Certified Anesthesiologist

EXPERIENCE

President & CEO, Mobile Anesthesiologists of Florida, Inc., Naples, FL, 2010-present

- Provide turnkey anesthesia and recovery services to office-based surgical practices

Attending Anesthesiologist, Anesthesia and Pain Consultants of Southwest Florida, MD, PA, 2010-present

- Provide general anesthesia services for Gulf Coast Medical Center and several ambulatory surgical centers

Attending Anesthesiologist, Anesthesia Providers Unlimited, LLC, 2009-present

- Provide general anesthesia services for Lehigh Regional Medical Center and Bonita Community Medical Center

Attending Anesthesiologist, Anesthesia Associates of Naples, PC, 2007-2009

- Major vascular, peds, OB/gyn, ortho, general cases for Physicians Regional Medical Center

EDUCATION

Anesthesiology Resident, Case Western Reserve University – MetroHealth, Cleveland, OH, 2004-2007

- Level 1 trauma and burn center, level 3 NICU, high risk OB

Traditional Intern, OUCOM – Cuyahoga Falls General Hospital, Cuyahoga Falls, OH, 2003-2004

Doctor of Osteopathic Medicine, Kirksville College of Osteopathic Medicine, Kirksville, MO, 1999-2003

Post-Baccalaureate Studies, Neuroscience/Premed, University of Pittsburgh, Pittsburgh, PA, 1994-1997

Bachelor of Science, Psychology, Penn State Erie, The Behrend College, 1987-1991

PROFESSIONAL AFFILIATIONS

American Society of Anesthesiologists, member, 2004-present

Florida Society of Anesthesiologists, member, 2007-present

American Society of Regional Anesthesia and Pain Medicine, member, 2006-present

Society for Ambulatory Anesthesia, member, 2010-present

RESEARCH EXPERIENCE

Research Specialist, Cardiovascular Health Study, University of Pittsburgh, Pittsburgh, PA, 1999

- Assisted with obtaining medical and psychosocial data from study participants

Research Specialist, Physiology, University of Arizona, Tucson, AZ, 1997-1998

- Designed and managed lab facilities, including computer network and equipment fabrication
- Assisted with microneurographical and muscle fatigue studies

Research Specialist II, Otolaryngology, University of Pittsburgh, Pittsburgh, PA, 1996-1997

- Assisted with vestibular studies, performed large animal surgical preparations
- Presented poster at *Society for Neuroscience 26th Annual Meeting*, 1996

Research Assistant, Neuropsychology, University of Pittsburgh, Pittsburgh, PA, 1994-1995

- Investigated moderating factors between alcohol/drug use and HIV risk
- Presented poster at *American Psychological Association Conference* 1995



South Dakota State Board of Dentistry

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Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.

If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Moderate Sedation Certification Course

Course Sponsor: Dentinomics

Name of person submitting information: Kevin Croft

Email address: dentonomics@gmail.com Phone: 801-477-5337

Title: President Date: 4/8/2022

Course Director:

Name: Kevin Croft License Number and State: SD, D1176

Email: dentonomics@gmail.com Phone: 8014775337

Name of the facility where the course is presented: Pearl Dental

Location: Utah

Course is presented at a: ☒ Dental Office ☐ Dental School ☐ Surgical Center
☐ Hospital ☐ Other: _____

Is the Course Sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

AGD PACE Provider Number: 365390


ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03.		
Please verify by checking each statement below:	YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature:  Date: 4/8/2022

Printed Name: Kevin Croft, DDS

Overview of Moderate Sedation Course Content

Course Director:

Kevin Croft DDS

Diplomat-American Dental Board of Anesthesiology

Director of Dental Anesthesiology-International Post-Graduate Medical College

Site Inspector Postdoctoral General Dentistry-Commission on Dental Accreditation (CODA)

Clinical Assistant Professor-University of Utah

President-Dentinomics: Cutting-Edge Continuing Education for Cutting-Edge Dental Providers

President-DDSleep: Anesthesia for the Ambulatory Setting

801-477-5337 (office), 801-970-4371 (cell), dr.croft.dds@gmail.com

As course director I hereby certify the following:

This course provides a minimum of 60 hours of instruction and management of at least 20 patients by the intravenous route. Each participant of our most recent course received 75 hours of instruction and managed 22-25 patients each.

Participants are afforded sufficient clinical experience to enable them to achieve competency. This experience is provided under the supervision of qualified faculty (dentist anesthesiologists, oral surgeons, moderate sedation-licensed dentists, nurses, etc.) with continual evaluation of participants throughout. The course director certifies the competency of participants upon satisfactory completion of training in each sedation technique, including instruction, clinical experience and airway management. Records of the didactic instruction and clinical experience, including the number of patients managed by each participant in each anxiety and pain control modality are maintained. A 3-1 faculty-participant ratio is strictly adhered to and often a 2-1 or 1-1 ratio is utilized. Faculty have at least three years of experience, including formal postdoctoral training in anxiety and pain control. All participants are provided with course & instructor feedback forms and are encouraged to evaluate the performance of all individuals who present the course material.

The facility where these courses are provided meet the standards appropriate for proper patient care, including stocking drugs and equipment for the management of emergencies. The course provides hands-on and didactic instruction and experience in managing compromised airways and emergencies. Extensive focus on airway management is a central component of this course. All patients are healthy adults. It is intended that successful completion of this course will result in clinical competency in moderate parenteral sedation in all states. In the event that participants do not achieve the desired competency, they are required to return for additional clinical experience prior to being granted a letter documenting successful course completion.

The goals, objectives, & clinical instruction have been designed to meet/exceed those outlined in the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," as follows:

Course Objectives: In order to be considered as having successfully completed our moderate sedation courses, participants must be able to:

1. List and discuss the advantages and disadvantages of moderate sedation.
2. Discuss the prevention, recognition and management of complications associated with moderate sedation.
3. Administer moderate sedation to patients in a clinical setting in a safe and effective manner.
4. Discuss the abuse potential, occupational hazards and other untoward effects of the agents utilized to achieve moderate sedation.
5. Describe and demonstrate the technique of intravenous access, intramuscular injection and other parenteral techniques.

6. Discuss the pharmacology of the drug(s) selected for administration.
7. Discuss the precautions, indications, contraindications and adverse reactions associated with the drug(s) selected.
8. Administer the selected drug(s) to dental patients in a clinical setting in a safe and effective manner.
9. List the complications associated with techniques of moderate sedation.
10. Describe a protocol for management of emergencies in the dental office and list and discuss the emergency drugs and equipment required for the prevention and management of emergency situations.
11. Discuss principles of advanced cardiac life support or an appropriate dental sedation/ anesthesia emergency course equivalent.
12. Demonstrate the ability to manage emergency situations.

Course Content:

1. Historical, philosophical and psychological aspects of anxiety and pain control.
2. Patient evaluation and selection through review of medical history taking, physical diagnosis and psychological considerations.
3. Definitions and descriptions of physiological and psychological aspects of anxiety and pain.
4. Description of the sedation anesthesia continuum, with special emphasis on the distinction between the conscious and the unconscious state.
5. Review of pediatric and adult respiratory and circulatory physiology and related anatomy.
6. Pharmacology of local anesthetics and agents used in moderate sedation, including drug interactions and contraindications.
7. Indications and contraindications for use of moderate sedation.
8. Review of dental procedures possible under moderate sedation.
9. Patient monitoring using observation and monitoring equipment, with particular attention to vital signs and reflexes related to consciousness.
10. Maintaining proper records with accurate chart entries recording medical history, physical examination, informed consent, time-oriented anesthesia record, including the names of all drugs administered including local anesthetics, doses, and monitored physiological parameters.
11. Instruction on treatment planning with patients in order to be able to obtain true informed consent, proper marketing, and interfacing with the insurance industry.
12. Prevention, recognition and management of complications and emergencies.
13. Description and use of moderate sedation monitors and equipment.
14. Discussion of abuse potential.
15. Intravenous access: anatomy, equipment and technique.
16. Prevention, recognition and management of complications of venipuncture and other parenteral techniques.
17. Description and rationale for the technique to be employed.
18. Prevention, recognition and management of systemic complications of moderate sedation, with particular attention to airway maintenance and support of the respiratory and cardiovascular systems.

CURRICULUM VITAE

November 2018

Name Kevin Croft, D.D.S.

President
DDSleep: Ambulatory Anesthesia Services

Positions Dean
Institute for the Management of Pain and Anxiety

Director at Large
American Society of Dentist Anesthesiologists

President
Dentinomics: Cutting-Edge CE for Cutting-Edge Dental Professionals

Founder & Executive Director Caring International Nonprofit

Faculty
University of Nevada Las Vegas School of Dental Medicine

Address P.O. Box 522354
Salt Lake City, Utah, 84152

Phone 801-477-5337 (o)
801-970-4371 (c)
dr.croft.dds@gmail.com

Education

2013 **American Dental Board of Anesthesiology-Diplomate**

2012 **Advanced Education in Dental Anesthesiology**, State University of New York-Stony Brook University Medical Center. Accredited by the Commission on Dental Accreditation.

2010 **DDS (Doctor of Dental Surgery)**, State University of New York-Stony Brook School of Dental Medicine. Top 10 in graduating class.

2006 **BS Psychology**, University of Utah. **Magna Cum Laude**, 3.8/4.0 GPA
Diploma-Highland High School, top 8% of graduating class

EMPLOYMENT HISTORY

2017 – present	Dean, Institute for the Management of Pain and Anxiety
2017 – present	Executive director, Caring International Nonprofit: Providing dental grants for populations in need. (www.caringinternational.com)
2017 – present	Faculty, University of Nevada Las Vegas School of Dental Medicine
2017 – present	Adjunct faculty, Weber State University Department of Dental Hygiene
2015 – present	President, Dentinomics: Cutting-edge continuing education for dentists, physicians and other healthcare professionals.
2015 - 2017	Director of Anesthesiology, International Post-Graduate Medical College, Montego Bay, Jamaica
2014 – 2017	Clinical Assistant Professor, University of Utah School of Dentistry
2012 – present	President, DDSleep: Pain and anxiety management services for patients across the spectrum of medical complexity, with emphasis on outpatient general anesthesia and sedation.
2005-2006	Course Instructor, Dental Admissions Test Prep, Kaplan Inc.

Licensure

2018-present	State of Massachusetts dental license & general anesthesia permit (pending)
2018-present	State of New Hampshire dental license & general anesthesia permit (pending)
2018-present	State of Mississippi dental license & general anesthesia permit
2017-present	State of Colorado dental license & general anesthesia permit
2017-present	State of South Dakota dental license & general anesthesia permit
2017-present	State of Nevada dental license & general anesthesia permit
2017-present	State of Virginia dental license & general anesthesia permit
2016-present	State of Alaska dental license & general anesthesia permit
2012-present	State of Utah dental license & general anesthesia permit

Professional Associations

2017-present	Pierre Fauchard Academy
2010-present	American Society of Dental Anesthesiology
2016-present	Society for Head and Neck Anesthesia
2014-2016	Society for Ambulatory Anesthesia member
2012-present	Utah Dental Association, Salt Lake District board member
2008-present	International Association of Student Clinicians member
2008-2010	International Association for Dental Research member
2008-2010	American Association for Dental Research member
2008-2010	International Assoc. for Dental Research Dental Anes. Group member
2008-2010	International Assoc. for Dental Research Network for Practice-based Research member
2008-2010	International Association for Dental Research Pharmacology, Therapeutics, & Toxicology Group member
2006-present	American Dental Association member
2006-2010	American Student Dental Association member

AWARDS & HONORS

2017	Inductee-Pierre Fauchard Academy
2010	Pioneer in Dentistry Award, Significantly advancing curriculum, academic standards and opportunities at the SUNY-SB School of Dental Medicine (emphasis in pain and anxiety management)
2008	International Association of Student Researchers inductee
2008	ADA Student Clinician Award for excellence in research
2008-2010	Team Leader for the research project Monitoring Alveolar Bone Loss Through Digital Subtraction, SUNY-Stony Brook SDM of Dental Medicine
2008	Evidence Based Dentistry and Critical Thinking I team leader

2008	Greater NY Academy of Prosthodontics 54 th Scientific Meeting invitee
2008	Pain Control II SUNY-SB class representative
2007	Practice Management SUNY-SB class representative
2007	Medical Emergencies I SUNY-SB class representative
2007	Pain Control I SUNY-SB class representative
2006	D. Brent Scott Presidential Endowed Academic Scholarship
2003-2006	Honors at Entrance Scholarship, an academic full-ride scholarship awarded to the top 5% of students admitted to the University of Utah
2006	Dean's List University of Utah
2006	National Dean's List List University of Utah
2005	University of Utah Dean's List University of Utah
2005	National Dean's List List University of Utah
2004	University of Utah Dean's List University of Utah
2004	National Dean's List List University of Utah
2003	University of Utah Dean's List University of Utah
2003	National Dean's List List University of Utah
1998-2000	Student Judiciary Council member
2000	Varsity soccer, Highland High School captain
2000	Student Government Council, Highland High School member
2000	Varsity Cheerleader, Highland High School
2000	Madrigals acapella group Highland High School pitch leader
1999	Outstanding Jr. Humanities Student Award
1999	Member, madrigals acapella group, Highland High school
1996	Eagle Scout
1995	Academic Excellence Award, top 1% of class GPA

1994

Valedictorian, Rosslyn Heights Elementary School

RESEARCH AND SCHOLARLY PRODUCTIVITY

Major Research Interests

Management of Pain and Anxiety

- Novel approaches to management of pain and anxiety including the team approach, treatment planning, informed consent, bedside manner, and surgical technique
- Analytics of safety, costs, profitability, availability of trained providers, current training standards and access to care as relates to the full range of pain and anxiety management modalities
- Investigation of novel uses of existing and new approaches, modalities and medications for pain and anxiety management.
- Evaluating outcomes-based patient care modalities for special-needs and non traditional dental populations.

The practice of Modern Dentistry

- Evaluating and modernizing approaches in dental education to better address and meet the current and projected needs of dental professionals and their patients.
- Utilizing an evidence-based approach to formulate and establish new modalities of interfacing with healthcare providers of other disciplines.
- Analyzing how current trends in the profession of dentistry affect past, present, and future dental professionals.

Grant Support

Pending Grants:

2018 **Multi-Institutional Analysis of various faculty/student ratios in training institutions and their effect on safety outcomes; PI: Kevin Croft; Co-I: Daniel Orr II, D. L Orr II Research fund; \$20,000 (Direct, Preliminary approval 2018)**

Proposed Research Projects & Associated Grants:

2018 **Ropivacaine: A comparison of the pure S-Enantimer of Bupivacaine as a local-anesthetic in dental and oro-facial procedures; PI: Kevin Croft; Co-I: Daniel Orr II, D. L Orr II Research**

fund; (Direct, Proposed)

- 2018 **Post-Operative Effects of Short-Duration Anesthetics on the Cognitive State of Autistic Patients;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Double-Blinded Clinical Trial: Remimidazolam: Evaluation of the fast-acting GABA agonist benzodiazepine (currently in phase II clinical trials) as a component of sedative techniques in outpatient surgeries;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **Utilizing the Fast-acting Mu Receptor Agonist Remifentanil for Deliberate Hypotension in Orthognathic Surgeries;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Comparison of Quality of Care as Provided in Educational Institutions, Corporate Dental Offices, and Single-Practitioner Dental Offices;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **Traditional Search Engine Optimization (SEO): An analysis of the cost-effectiveness of such an approach.** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **The value of the Modern Dental Degree: Evaluating the intentions and perceptions of dental students regarding the use of their dental degrees.** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **An Analysis of Cost-Effectiveness of Various Treatment Modalities in Dentistry;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Double-Blinded Clinical Trial: Fast-Acting Calcium-Channel Blockers for Deliberate Hypotension in Orthognathic Surgery;** PI: Kevin Croft (p.p.), (In preparation)
- 2018 **A Double-Blinded Clinical trial: Utilizing Alpha-2 Agonists for Deliberate Hypotension in Orthognathic Surgeries.** PI: Kevin Croft (p.p.), Co-I Daniel Orr (UNLV). (In preparation)

Professional Presentations

Speaker Invitations (all offered for Continuing Education Credit)

Keynote Speaker, Montana Fly Fishing Study Club, Host: Dr. John Mccullah, July, **2020**

Program Speaker, Academy of General Dentistry Annual Scientific Meeting, Connecticut
Host: Dale Gibbons. July, **2019**.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Chicago. Host: J. Tom, President. April, **2019**.

Program Speaker, North Star Optometry Seminars, Salt Lake City, Utah. Host: Brian
Vincent, OD, President. February, **2019**.

Keynote Speaker, Montana Fly Fishing Study Club, Host: Dr. John Mccullah, July 12-13,
2018.

Program Speaker, Academy of General Dentistry Annual Scientific Meeting, New Orleans.
Host: Dale Gibbons. June 6-8, **2018**.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Las Vegas. Host: Amy Brown, Executive Director. May 4, **2018**.

Program Speaker, Smiles at Sea, Cozumel, Mexico, Host: Elijah Desmond RDH. March 14-
19, **2018**.

Keynote Speaker, Alaska Dental Society, Host: David Logan DDS, February 21, **2018**

Program Speaker, Smiles at Sea, Cancun, Mexico, Host: Elijah Desmond RDH. July 7-9,
2017.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Fort Lauderdale. Host: Amy Brown, Executive Director. May 6, **2017**.

Keynote Speaker, Virginia Academy of General Dentistry Scientific Meeting. Host: Karen
Huddleston, Executive Director. April 29-30, **2017**.

Keynote Speaker, Utah Dental Association Annual Scientific Meeting. Host: Dr. Jerald
Boseman. April 28, **2017**.

Keynote Speaker, Oregon Health Sciences University School of Dentistry, Host: Alexandria
Dewey, Executive Director. April 22, **2017**.

Keynote Speaker, Utah Dental Hygiene Association Spring Scientific Meeting, Host: Natalie
Nelson RDH, March 4, **2017**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Jason

Haws, October 27-29, **2016**.

Invited Speaker, Temple School of Dentistry-New Paradigms in Pain and Anxiety Management. Host: Dr. Mehran Hossaini. May 2, **2016**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Jared Staples. June 13-15, **2016**.

Keynote Speaker, First Choice Dental Lab Continuing Education Summit Host: Mr. Matt Cushing & The First-Choice Dental Laboratory. May 7, **2016**.

Keynote Speaker: Academy of General Dentistry, Utah Chapter, Annual Meeting. Host: Dr. Scott Stucki. April 22, **2016**.

Inaugural and Keynote Speaker: Inter-Professional Education Seminar at Roseman University Dental School, Host: Dr. Andrew Drollinger. April 20, **2016**.

Keynote Speaker: Brigerland Study Group. Host: Dr. Fryer, April 11, **2016**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Tyler Utley April 7-9, **2016**.

Keynote Speaker, 2015 Minot Dental Lab Continuing Education Summit Host: Mr. John Aitchison & The Minot Dental Laboratory. November 4, **2015**.

Advisor, Roseman University School of Dentistry Ad-Hoc Committee on Special Needs Dentistry, Host: Dr. Andrew Drollinger. July 23, **2015**.

Guest Lecture Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. December 9, **2015**.

Distinguished Lecture Series, Department of Oromaxillofacial Surgery, University of Nevada Las Vegas School of Dental Medicine. Host: Dr. Daniel Or, November 21, **2015**.

International Lecture Series, Suqian Medical Hospital, Host: Dr. Karl Koerner. September 18, **2015**.

Keynote Speaker, Post-Graduate Medical College, Montego Bay, Jamaica Host: Dr. Christopher Ogunsalu June 6, **2015**.

Guest Lecturer Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. April 29, **2015**.

Guest Lecturer Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. September 23, **2014**.

Keynote Speaker, Quarterly Wasatch Dental Hygiene Forum, Host: Dr. Reve Chaston, May 8, **2014**.

Guest Lecturer, University Of Utah School of Dentistry. Host: Dean Rena D'Souza. November 20, **2013**

Guest Lecturer, Brigham Young University Pre-Dental Association. Host: Dr. Daniel Orr. September 23, **2013**

Guest Lecturer, Utah Valley University Pre-Dental Association. Host: Dr. Daniel Orr. September 23, **2013**

Guest Lecturer, Weber State Pre-Dental Association. Host: Dr. Daniel Orr. September 24, **2013**.

Guest Lecturer, University of Utah Pre-Dental Association. Host: Dr. Daniel Orr. September 24, **2013**.

International Lecturer Series, Guilin Medical Hospital, Guilin, China Host: Dr. Karl Koerner. September 23, **2013**.

Keynote speaker, Great Basin Academy Quarterly Symposium. Host: Dr. Norm Rounds. September 13, **2013**.

Keynote speaker, St. George Treatment Planning Conference. Host: Dr. Jared Staples. May 3, **2013**.

Keynote speaker, Ogden Dental Seminar. Host: Dr. Host: Dr. Edwin Hurst. April 27, **2013**.

Keynote speaker, Ogden Academy Quarterly Symposium. Host: Dr. Mark Crowden. March 21, **2013**.

Keynote speaker, Advanced Clinical Education Seminars Symposium. Host: Dr. Steve Larsen. February 26, **2013**.

Invited speaker, The Childrens' Center: A Social Skills Training Group for Disabled Children, Host: Ms. Lori Krasney. January 18, **2013**.

Keynote speaker, Multidisciplinary Treatment Planning Group Quarterly Symposium. Host: Dr. Larisse Skene. August 8, **2012**.

Keynote speaker, Dissident Study Group Monthly Meeting. Host: Dr. Mike Haynie. April 26, **2012**.

Keynote speaker, Ogden Academy Quarterly Symposium. Host: Dr. Mark Crowden. January 27, **2012**.

Keynote speaker, Davis Study Group Monthly Meeting. Host: Dr. David McMillan. January 10, **2012**.

Presenter, New York Society of Anesthesiology, "General Anesthesia for ASA III and IV

Patients” Presentation. March **2011**.

Presenter, 149th International Association of Student Clinicians-American Dental Association, Monitoring Alveolar Bone Loss Through Digital Subtraction. San Antonio, TX October 17-19, **2008**.

Presenter, American Dental Association Student Research Conference, Gaithersburg, MD. March 20-22, **2008**.

COMMITTEE AND ADMINISTRATIVE SERVICE

Local, National, and International Service

2017 - present	Ongoing philanthropic efforts via Caring International Nonprofit
2017 – present	Welfare Coordinator, LDS Church, Parley's 4 th Ward
2016 – present	Site Visitor, Commission on Dental Accreditation (CODA) Advanced General Dentistry
2015	Give Kids A Smile, Salt Lake District Dental Society
2015	Dental Humanitarian Expedition, Suqian China
2015	Give Kids A Smile, Salt Lake District Dental Society
2014-2017	Sedation Committee University of Utah Medical Center, committee member
2014	Give Kids A Smile, Salt Lake District Dental Society
2013-Present	Delegate Utah Dental Association House of Delegates
2013-Present	Salt Lake District Board Member, Utah Dental Association
2013	Dental Humanitarian Expedition, Guilin China
2013	Give Kids A Smile, Salt Lake District Dental Society
2012-Present	Boy Scouts of America Troop 600 pack leader
2012	Free Dental Day, Smith & McDonald Dental
2010-2012	Elders Quorum Terryville LDS Church president
2010-2012	Anesthesia Progress Scientific Journal ad-hoc reviewer

2006-2012	Multiple Give Kids a Smile Suffolk County District Society
2008-2010	Terryville LDS Church clerk
2006-2012	Multiple Suffolk County Elementary School Dental Education Seminars
2006-2010	Mental Health Advisory Board Stony Brook Health Science Center
2006-2010	NYS Dental Assisting Program, SUNY-SB instructor
2006-2008	Terryville LDS Church executive secretary
2006	American Student Dental Association class representative
2005	Utah Down Syndrome Foundation volunteer
2000-2002	Official Governmental Translator, English Teacher, Missionary, District Leader, Zone Leader, Area Supervisor, for the Church of Jesus Christ of Latter-Day Saints in Albania

TEACHING & CURRICULUM DEVELOPMENT

2017-present	Dean, Institute for the Management of Pain and Anxiety. Overseeing development of national curriculum in pain/anxiety. Geared towards dental professionals at all levels of education, training and experience.
2016-present	Course Director, New Paradigms in Dental Sedation Training. Post-Graduate Continuing Dental Education taught at multiple CODA-Accredited dental, dental hygiene institutions.
2013-2017	Course Director, Dental Anesthesiology I, Pre-Doctoral Dental Curriculum University of Utah
2013-2017	Course Director, Dental Anesthesiology II, Pre-Doctoral Dental Curriculum University of Utah
2013-2017	Course Lecturer, Human Diseases and Therapeutics, Pre-Doctoral Dental Curriculum University of Utah

CONTINUING EDUCATION (Selected Courses/Lectures)

Academy of General Dentistry Annual Scientific Session, 16 hours of AGD-PACE; June **2018**.

American Society of Dentist Anesthesiologists Annual Scientific Session, 16 hours of ADA-CERP Credit; May **2018**.

American Society of Dentist Anesthesiologists Annual Scientific Session, 16 hours of ADA-CERP Credit; May **2017**.

American Society of Dentist Anesthesiologists Annual Scientific Session, May **2016**.

"Making Sense of Soft and Hard Tissue Grafting" Patrick Brain DDS, University of Utah School of Dentistry, 2 hours of AGD-PACE Credit, October 22, **2015**.

"New Paradigms in Anesthesia Education Technology, Office Based, Non-traditional Methodologies", Larry Chu, MD, MS, American Society of Dentist Anesthesiologists Annual Scientific Session; 2 hours of ADA-CERP Credit; May 1, **2014**.

"Teaching, Training, and Maintaining: Best Practices for Dental Anesthesia Education", Carilynne Yarascavatch, DDS, PhD, American Society of Dentist Anesthesiologists Annual Scientific Session; 2 hours of ADA-CERP Credit; May 1, **2014**.

"Anesthesia Risk Management", Mr. Ted Tpasineau, American Society of Dentist Anesthesiologists Annual Scientific Session, 3 hours of ADA-CERP Credit; May 1, **2014**.

"Understanding and Managing Risk in Office-Based Anesthesia" Dean Schweitzer, DDS, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Newly Approved Agents for Multimodal Analgesia” Mana Saraghi, DMD, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Oral Surgery and Anesthesia Needs for Orthognathic Surgery” Dan Spagnoli, MD, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Outcomes in Office-Based Anesthesia” Michael Walsh, MD, 2 hours of ADA-CERP Credit; May 2, **2014**.

Curriculum Vision, Design and Implementation, Carol Anne Murdoch-Kinch DDS PhD, University of Utah School of Dentistry, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Columbia University College of Dental Medicine Curriculum: Past, Present and Future”, Ronnie Myers DDS, University of Utah School of Dentistry, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Developing an Integrative Curriculum for a New School of Dentistry”, Frank Licari DMD MPH MBA, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Introduction to Evidence-Based Dentistry”, Richard Niederman DMD, 3 hours of ADA-CERP Credit, November 1, **2013**.

“Steps to Developing a Practice-Based Research Network”, Tomothy DeRouen, 3 hours of ADA-CERP Credit, November 1, **2013**.

“The History of Dental Anesthesiology and ASDA, ADBA, and ADSA” Joel Weaver, DDS, PhD, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Review of ASDA Parameters of Care”, Steven Ganzberg, DDS, MS, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Review of HIV” Mana Saraghi, DMD, 2 hours of ADA-CERP Credit; September 22, **2014**.

“Perioperative Airway Management Planning” Anthony Caputo, DDS, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Drug Alternatives Due to Shortages”, Joseph Giovannitti, DMD, 2 hours of ADA-CERP Credit; September 21, **2013**.

“ECG Review & Management of Arrhythmias” Steve Ganzberg, DMD, MS, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Current Antiemetic Strategies” Gino Gizzarelli, DDS, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Review of Analgesics and Postop Pain Strategies” Ken Reed, DMD, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Review of Enteral Sedation” *Michael Hoffmann, DDS*, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Drugs for Diseases We Treat”, John Svirskey DDS, Utah Dental Association Annual Convention, 2 Hours of AGD-PACE Credit, February 29, **2013**.

“Pain Medications: Therapy and Abuse”, Glen Hanson DDS PhD, Utah Dental Association Annual Convention, 2 Hours of AGD-PACE Credit, February 29, **2013**.

“**10 ½ Things No Dental Speaker Ever Said**”, **Barry Packer DDS**, Utah Dental Association Annual Convention, 1 Hour of AGD-PACE Credit, February 29, **2013**.

“Medical Emergencies in the Dental Office”, Mel Hawkins DDS, Utah Dental Association Annual Convention, 3 Hours of AGD-PACE Credit, February 29, **2013**.

Continuous Quality Improvement Seminar Salt Lake Dental Society, 2 hours of Utah-DOPL Credit, November 15, **2012**.

“Interdisciplinary Treatment Modalities”, Steve Luddington DDS, Davis Study Group, November 1, **2012**.

“Twelve Habits of a Successful Dental Practice”, Charles Simonsen DDS, Salt Lake Dental Society, 2 hours of Utah-DOPL Credit, September 20, **2012**.

“The Physiology of the Truly Painless Injection”, Steve Luddington DDS, Davis Study Group, September 11, **2012**.

“Practice Management”, Mr. Gary Takacs, Academy of LDS Dentists, 3 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Periodontics and Implants”, Samuel Low DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Fixed and Removable”, Terence Donovan DDS, Academy of LDS Dentists, 3 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Insurance and Coding”, Charles Blair DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Pharmacology”, Peter Jacobson, PhD DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

BIBLIOGRAPHY

Published Articles & Peer-reviewed Publications

1. Croft K., Motanabbbeh, A. Atypical Presentations of Malignant Hyperthermia: A Case Report. In preparation.
2. Croft K., Remifentanyl for Deliberate Hypotension: A Case Report, In preparation.
3. Croft K., Orr D., Orthognathics, Orthodontics and Anesthesia: A Multidisciplinary Approach to Care. In Preparation
4. Croft K., Office-Based Management of a Post-Gunshot Trauma Patient with a Tracheostomy for Endodontic Therapy. In Preparation
5. Croft K., Making Sedation Accessible, Professional Insurance Exchange, Quarterly Newsletter; 2012 Fall; 3-5
6. Croft K., Probst S., "Deliberate Hypotensive Anesthesia With the Rapidly Acting, Vascular-Selective, L-Type Calcium Channel Antagonist—Clevidipine: A Case Report", Anesth Prog. 2014 Spring; 61(1): 18–20. PMCID: PMC3975609. numerous citations in professional publications
7. Croft, K., Louie T., Colosi D., "Management of Rapidly Progressing Periapical Pathologies: A Case Report.", N Y State Dent J. 2014 Jan;80(1):22-5. PMID: 24654365



South Dakota State Board of Dentistry

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Fax: 1-888-425-3032

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www.sdboardofdentistry.org

Moderate Sedation Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review moderate sedation courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:04.03 have been met.

If a completed form is not returned by the date above, your course cannot be approved.

Course Title: jose.pedroza@upr.edu

Course Sponsor: The Advanced Dental Implant Institute / University Of Puerto Rico Medical Science Campus

Name of person submitting information: E. Pedroza Jose E. Pedroza

Email address: prmaxicourse@gmail.com Phone: 787-644-3890

Title: DMD, MSc Date: April 15, 2022

Course Director:

Name: Jose E. Pedroza License Number and State: 1391 Puerto Rico

Email: jose.pedroza@upr.edu Phone: 787-644-3890

Name of the facility where the course is presented: The Advanced Dental Implant Institute/CROI Surgical Center

Location: Guaynabo, PR

Course is presented at a: ☐ Dental Office ☐ Dental School ☒ Surgical Center
☐ Hospital ☐ Other: _____

Is the Course Sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

AGD PACE Provider Number: 334048

ADA CERP Provider Number: _____

Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

A course must meet the requirements set forth in ARSD 20:43:09:04.03. Please verify by checking each statement below:		YES	NO
The course satisfies all objectives and content as described in Part 5 of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students (2016 Edition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course includes a minimum of 60 clock hours of coursework that is provided through didactic instruction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course includes the administration of moderate parenteral sedation via the intravenous route to at least 20 individually managed live patients by each course participant, and for each of these individually managed patients the course participant is listed on the anesthesia record, administers the drugs, and documents the administration and physiologic findings on the anesthesia record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course includes clinical experience in the management of the compromised airway and establishment of intravenous access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course director has not been subject to any disciplinary action by a licensing board. <i>If yes, please attach a detailed explanation.</i> <i>A course director may be required to participate in an interview as part of the course review before the board approves the course.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
The course director holds a current permit or license to administer general anesthesia and deep sedation or moderate sedation in at least one state.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course director has at least three years of experience administering general anesthesia and deep sedation or moderate sedation, including formal postdoctoral residency training in anxiety and pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course has a clinical participant-faculty ratio of not more than four-to-one.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course includes a mechanism for the course participant to evaluate the performance of individuals presenting the course material, a summary of which is maintained and available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course provides additional clinical experience if the course participant has not achieved competency within the time allotted for the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
The course director certifies the competency of a course participant in each moderate sedation technique, including instruction, clinical experience, managing the airway, intravascular or intraosseous access, and reversal drugs, before the course participant is issued documentation verifying successful completion of the course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature:  Date: April 15, 2022

Printed Name: Jose E. Pedroza

The Puerto Rico Maxicourse® Program and Clinical Residency in Implant Dentistry

IV. Sedation Course Faculty

- **José E. Pedroza, DMD, MSc** – Dr. Pedroza, founder and director of ***The Advanced Dental Implant Institute***, has developed for over twenty years a robust practice exclusively oriented to oral reconstruction and dental implants. His undeniable quest for developing the field of dental implants and his commitment towards outstanding dental care to his patients, propelled him to continue advancing his academic studies and training process, acquiring a comprehensive understanding of the art and science of oral implantology. Dr. Pedroza received a Full Externship Certificate from the ***Midwest Implant Institute and Center for the Advancement of Dentistry*** in Columbus, Ohio. He also underwent a Comprehensive Implant Dentistry Training Course at the ***Reconstructive Center***, in Florida. He received an MSc degree on Clinical Research from the ***University of Puerto Rico***, and was awarded a Certificate for an 18 months Residency on Anesthesiology, from the ***UPR School of Medicine*** in the Anesthesiology Department. He has lectured worldwide, taught, mentored, and published scientific articles. His passion to pass on his knowledge and experience to others is the driving force behind the creation of *The Puerto Rico Maxicourse® Program and Clinical Residency in Implant Dentistry*.

IV Sedation Course Syllabus

THE PUERTO RICO MAXICOURSE® PROGRAM and CLINICAL RESIDENCY IN IMPLANT DENTISTRY Sedation and Anesthesia Course Description in Dental Practice This course is intended for continuing education training of dentists in the management of pain and anxiety during dental treatment. It is designed in a series of lectures, each requiring prerequisite study and the successful completion of a written examination following lectures for each session. Successful completion of these requirements fulfills the “Guidelines for Teaching Pain and Anxiety Control” as adopted by the American Dental Association and the American Dental Society of Anesthesiology. The Course complies with the ADA requirements for Moderate Parenteral Sedation, which consists of a minimum of 60 hours of instruction plus management of at least 20 patients by the IV route. The Sedation and Anesthesia Course is offered as part of The Puerto Rico MaxiCourse Program and Clinical Residency in Implant Dentistry, a one academic year curriculum AAID MaxiCourse®, sponsored by The Advanced Dental Implant Institute, and the University of Puerto Rico- Medical Sciences Campus, Deanship for Academic Affairs. The Program has been approved by the Academy of General Dentistry as a PACE Program Provider. Sessions in the program include: ♣ Medical emergencies in Dental Practice ♣ Patient Monitoring: Physiological and Technical Considerations ♣ Nitrous Oxide, Oral and IM Sedation ♣ Intravenous Conscious Sedation Detailed syllabi for each Session are found within this Course Description. Participants should follow the following instructions for each: 1. Each session commences with a syllabus that delineates specific objectives and reading assignments. 2. Consider the objectives as essay questions that should be answered while reading and studying the assigned reading. 3. After you have mastered the material, attempt to answer the pre-test without consulting the answers that are provided. Then check your answers and reread those portions that you find yourself deficient. 4. The lecture outlines will be used by the instructor during the actual course. 5. At the completion of each module’s lectures, you will have to score 80% on a written exam that will be similar, but not identical to, the pretest. Any inquiries may be directed to the Administrative Director.

Permit to Monitor Course Information Packet

The following information on each Permit to Monitor Course has been provided by the course Sponsor.

	Name	Sponsor	Instruction for competency?	Number of Hours	PACE or CERP	Has it changed since last approval?
1	DAANCE	AAOMS	Yes	12	Yes	No
2	Anesthesia Assistants Review Course	AAOMS	Yes	36	Yes	No
3	Assistant Sedation/ Anesthesia Course	ASDA	Not Provided	12	Yes	Not Provided
4	Assistant Sedation/ Anesthesia On Demand Course	ASDA	Not Provided	12	Yes	Not Provided
5	Conscious Sedation Consulting Online Sedation CE Course	Conscious Sedation Consulting	Yes	8	Yes	No
6	Sedation and Anesthesia in the Dental Office	SDDA	Yes	8	Yes	No
7	Intravenous Conscious Sedation Course	GRU, College of Dental Medicine	Yes	104	Yes	No
8	Assisting on the Sedated Patient	Dentinomics	Yes	8	Yes	No
9	Monitoring of Sedation/ General Anesthesia Intravenous Insertions	St Louis University Center for Advanced Dental Education	Yes	20	Yes	No



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: _____

Course Sponsor: _____

Location: _____

Name of person submitting information: _____

Email address: _____ Phone: _____

Title: _____ Date: _____

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? **Yes No**

2. Number of hours of instruction: _____

3. Is this course sponsor AGD PACE or ADA CERP approved? **Yes No**

ACD PACE Provider Number: _____

ADA CERP Provider Number: _____

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? **Yes No**

If yes, please summarize the changes below:

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: _____ Date: _____

Printed Name: _____



American Association of Oral and Maxillofacial Surgeons

Oral and maxillofacial surgeons:
The experts in face, mouth and jaw surgery®

Candidate Handbook

Dental Anesthesia Assistant National Certification Examination

DENTAL ANESTHESIA ASSISTANT
dance
National Certification Examination®



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To help you prepare for the DAANCE, register for an AAOMS anesthesia assistants course at AAOMS.org/OMSStaff. Additional anesthesia resource materials are available at AAOMSstore.com. These courses and materials, while not a comprehensive study program, are intended to supplement your exam preparation.

All questions and requests for information about DAANCE Certification should be directed to:

DAANCE
9700 W. Bryn Mawr Ave.
Rosemont, IL 60018-5701
Phone: 847-678-6200
Fax: 847-678-4619
Website: AAOMS.org/DAANCE

All questions and requests for information about examination scheduling should be directed to:

PSI Candidate Services
18000 W. 105th St.
Olathe, KS 66061-7543
Phone: 833-333-4755
Fax: 913-895-4650
Email: info@goAMP.com
Website: goAMP.com

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IT IS YOUR RESPONSIBILITY TO READ AND UNDERSTAND THE CONTENTS OF THIS HANDBOOK BEFORE APPLYING FOR THE EXAMINATION.

This Handbook contains current information about the certification examination developed by the Dental Anesthesia Assistant National Certification Examination Advisory Committee (DAANCEAC). It is essential you keep it readily available for reference until you are notified of your performance on the examination. All previous versions of this Handbook are null and void.

Direct all correspondence, address changes, requests for a current Candidate Handbook and information about the development and administration of the Dental Anesthesia Assistant National Certification Examination (DAANCE) certification program and recertification to:

DAANCE Advisory Committee

c/o PSI Candidate Services
18000 W. 105th St.
Olathe, KS 66061-7543, USA
833-333-4755

Fax: 913-895-4650

Email: info@goAMP.com
goAMP.com

After registering for the examination, candidates may schedule an examination appointment online at goAMP.com.

VISION STATEMENT

The Dental Anesthesia Assistant National Certification Examination Advisory Committee raises the standard for anesthesia assistants by defining professional excellence through the Dental Anesthesia Assistant National Certification Examination.

MISSION STATEMENT

The Dental Anesthesia Assistant National Certification Examination Advisory Committee, by providing the only national anesthesia assistant certification, serves to educate, provide and promote the safe standards for supportive dental anesthesia care.

AFFILIATION

The DAANCEAC of the American Association of Oral and Maxillofacial Surgeons (AAOMS), the professional organization representing more than 10,000 oral and maxillofacial surgeons in the United States, was formed in 2007 to advance the profession of the anesthesia assistant through the development of a certification program. The DAANCE Board/Committee establishes policies, procedures and standards for certification and recertification in the field of anesthesia assistant quality. AAOMS supports its members'

ability to practice their specialty through education, research and advocacy. AAOMS members comply with rigorous continuing education requirements and submit to periodic office anesthesia evaluations.

STATEMENT OF NONDISCRIMINATION

The DAANCEAC and PSI do not discriminate against any individual or candidate with respect to age, sexual preference, color, religion, creed, marital status, national origin, race, language, medical conditions or disability. All candidates are considered solely on the basis of their independent ability to meet the eligibility criteria established by the DAANCEAC.

DAANCE PROGRAM OVERVIEW

Introduction

Control of the pain and anxiety of patients undergoing dental and oral and maxillofacial surgery (OMS) procedures is a primary focus of the dental profession. From the early days of anesthesia practice to the modern technology of the present, millions of anesthetic procedures have been rendered safely by dentists trained in the administration of general anesthesia, deep sedation, conscious sedation, nitrous oxide analgesia and local anesthesia.

At the core of this experience are the dentist and his/her office anesthesia team. In the course of prescribed training, the contemporary oral and maxillofacial surgeon spends major periods of time delivering the various forms of anesthesia in the operating room as well as in a specially equipped operatory. In addition to this clinical experience, the training program includes formal didactic material. After completing this intense educational experience, today's graduate of an approved oral and maxillofacial surgery residency has the skills to provide safe and effective pain and anxiety control in both the hospital and office settings. Moreover, a growing number of other dental specialists and general dentists are obtaining training in anesthesia and sedation and using these treatment modalities in their clinical practices.

To put these skills into practice, however, the correct setting must be created. Organized oral and maxillofacial surgery, through its office anesthesia evaluation program and its office emergency manual, has developed a system through which anesthetic services are provided in a well-equipped office by a practitioner knowledgeable in anesthetic practice and emergency management. In the process of evaluating the overall office environment, AAOMS recognized that a core educational experience could be tailored to the anesthesia assistant. DAANCE was developed to provide a continuing education curriculum for professional allied staff. Although this program was initially developed by AAOMS,

there is clearly a need for the training of anesthesia assistants in all dental practices where anesthesia and sedation are administered.

The goals of this program are meant to provide a means for the dental professional providing anesthesia and/or sedation to help educate staff in the essentials of office-based ambulatory anesthesia. With a better understanding of these principles, it is anticipated that the office anesthesia assistant will make a significant contribution to the patient care team. This program is designed to assist not only the OMS office, but any dental office delivering outpatient anesthesia for other dental procedures. Doctors are encouraged to follow up with their state dental board for an assistant's full scope of practice.

Definition of the Anesthesia Assistant

A Dental Anesthesia Assistant (DAA) possesses the expertise to provide supportive anesthesia care in a safe and effective manner. The DAA is knowledgeable in the perioperative and emergent care management of patients undergoing office-based outpatient anesthesia. The DAA is able to effectively communicate pertinent information to patients and their escorts as well as members of the healthcare team.

Eligibility Requirements

The following are the eligibility requirements for participation in the DAANCE program:

- You must be employed for at least six months by either an oral and maxillofacial surgeon who is a fellow or member of AAOMS or by a dental professional who holds a valid anesthesia permit.
- Non-AAOMS offices must enclose a copy of their anesthesia permit with each application submitted.
- You must provide a copy of a CURRENT CPR or BLS certification with your registration form in order to receive study materials.
- The CPR or BLS certification must be current through your examination date (a minimum of six months or your registration will not be approved, and you will not receive your registration materials). Note: Once a new CPR card is received, your application will be processed and the study package sent. If a new CPR card is not received within six months of notification, you will be required to submit a new application and fee to qualify for the examination.

About DAANCE

DAANCE is a two-part continuing education program comprised of approximately 36 hours of self-study material and quizzes and a standardized, computer-based exam. The course is designed for oral and maxillofacial

surgery assistants or assistants employed by other dental professionals with valid anesthesia permits.

The American Association of Oral and Maxillofacial Surgeons is an ADA CERP Recognized Provider.

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

The American Association of Oral and Maxillofacial Surgeons designates this activity for 36 continuing education credits.

Upon successful completion of the final examination, the assistant will receive proof of certification and a program completion lapel pin.

Educational Objectives

Upon completion of this course, the dental anesthesia assistant should be able to:

1. Describe the basic anatomy and physiology of the cardiovascular and respiratory systems.
2. Describe the vascular anatomy of the forearm.
3. List the divisions of the central nervous system.
4. Discuss the components of the medical history and the review of systems.
5. Compare and contrast the differences between general anesthesia, deep sedation, conscious sedation, nitrous oxide analgesia and local anesthesia.
6. Discuss the drugs and techniques utilized by the oral and maxillofacial surgery anesthesia team to achieve various levels of anesthesia or sedation.
7. Identify basic office emergencies and their treatment, including cardiovascular, respiratory, allergic and convulsive emergencies.
8. Describe the essentials of monitoring blood pressure, pulse and oxygen saturation.
9. Recognize normal electrocardiograph (ECG) waves and recognize serious abnormal variations from the normal rhythm.
10. Recognize the essentials and importance of a complete medical record.

The program is composed of two parts: 1) the self-study component with quizzes and 2) the final exam. First, the assistant and the sponsoring surgeon should establish a study schedule and a target date for the final examination. For best availability, call to reserve this date as soon as you have identified several preferred options. Working backward from your final exam date, set up a schedule for completing each module. Allow several weeks to complete each module. Because individuals work at different paces, DAANCE allows

participants the opportunity to customize their study schedules. Some modules may require additional study time. Study should consist of reading the suggested material for the module as listed in the course syllabus. The sponsoring surgeon should be available to discuss questions about each module during the weeks designated for studying them. Establish a target date for completing and taking the quiz for that module. The sponsoring surgeon has the answer key and should allow time for discussing the correct answers with the assistant. Candidates are given six months from their activation date to take the DAANCE test.

Registration Information

Each assistant enrolling in the program must complete a registration form. You may photocopy the registration form. Note: It is your responsibility to include the correct practice/office mailing address and email on the registration form in order to receive important communications about the DAANCE program. If your mailing address or email address changes, please contact PSI (information below) with your updated information.

Mail registration forms to:
PSI Application Services
18000 W. 105th St.
Olathe, KS 66061-7543

Or fax registration forms to 913-895-4650.
Phone registrations are not accepted.

Direct questions to PSI at 833-333-4755.
Refer to the AAOMS DAANCE program.

Course materials will be mailed only to the sponsoring doctor's office address.

Please allow PSI three weeks to process the application and mail study materials.

Fees Payment

Tuition is \$345 for AAOMS member-sponsored staff and \$545 for other dentist-sponsored staff. Registration fee includes the DAANCE study materials and examination fee. Approved payment methods are credit card, personal check, company check, cashier's check or money order. Cash is not accepted.

Candidates who request testing in international locations will be accommodated through web-based technology and given computerized examinations in a testing environment similar to the conditions available through PSI's national Test Center Network. Please refer to goAMP.com for a current listing of international testing centers. Candidates who desire to take an examination outside the United States should submit a written request containing the desired testing location along with the required additional \$105 fee for Puerto Rico and international locations with their application.

SELF-STUDY COMPONENT

For ultimate success with the program, it is best to collaborate closely with your sponsoring doctor to prepare for the DAANCE. However, while the self-study component should be overseen by the sponsoring doctor, you should familiarize yourself with the course syllabus and study guide for the specific modules to be covered on your own. You and the sponsoring doctor should first establish a study schedule and a target date for the final examination. For best availability, it is suggested that you call to reserve this date as soon as you have identified several preferred options. Note: Candidates are given six months from their activation date to take the examination. The activation date is the date an application is made eligible. If you are not sure of your activation date and/or testing deadline date, call PSI at 833-333-4755 to confirm. Working backward from your final exam date, you and your sponsoring doctor will then set up a schedule for completing the curriculum of each module and corresponding quiz, allowing several weeks to complete each module. Because each individual may work at a different pace and some modules may require additional study time, DAANCE offers you the opportunity to customize your study schedules. Study should consist of reading the content of the module as well as the suggested additional material for each module as listed in the course syllabus. The sponsoring doctor should be available to discuss questions regarding each module during the weeks that you designate for studying that content. Then establish a target date to complete and take the quiz for each module. The sponsoring doctor is provided the answer key for all quizzes and should then grade the quizzes, allowing adequate time to review the results and discuss the correct answers with you. After completing the quizzes and self-study portion of the program, and once prepared to take the final examination, you may then either schedule an examination appointment (if you have not done so already by calling PSI) or sit for your scheduled examination.

Topics Covered

Assistants and sponsoring doctors will each receive study materials that focus on the following five areas:

- Basic sciences
- Systemic diseases and evaluation/preparation of patients
- Anesthetic drugs and techniques
- Anesthesia equipment and monitoring
- Office anesthesia emergencies

A suggested reading list is included in the DAANCE study guide. Upon completion of each module, the assistant will take a practice quiz, which the sponsoring doctor will score. The doctor will receive an answer key with his/her study

guide. These quizzes are for reference and do not need to be submitted to AAOMS. When the assistant has completed all study guide modules and practice quizzes, it is time to schedule the final examination.

About the Testing Agency

The DAANCEAC has contracted with PSI Services to assist in the development, administration, scoring, score reporting and analysis of the DAANCE. Contracting with PSI provides a stable base from which the voluntary DAANCEAC operates and serves as a conduit of information between certified professionals, candidates and the DAANCE Board/Committee. PSI carefully adheres to industry standards for development of practice-related, criterion-referenced examinations to assess competency.

PSI has 70 years of experience providing worldwide testing solutions to corporations, federal and state government agencies, professional associations, certifying bodies and leading academic institutions. PSI offers a comprehensive solutions approach from test development to delivery to results processing, including pre-hire employment selection, managerial assessments, licensing and certification tests, distance learning testing, license management services and professional services.

Certification

To ensure the DAANCE examination meets existing professional testing standards, the DAANCEAC follows the Standards for Educational and Psychological Testing (1999) as published by the American Educational Research Association, American Psychological Association and the National Council on Measurement in Education. The standards are designed to establish criteria for appropriate development, use and interpretation of tests. The examination is available in computer-based format at PSI Test Centers in the United States.

You must pass the examination to become certified. Your certification in Dental Anesthesia Assisting is effective on the date you pass the examination. The credential is valid from that date through a five-year period from the month of your examination (for example, if you pass at some point between July 1 – 31, 2022, your expiration would be July 31, 2027). Upon successful completion of the final examination, you will receive proof of certification and a program completion lapel pin.

Recertification

DAANCE certification is valid for five years. To recertify, assistants must retake the DAANCE examination every five years and maintain current BLS and/or ACLS certifications. Note: Online CPR certifications are not accepted.

Preparation for the Examination

Enrolled assistants should familiarize themselves with the course syllabus and study guide for the specific module to be covered. Requested reading source material is to be reviewed by the anesthesia assistant as part of the program as well. Through close interaction between the sponsoring doctor and the assistant, these academic materials should be reviewed.

The assistant and sponsoring doctor should establish a timeline for moving through the curriculum and the quizzes covering the module. The quizzes should be graded by the sponsoring doctor.

Every anesthesia assistant registered in DAANCE is required to be certified in Basic Cardiac Life Support (BLS), Advanced Cardiac Life Support (ACLS) or cardiopulmonary resuscitation (CPR). It is hoped this combined educational venture will strengthen the anesthesia assistant's knowledge and skills and ultimately contribute to improved patient care.

Confirmation of a candidate's eligibility will be valid for a period of six months. If a candidate fails to schedule an examination appointment within the six-month eligibility period, he or she will forfeit fees and be required to reapply and resubmit the full application fee to receive a new window of eligibility.

About the Examination

The DAANCE examination consists of 115 multiple-choice questions. Fifteen items will be included as pretest items, which are unscored and will not affect a candidate's score. Candidates will have two hours to complete the exam. The examination is administered in a computerized format that does not require computer experience or typing skills. The DAANCEAC uses the following percentage guidelines in selecting the three types of questions that appear on each examination: 37 percent recall, 47 percent application and 16 percent analysis. Recall questions test the candidate's knowledge of specific facts and concepts. Application questions require the candidate to interpret or apply information to a situation. Analysis questions test the candidate's ability to evaluate, problem solve or integrate a variety of information and/or judgment into a meaningful whole.

Pretesting

Pretesting items allows the DAANCEAC to collect meaningful statistics about new questions that may appear as scored items on future examinations. Pretesting is accomplished by interspersing new untried questions throughout the examination. These items are not scored as part of the candidate's examination, and they do not affect an individual's pass/fail status. The pretest questions are

scattered throughout the examination so candidates will answer them with the same care they would items to be scored as part of the final examination. The statistical performance of the pretest items is later evaluated, and items that perform well can then be included on a future examination as scored items.

THE DAANCE EXAMINATION

Examination Administration

The final examination will be administered at testing sites throughout the country. All questions about examination dates or sites should be directed to:

PSI Candidate Services
18000 W. 105th St.
Olathe, KS 66061-7543, USA
833-333-4755
Fax: 913-895-4650
Email: info@goAMP.com
goAMP.com

Test Center Locations

The final examination will be administered by PSI. Specific address information will be provided when you schedule an examination appointment. Detailed maps and directions also are available at goAMP.com.

Scheduling the Final Examination

The examination will be administered exclusively in a computerized format at established PSI Test Centers nationwide. You do not need computer experience or typing skills to take the examination. Easy-to-follow instructions are displayed on screen, and time is allotted for practice prior to starting the actual examination. Appointments must be made at least two business days in advance. Results are available immediately after completion of the examination.

After completing the quizzes and self-study portion of the program, you may schedule an examination appointment at online.goAMP.com/CandidateHome/CandidateInformation.aspx or by calling PSI toll-free at 833-333-4755. The examinations are administered by appointment only Monday through Saturday. Appointment starting times may vary by location. Individuals are scheduled on a first-come, first-served basis. For best availability, you are encouraged to schedule examination appointments well in advance of your desired date.

If you have not received your testing deadline date, contact PSI to verify the date by which you must take your test. It is your responsibility to obtain and remember your expiration date.

You must go online or call to schedule an examination appointment at least two business days in advance.

Unscheduled candidates (walk-ins) will not be admitted to the Test Center. If you do not attempt to take the examination before your eligibility period expires, you will forfeit your opportunity to test and must re-register and submit full payment in order to take the exam.

When you call to schedule an appointment for examination, you will be notified of the time to report to the Test Center. An examination appointment confirmation email will be sent to candidates who provide a valid email address.

If you contacted PSI by 3 p.m. Central Time on...	Depending on availability, your examination may be scheduled as early as:
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday (Saturday if available)
Thursday	Monday
Friday/Saturday	Tuesday

Rescheduling an Examination

If for any reason you need to reschedule your examination, you will be allowed a one-time rescheduling option within your six-month eligibility period at no charge.

You may reschedule one appointment for examination at no charge online at goAMP.com or by calling PSI at 833-333-4755 at least two business days prior to the scheduled testing session. A rescheduling fee of \$85 will be charged for any subsequent appointment changes within the candidate's eligibility period. Complete the DAANCE Substitution/Cancellation/Reschedule Form in this brochure if necessary.

Requests for rescheduled/additional appointments must be made on the Substitution/Cancellation/Reschedule Form (also included in this brochure) and mailed or faxed to:

PSI
18000 W. 105th St.
Olathe, KS 66061-7543
Fax: 913-895-4650

If your examination is scheduled on...	You must contact PSI by 3 p.m. Central Time to reschedule the examination by the previous:
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday
Thursday	Monday
Friday/Saturday	Tuesday

Missed Appointments

You will forfeit your examination registration and all fees paid to take the examination under the following circumstances (a new, complete application and examination fee are required to reapply for examination):

- You wish to reschedule an examination but fail to contact PSI at least two business days prior to the scheduled testing session.
- You appear more than 15 minutes late for an examination.
- You fail to report for an examination appointment and do not reschedule within your eligibility period for \$85.
- You do not reapply within 30 days of a failed examination to retake the examination for an \$85 fee.

Substitution/Cancellation and Refund Policies

All substitutions and cancellations must be made using the DAANCE Substitution/Cancellation/Reschedule Form provided at the end of this candidate handbook or on the AAOMS website at AAOMS.org. Phone cancellations and substitutions will not be accepted. Substitutions require the Substitution/Cancellation/Reschedule Form accompanied by a completed DAANCE Registration Form (page 20) and a valid CPR and/or BLS card for the new registrant. Note: A candidate may be permitted to participate in only one substitution per eligible record.

It is the responsibility of the sponsoring doctor to notify PSI of the substitution and to transfer previously provided course material to the substitute registrant. New course material will not be provided to the substitute registrant.

Cancellation requests must be received within 90 days of the candidate's activation date. Requests received after 90 days of candidate's activation will not be accepted and the examination registration and all fees paid will be forfeited. If a cancellation is made before 90 days, the sponsoring doctor will receive a refund equal to 50 percent of the registration fee. Substitutions must be made no later than 30 days before the candidate's expiration of eligibility.

Candidates have six months from their activation date to take their examination. If unsure of the testing deadline date, contact PSI at 833-333-4755.

Inclement Weather, Power Failure or Emergency

In the event of inclement weather or unforeseen emergencies on the day of an examination, PSI will determine whether circumstances warrant the cancellation and subsequent rescheduling of an examination. The examination will usually not be rescheduled if the Test Center personnel are able to open the Test Center.

You may visit goAMP.com prior to the examination to determine if any Test Centers are closed. Every attempt is made to administer the examination as scheduled; however, should an examination be canceled at a Test Center, all scheduled candidates will receive notification following the examination date regarding rescheduling or reapplication procedures.

If power to a Test Center is temporarily interrupted during administration, your examination will be restarted. The responses provided up to the point of interruption will be intact, but for security reasons the questions will be scrambled.

Special Arrangements for Candidates With Disabilities

PSI complies with the Americans with Disabilities Act and strives to ensure that no individual with a disability is deprived of the opportunity to take the DAANCE examination solely by reason of that disability. PSI will provide reasonable accommodations for candidates with disabilities. Wheelchair access is available at almost all established Test Centers. Candidates with visual, sensory or physical disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements. Verification of the disability and a statement from an appropriate professional (education professional, doctor, psychologist, psychiatrist) of the specific type of assistance needed must be made in writing and included with the completed registration form and required documentation upon enrollment in DAANCE. When you call to schedule your examination, please inform PSI of your need for special accommodations. Please refer to the Request for Special Examination Accommodations form on page 21.

RULES FOR COMPUTERIZED TESTING

Taking the Examination

Your examination will be given by computer at a PSI Test Center. You do not need any computer experience or typing skills to take your examination. On the day of your examination appointment, report to the Test Center no later than your scheduled testing time. Look for signs indicating PSI Test Center check-in. **If you arrive more than 15 minutes after the scheduled testing time, you will not be admitted and you will forfeit your examination registration and all fees paid to take the examination. A new, complete application and examination fee will be required to reapply for examination.**

Identification

You must have proper identification to gain admission to the Test Center.

To gain admission to the Test Center, you must present two forms of identification. The primary form must be government-issued, current and include your name, signature and photograph. No form of temporary identification will be accepted. You also will be required to sign a roster for verification of identity.

- Examples of valid primary forms of identification are: driver's license with photograph; state identification card with photograph; passport; military identification card with photograph.
- The secondary form of identification must display your name and signature for signature verification (e.g., credit card with signature, Social Security card with signature, employment/student ID card with signature).
- If your name on your registration is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

Candidates must have proper identification to gain admission to the Test Center. Failure to provide appropriate identification at the time of the examination is considered a missed appointment. There will be no refund of examination fees.

After your identification has been confirmed, you will be directed to a testing carrel. At the testing carrel, you will be prompted on-screen to enter your assigned candidate ID number. Your photograph, taken before beginning the examination, will remain on-screen throughout your testing session. This photograph also will appear on your printed score report.

Security

PSI administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The Test Center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, pagers or cellular/smart phones are allowed in the testing room. Possession of a cellular/smart phone or other electronic device is strictly prohibited and will result in dismissal from the examination.

- No calculators are permitted.
- No guests, visitors or family members are allowed in the testing room or reception areas.

Personal Belongings

No personal items, valuables or weapons should be brought to the Test Center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. The proctor will lock the soft locker prior to you entering the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker:

- Watches
- Hats
- Wallets
- Keys

Once you have placed everything in the soft locker, you will be asked to pull out your pockets to ensure they are empty. If all personal items will not fit in the soft locker, you will not be able to test. The site will not store any personal belongings.

If any personal items are observed or heard (e.g., cellular/smart phones, alarms) in the testing room after the examination is started, the administration will be forfeited.

Examination Restrictions

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the proctor at the completion of testing, or you will not receive your score report.
- No documents or notes of any kind may be removed from the Test Center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking or smoking are not permitted in the Test Center.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

Misconduct

You may be dismissed, your scores will not be reported and examination fees will not be refunded if you engage in any of the following misconduct:

- Create a disturbance, are abusive or otherwise uncooperative.
- Display and/or use electronic communications equipment, such as pagers and cellular/smart phones.
- Talk or participate in conversation with other examination candidates.
- Give or receive help or are suspected of doing so.
- Leave the Test Center during the administration.
- Attempt to record examination questions or make notes.
- Attempt to take the examination for someone else.
- Are observed with personal belongings.
- Are observed with notes, books or other aids without it being noted on the roster.

Copyrighted Examination Questions

All examination questions are the copyrighted property of AAOMS. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

Practice Examination

Prior to attempting the examination, you will be given the opportunity to practice taking an examination on a computer. The time you use for this practice examination is NOT counted as part of your examination time. When you are comfortable with the computer testing process, you may quit the practice session and begin the timed examination.

Timed Examination

Following the practice examination, you will begin the actual examination. Before beginning, instructions for taking the examination are provided on-screen. The examination contains 115 items (100 scored and 15 non-scored pretest items). You will have two hours to complete the examination.

The computer monitors the time you spend on the examination. The examination will terminate if you exceed two hours. You may click on the Time box in the lower-right portion of the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The time feature also may be turned off during the examination.

Only one item is presented at a time. The item number appears in the lower-right portion of the screen. The entire

item appears on-screen (i.e., item and four options labeled A, B, C and D). Indicate your choice by either entering the letter of the option you think is correct (A, B, C or D) or clicking on the option using the mouse. Your answer appears in the lower-left portion of the screen in the box labeled Response. To change your answer, enter a different option by typing A, B, C or D or by clicking on the option using the mouse. You may change your answer as many times as you wish.

To move to the next item, click on the forward arrow (>) in the lower-right portion of the screen. This action will move you forward through the examination item by item. If you wish to review any item or items, click the backward arrow (<) or use the left arrow key to move backward through the examination.

You may leave an item unanswered and return to it later. Questions also may be bookmarked for later review by clicking in the blank square to the right of the Time button. To advance to the next unanswered item on the exam, click on the double arrows (>>). To identify all unanswered or bookmarked items, repeatedly click on the double arrows (>>). When you have completed the examination, the number of examination items you answered is reported. If you have not answered all items and you have time remaining, return to the examination and answer those items. Be sure to answer each item before ending the examination. There is no penalty for guessing.

Candidate Comments

During the examination, you may add comments for any question by clicking on the Comment button to the left of the Time button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided.

Score Reports

After you finish the examination, you will be asked to complete a short evaluation of your testing experience. Then, you will be instructed to report to the testing proctor to receive your score report. Scores are reported in printed form only, in person or by U.S. mail. Scores are not reported over the telephone, by electronic mail or by facsimile.

Your score report will indicate "pass" or "fail." Additional details are provided in the form of raw scores by major content category. A raw score is the number of items you answered correctly. Your pass/fail status is determined by your raw score.

To preserve the integrity of DAANCE, testing reports will not provide examination questions and correct answers. Testing reports are sent only to the sponsoring doctor. If the sponsoring doctor requires an additional report, he/she must contact PSI directly and pay the appropriate fees directly to PSI.

Questions

All questions regarding registration, substitutions, cancellations and administration of the final examination should be directed to:

PSI Candidate Services

18000 W. 105th St.
Olathe, KS 66061-7543

Phone: 833-333-4755

Fax: 913-895-4650

GENERAL INFORMATION

Scores Canceled by the Advisory Committee or PSI

The DAANCEAC and PSI are responsible for the integrity of the scores they report. On occasion, occurrences such as computer malfunction or misconduct by a candidate may cause a score to be suspect. The Advisory Committee and PSI are committed to rectifying such discrepancies as expeditiously as possible. The Advisory Committee may void examination results if, upon investigation, violation of its regulations is discovered.

Disciplinary Policy

The DAANCEAC shall undertake sanctions against applicants, candidates or individuals already awarded the DAANCE designation only in relation to failure to meet requirements for initial certification or recertification. The DAANCE is a voluntary process, not required by law for employment in the field. Monitoring and evaluating actual job performance is beyond the scope of the Advisory Committee.

Applications may be refused, candidates may be barred from future examinations, or candidates or individuals already certified may be sanctioned – including revocation of the DAANCE designation – for the following reasons:

- Attesting to false information on the application or on recertification documents or during a random audit procedure.
- Giving or receiving information to or from another candidate during the examination.
- Removing or attempting to remove examination materials or information from the testing site.
- Unauthorized possession and/or distribution of any official testing or examination materials.
- Representing oneself falsely as a designated DAANCE certified professional.

Pass/Fail Score Determination

The DAANCEAC is not able to release or discuss individual questions with candidates following the examination. To do so would require elimination of that question from the item bank of pretested questions and deplete the number of pretested questions required to develop future versions of the examination.

The methodology used to set the minimum passing score is the Angoff method, applied during the performance of a Passing Point Study by a panel of experts in the field. The experts evaluated each question on the examination to determine how many correct answers are necessary to demonstrate the knowledge and skills required to pass this examination portion. Your ability to pass the examination depends on the knowledge and skill you display, not on the performance of other candidates.

Passing scores may vary slightly for each version of the examination. To ensure fairness to all candidates, a process of statistical equating is used. This involves selecting an appropriate mix of individual questions for each version of the examination that meets the content distribution requirements of the examination content blueprint. Because each question has been pretested, a difficulty level can be assigned. The process then considers the difficulty level of each question selected for each version of the examination, attempting to match the difficulty level of each version as closely as possible. To assure fairness, slight variations in difficulty level are addressed by adjusting the passing score up or down, depending on the overall difficulty level statistics for the group of scored questions that appear on a particular version of the examination.

If You Pass the Examination

Upon successful completion of the final examination, the assistant will receive proof of certification and a program completion lapel pin. Your certificate and lapel pin will be mailed to registration address or sponsor address six to eight weeks after you pass the examination.

Replacement certificates and replacement or extra DAANCE pins can be obtained by completing the Request for Duplicate Certificate or Pin Form in this Candidate Handbook. DAANCE pins are available for \$10, and Certificates are available for \$20.

Verification of DAANCE Status

Information on the current certification status of an individual will be provided to the public upon request. Employers who request verification of a DAANCE-certified professional must provide the individual's name and candidate ID number to assure correct identification in the DAANCE database.

If You Do Not Pass the Examination/Retest Option

Individuals who do not pass the original examination will receive retest registration information with their score reports and will have 30 days to submit the necessary retest registration form. Such individuals will be allowed one retest for a fee of \$85 and must submit the necessary retest registration forms to PSI within 30 days of failing the exam.* Candidates who wish to retake the examination in Puerto Rico or outside the United States should submit a written request containing the desired testing location along with the required additional \$105 fee with their application. Once you complete the appropriate forms and submit them to PSI with the \$85 retest fee (plus the additional \$105 fee for Puerto Rico and international locations, if applicable), a new activation date will be assigned. You will then have an additional six months from the new activation date to retake the test.

***NOTE: It is the candidate's responsibility to complete and submit the reapplication form to PSI within 30 days of the failed attempt. Candidates who fail to submit the reapplication form will not be allowed to retest at the \$85 fee and will be expected to re-register for the program at the full fee.**

Names of candidates who do not pass the examination are confidential and are not revealed under any circumstances, except by legal compulsory process.

Appeals

Because the performance of each question on the examination that is included in the final score has been pretested, there are no appeal procedures to challenge individual examination questions, answers or a failing score.

Actions by the Advisory Committee affecting eligibility of a candidate to take the examination may be appealed. Additionally, appeals may be considered for alleged inappropriate examination administration procedures or environmental testing conditions severe enough to cause a major disruption of the examination process and that could have been avoided.

All appeals must be submitted in writing. Equivalency eligibility appeals must be received within 30 days of the initial Advisory Committee action. Appeals for alleged inappropriate administration procedures or severe adverse environmental testing conditions must be received within 60 days of the release of examination results.

The DAANCEAC chair will respond within 30 days of receipt of the appeal. If this decision is adverse, the candidate may file a second-level appeal within 30 days. A three-member panel of the DAANCE Advisory Committee will review the chair's decision and respond with a final decision within 45 days of receipt.

Duplicate Score Report

You may purchase additional copies of your score report at a cost of \$25 per copy, payable by cashier's check or money order to PSI Services, Inc. Requests must be submitted to PSI, in writing, within 90 days after the examination. The request must include your name, candidate ID number, mailing address, date of examination and your signature. Use the form in the back of this Handbook to request a duplicate score report. Duplicate score reports will be mailed approximately five business days after receipt of the request. Score reports are only provided to sponsoring doctors.

DAANCE Reading Resources List

The following books are suggested reading materials that will enhance your educational experience. Several of these resources are available through AAOMS Publications or at large public or medical/dental school libraries:

American Association of Oral and Maxillofacial Surgeons. *Dental Anesthesia Assistant National Certification Examination Study Materials*.

American Association of Oral and Maxillofacial Surgeons. 2018. *Office Anesthesia Evaluation Manual*, 9th edition. (To order, phone: 800-366-6725; online: AAOMSstore.com)

American Heart Association. 2015. *Advanced Cardiovascular Life Support (ACLS) Provider Manual*. Item #15-1005. (To order, contact Worldpoint ECC; phone: 888-322-8350; online: worldpoint.com)

DAANCE Examination Content Outline

The content validity of DAANCE is based on analysis of the results of a survey of the tasks of the Dental Anesthesia Assistant (DAA). The results and subsequent analysis were sufficiently detailed to provide a professionally sound and legally defensible basis for the development of a certification examination. Each question on the examination is linked directly to one of the five tasks listed below. In other words, each question is designed to test if the candidate possesses the knowledge necessary to perform the task and/or has the ability to apply it to a job situation.

Each of the tasks was rated as significant to practice by DAAs who responded to the survey. After the survey data were analyzed, the results were reviewed and decision rules were established. These rules were used to determine which tasks were appropriate for assessment and, therefore, for inclusion in the content domain and final test. Thus, the examination content is valid for DAAs and examinations constructed to meet these specifications will have substantial evidence of validity and job-relatedness.

The following tasks are those that form the DAANCE content outline and to which the examination questions are linked:

I. Apply Knowledge of Basic Sciences (15 items)

A. Cardiovascular anatomy and physiology

1. The myocardium, chambers, vessels and valves
2. The heart as a pump and the conduction system
3. Vasculature of importance in OMS
 - a. Vasculature of the head and neck
 - b. Vasculature of the arm

B. Pulmonary anatomy and physiology

1. The upper and lower airway
2. Physiology of respiration and lung volumes
3. Control of respiration

C. The nervous system

1. Central and peripheral
2. Cranial and spinal nerves
3. Sympathetic nervous system

D. Pharmacology

1. Mechanisms and sites of action
2. Absorption and metabolism
3. Mathematics of anesthetic drugs
4. Levels of sedation and anesthesia
5. Anesthetic approaches
 - a. Intravenous
 - b. Inhalation

II. Evaluate and Prepare Patient (20 items)

A. Verify that chart is for the patient

B. Elicit chief complaint (CC)

C. Collect history of present illness

D. Review past medical/dental history (PMH)

E. Perform review of systems

1. Nervous system
2. Head, eyes, ears, nose, throat (HEENT)

3. Cardiovascular
4. Respiratory
5. Endocrine
6. Renal and hepatic
7. Musculoskeletal (malignant hyperthermia)

F. Review social/family history/dependence

G. Perform physical assessment

H. Document breathing pattern

I. Survey skin – color, bruising, etc.

J. Document height and weight

K. Assess that the patient is alert and oriented

L. Record vital signs

M. Document ASA classification

III. Assist in Administration of Anesthetic Drugs (18 items)

A. Prepare anesthetics

1. Local anesthetics
 - a. Esters and amides
 - b. Vasoconstrictors
2. Intravenous sedation anesthetics
 - a. Benzodiazepines
 - b. Narcotics
 - c. Narcotic agonist – antagonists
3. Oral sedation anesthetics – benzodiazepines
4. Intravenous general anesthetics
 - a. Propofol
 - b. Ketamine
 - c. Barbiturates
5. Adjunctive agents
 - a. Topical local anesthetics
 - b. Drug reversal agents
 - c. Anticholinergics
 - d. Antihistamines, ataractics and related agents
 - e. Antiemetics
 - f. Steroids
 - g. Muscle relaxants

B. Assist in administration of anesthetics

1. Local anesthetics
 - a. Esters and amides
 - b. Vasoconstrictors
2. Intravenous sedation anesthetics
 - a. Benzodiazepines
 - b. Narcotics
 - c. Narcotic agonist – antagonists
3. Oral sedation anesthetics – benzodiazepines
4. Intravenous general anesthetics
 - a. Propofol
 - b. Ketamine
 - c. Barbiturates
5. Adjunctive agents
 - a. Topical local anesthetics
 - b. Drug reversal agents
 - c. Anticholinergics
 - d. Antihistamines, ataractics and related agents
 - e. Antiemetics
 - f. Steroids
 - g. Muscle relaxants

IV. Prepare Anesthesia Equipment and Perform Patient Monitoring (22 items)**A. Monitor Airway Maintenance**

1. Identify routine airway equipment
2. Apply nasal canula or nasal hood/mask
3. Airway maintenance
 - a. Routine head tilt, chin lift or jaw thrust
 - b. Assist with airway adjuncts as necessary
 - (1) Nasopharyngeal airway
 - (2) Oropharyngeal airway
 - (3) LMA
 - (4) Endotracheal intubation

B. Prepare anesthesia equipment and perform patient monitoring

1. Maintain anesthesia equipment
 - a. Perform equipment check
 - b. Check emergency airway equipment
 - c. Check daily anesthetic gases, etc.
 - d. Ensure gases are turned on/off each day
2. Confirm NPO and pre-medication status
3. Prepare patient – seat, drape, etc.
4. Place monitors, record data and report to surgeon
 - a. Pulse oximeter
 - b. Blood pressure
 - c. EKG
5. Document anesthesia record
 - a. Monitor data, events with times
 - b. Dosages of medications
6. Check position of patient
7. Observe air exchange (breathing)
8. Monitor status of IV line
9. Review and record data from monitors during procedure
 - a. Blood pressure
 - b. Pulse/O₂ stat
 - c. EKG
 - d. End tidal CO₂ if available
10. Complete postoperative monitoring
11. Determine discharge criteria are met
12. Complete postoperative record keeping
13. Record any controlled substances dispensed or prescribed

V. Assist with Emergency Treatment and Protocols (25 items)**A. Respiratory emergencies**

1. Airway obstruction
2. Laryngospasm
3. Bronchospasm
4. Emesis and aspiration
5. Hyperventilation
6. Respiratory depression and apnea

B. Cardiovascular emergencies

1. Significant hypertension
2. Significant hypotension
3. Acute coronary syndrome – angina
4. Acute coronary syndrome – myocardial infarction (MI)
5. Symptomatic bradycardia
6. Supraventricular tachycardia
7. Premature ventricular contractions
8. Ventricular tachycardia
9. Ventricular fibrillation
10. Asystole/PEA
11. Cerebrovascular accident (stroke)
12. Venipuncture complications

C. Endocrine disorders

1. Hypoglycemia and insulin shock
2. Acute adrenal insufficiency

D. Immune system

1. Mild allergic reactions
2. Severe allergic reactions and anaphylaxis

E. Nervous system emergencies

1. Syncope
2. Seizures



Dental Anesthesia Assistant National Certification Examination Advisory Committee Roster

Stanley Smith, DDS

Chair
New Rochelle, N.Y.

Stephanie J. Drew, DMD

Atlanta, Ga.

Bradford Porter, DDS

Marlton, N.J.

Jen Brady

Bend, Ore.

Alan L. Felsenfeld, DDS, MA

Los Angeles, Calif.

daanceinquiries@aaoms.org

Judy Bull

Marlton, N.J.

Virginia W. Fulmer

Chapel Hill, N.C.

DAANCE Examination Blueprint Matrix		# of questions in each of the three cognitive levels on the exam		
Content Category	# of questions	Recall	Application	Analysis
Apply Knowledge of Basic Sciences	15	13	2	0
Evaluate and Prepare Patient	20	5	15	0
Assist in Administration of Anesthetic Drugs	18	6	12	0
Prepare Anesthesia Equipment and Perform Patient Monitoring	22	8	13	1
Assist With Emergency Treatment and Protocols	25	5	5	15
Pretest Items (unscored)	15			
Total	115 (100 Scored)	37	47	16
% of Total	100%	37%	47%	16%

Sample Questions

The following five questions have been removed from active use in the DAANCE item pool that is established, maintained and owned by the AAOMS DAANCE Advisory Committee. The purpose of releasing these questions is to provide information that could assist prospective candidates in preparing for the examination and to further their understanding of the examination process.

Following each question is the correct response (key). Additional information about the DAANCE examination and certification program is available from a variety of other sources. These sources include, but are not limited to, other sections in this Handbook, AAOMS.org and goAMP.com.

1. The valve that covers the airway to prevent food from entering the trachea is the

- A. esophagus
- B. uvula
- C. epiglottis
- D. carina

Key: C

3. The most significant adverse reaction to meperidine (Demerol) is

- A. dysphoria
- B. hypoglycemia
- C. postural hypotension
- D. respiratory depression

Key: D

5. Depressed respirations secondary to administration of narcotics may be effectively reversed with

- A. diphenhydramine (Benadryl)
- B. meperidine (Demerol)
- C. fentanyl (Sublimaze)
- D. naloxone (Narcan)

Key: D

2. Cigarette smokers have an increased risk for which of the following diseases?

- A. renal disease
- B. emphysema
- C. hypertension
- D. diabetes mellitus

Key: B

4. Pulse oximetry readings provide a measurement of

- A. arterial blood pressure
- B. hemoglobin saturation
- C. the absorption of blue light by arterioles
- D. the number of red corpuscles per milliliter

Key: B

Continuing Education Credit

The American Association of Oral and Maxillofacial Surgeons is an ADA CERP Recognized Provider.

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

The American Association of Oral and Maxillofacial Surgeons designates this activity for 36 continuing education credits.

DAANCE Registration and Required Documentation Checklist

- ☐ Registration Form is fully completed.
- ☐ Registration Form is signed by registrant. (Electronic signatures are not accepted.)
- ☐ Registration Form is signed by surgeon. (Electronic signatures are not accepted.)
- ☐ Copy of valid CPR and/or BLS card is included with the Registration Form.
CPR and/or BLS certification must be current through your examination date (a minimum of six months).

Additional documentation required for non-AAOMS member sponsoring dental professionals:

- ☐ Copy of valid anesthesia permit is included with Registration Form.

Dental Anesthesia Assistant National Certification Exam



Fees and Payment

Tuition includes the DAANCE Study Materials and Examination Fee.

Additional suggested reading:

*AAOMS Office Anesthesia
Evaluation Manual, 9th edition
Copyright 2018*

This additional reading must be ordered separately.

Substitution/Cancellation and Refund Policies

All substitutions and cancellations must be made using the DAANCE Substitutions and Cancellations Form provided in the DAANCE Candidate Handbook or on the AAOMS website at AAOMS.org/DAANCE. Substitutions require the Substitution/Cancellation Form accompanied by a completed DAANCE Registration Form and a valid CPR and/or BLS card for the new registrant.

Candidates may reschedule ONE appointment for examination at no charge by calling PSI at 833-333-4755 at least two business days prior to the scheduled testing session. A rescheduling fee of \$85 will be charged for any subsequent appointment changes within the candidate's eligibility period.

It is the responsibility of the sponsoring doctor to notify PSI of the substitution and to transfer previously provided course material to the substitute registrant. New course material will not be provided to the substitute registrant.

If a cancellation is made before 90 days, the sponsoring doctor will receive a refund equal to 50 percent of the registration fee. Substitutions must be made 30 days before the candidate's expiration of eligibility.

Candidates have six months from their activation date to take their examination. If unsure of the testing deadline date, contact PSI at 833-333-4755.

†Candidates who wish to take an examination in Puerto Rico or outside the United States should submit a written request containing the desired testing location along with the required additional \$105 fee with their application.

Registration Form

Please remember to include a copy of your CPR or BLS certification with your registration form to receive the study materials. Your CPR or BLS certification must be current through your examination date (a minimum of six months). Allow PSI three weeks to process your application and mail your study materials. For inquiries, please call PSI at 833-333-4755.



Assistant Information (as it should appear on the certificate):

Please print or type

Mr./Ms. First Name Middle Initial Last Name Degree(s)/Credentials (e.g., RN, RDA, CDH, etc.)

Email Address

(Note: Correspondence about the course and examination will be sent to the email address you provide here. Any changes to this email address should be provided to PSI using the change address/email form.)

Have you previously passed in the DAANCE program? ☐ Yes ☐ No

Provide your current practice address information below. Do not provide your home address. It is your responsibility to contact PSI should this information change.

Sponsoring Doctor

Practice Name

Practice Address

Suite #

City

State

ZIP

Email

Daytime telephone number

I certify that the assistant named above will have completed course materials and quizzes prior to sitting for the Dental Anesthesia Assistant National Certification Examination. I further certify that the participant named above possesses a valid CPR or BLS card and will maintain current CPR or BLS certification through the date of the examination.

Participant's Signature

Date

Sponsoring Doctor's Signature

Date

A copy of the participant's current CPR or BLS card is enclosed ☐ Y ☐ N

Please indicate the status of your sponsoring surgeon:

Tuition

☐ AAOMS Member / OMS Sponsor

\$345

☐ Other Dental Professional*

\$545

Specify Specialty _____

**Non-AAOMS member/sponsoring dental professional must enclose a copy of their valid anesthesia permit.*

☐ Puerto Rico or International Location†

\$105

Total Tuition: \$ _____

PAYMENT BY CREDIT CARD

When paying by credit card, complete the information below and return it with completed registration form. **Fax to: 913-895-4650 Mail to: PSI, 18000 W. 105th St., Olathe, KS 66061**

Credit Card: ☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

Name of Cardholder

Credit Card Number

Expiration Date

Cardholder Signature

Credit Card Billing Address

City

State

ZIP

PAYMENT BY CHECK

Payment in the form of personal check, company check, cashier's check or money order must be made in U.S. currency and payable to PSI Services, Inc. Mail with completed form to: PSI Candidate Services, 18000 W. 105th St., Olathe, KS 66061

Request for Special Examination Accommodations



If you have a disability covered by the Americans with Disabilities Act, please complete this form and provide the Documentation of Disability-related Needs on the next page so your accommodations for testing can be processed efficiently. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality. Please return this form with your examination application and fee to PSI within 45 days of the desired testing date.

Candidate Information:

Name (Last, First, Middle Initial, Maiden Name) _____

Name of Practice/Facility/Company _____

Title _____

Mailing Address _____

City _____ State _____ ZIP _____

Daytime Phone Number _____

Email _____

Special Accommodations:

I request special accommodations for the Dental Anesthesia Assistant National Certification Examination (DAANCE). Please provide (check all that apply):

- ☐ Reader
- ☐ Extended testing time (time-and-a-half)
- ☐ Reduced distraction environment
- ☐ Other special accommodations (please specify) _____

Comments _____

Signed _____ Date _____

Return this form with your examination application and fee to:

PSI
18000 W. 105th St.
Olathe, KS 66061-7543

If you have questions, call Candidate Services at 833-333-4755.

Documentation of Disability-related Needs



Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist) to ensure that PSI is able to provide the required examination accommodations.

Professional Documentation:

I have known _____ since ____ / ____ / ____
in my capacity as a _____ (Title).

The candidate discussed with me the nature of the examination to be administered. It is my opinion that, because of this candidate's disability described below, he/she should be accommodated by providing the special arrangements listed on the Request for Special Examination Accommodations form.

Description of Disability

Signed _____

Title _____ Date _____

Printed Name _____

Address _____

Phone Number _____ License # (if applicable) _____

Return this form with your examination application and fee to:

PSI
18000 W. 105th St.
Olathe, KS 66061-7543

If you have questions, call Candidate Services at 833-333-4755.

Request for Duplicate DAANCE Examination Score Report

(Duplicate score reports available to sponsoring doctors only.)



Directions: You may use this form to ask the testing agency, PSI, to send a duplicate copy of your score report. Score reports are only provided to sponsoring doctors. This request must be postmarked no later than 90 days after the examination administration. Proper fees and information must be included with the request. Please print or type all information in the form below. Be sure to provide all information and include the correct fee, or the request will be returned.

Fees: \$25 per copy. Please enclose a cashier's check or money order payable to PSI Services, Inc. Do not send cash. Write your test identification number on the face of your payment.

Mail to: PSI Services, Inc. Amount enclosed \$ _____
18000 W. 105th St.
Olathe, KS 66061-7543, USA Examination Date _____

Print your current name and address:

Name _____ Credentials _____

Candidate/DAANCE ID _____

Sponsoring Doctor _____ Practice Name _____

Practice Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____

Country _____

Work Telephone _____ Other Telephone (i.e., mobile) _____

Email _____

If the above information was different at the time you were tested, please write the original information below:

Name _____

Candidate/DAANCE ID _____

Sponsoring Doctor _____ Practice Name _____

Practice Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____

Country _____

Work Telephone _____ Other Telephone (i.e., mobile) _____

Email _____

I hereby request PSI to send a duplicate copy of my score report to the first address shown above.

Candidate signature _____ Date _____

Request to Change Mailing or Email Address



(All address and email changes must be submitted in writing, either by mail or facsimile, including an authorization signature and candidate ID number.)

You may use this form to request that DAANCEAC enter a change of practice address, including email address, into the database once you have registered for the examination. To protect your confidential record and ensure that no unauthorized person is able to alter your record, all address changes are required to be submitted in writing and included with your authorizing signature. Do not use your home address.

DAANCEAC will forward your address change to the testing agency PSI. If you have questions, contact DAANCEAC at 847-678-6200 or toll-free 800-822-6637.

Mail or fax your request to: DAANCE Advisory Committee
AAOMS
9700 W. Bryn Mawr Ave.
Rosemont, IL 60018
Fax: 847-678-4619

Print your NEW name and practice address

Name _____

Candidate/DAANCE ID _____

Sponsoring Doctor _____ Practice Name _____

Practice Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____

Country _____

Work Telephone _____ Other Telephone (i.e., mobile) _____

Email _____

Print your OLD information as it appeared on your application form

Name _____

Sponsoring Doctor _____ Practice Name _____

Practice Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____

Country _____

Work Telephone _____ Other Telephone (i.e., mobile) _____

Email _____

Examination Date _____ Test Site _____

I hereby authorize DAANCEAC and PSI to change my address in the examination database as shown above.

Candidate signature

Date

DAANCE Substitution/Cancellation/Reschedule Form



Submit completed form to PSI:

- Mail: PSI, 18000 W. 105th St., Olathe, KS 66061-7543
- Fax: 913-895-4650

Request for (check one): ☐ **Substitution** ☐ **Cancellation** ☐ **Rescheduling**

- To make a substitution, you must submit a completed Substitution/Cancellation Form accompanied by a completed DAANCE Registration Form (page 20) and a valid CPR and/or BLS card for the new registrant.
- Substitutions must be made a minimum of 30 days before the candidate's expiration of eligibility.*
Note: A candidate may be permitted to participate in only one substitution per eligible record.
- Cancellations will not be accepted after 90 days of candidate's activation.
- If a cancellation is made before 90 days, the sponsoring doctor will receive a refund equal to 50 percent of the registration fee.
- Rescheduled appointment dates must be before the candidate's expiration of eligibility. Note that rescheduling does not extend eligibility.* An \$85 rescheduling fee may apply.
- New course material will not be provided to the substitute registrant.

REQUEST FOR SUBSTITUTION/CANCELLATION OR RESCHEDULING

Name _____

Candidate/DAANCE ID _____

Registrant (Substitute) to be enrolled:

Name _____

Candidate/DAANCE ID _____

Sponsoring Doctor

Sponsoring Doctor Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Email _____

Signature of person requesting substitution or cancellation _____ Date _____

Please note: You will receive written confirmation regarding your request within 10 business days. If you do not receive written confirmation within that time period, please contact PSI at 833-333-4755.

REQUEST TO RESCHEDULE TEST APPOINTMENT

Candidates may reschedule ONE appointment within the eligibility period at no charge; a rescheduling fee of \$85 is required for any subsequent appointment change within the eligibility period. PLEASE NOTE: If this is your first request to reschedule your test appointment, you do not need to complete this form, but PSI must be contacted at least two business days in advance of your appointment date.

It is your responsibility to complete and submit this form according to the AAOMS Candidate Handbook Policies.

Payment type: ☐ Check for \$85 payable to PSI Services, Inc. enclosed ☐ Credit Card (MasterCard or Visa)

Credit Card # _____ Exp. Date _____

Name of Cardholder: _____

**Failure to comply will result in a candidate's registration being forfeited.*

Request for Duplicate Certificate and/or Pin Form



To order a replacement certificate: Please complete this form and send it to the address listed below with a \$20 check **payable to AAOMS**.

Note: If you need a certificate from the current year, please call PSI at 833-333-4755 for a replacement copy.

To order a replacement pin: Please complete this form and send it to the address listed below with a \$10 check **payable to AAOMS**.

DAANCE

9700 W. Bryn Mawr Ave.
Rosemont, IL 60018-5701

Voice: 847-678-6200

Fax: 847-678-4619

Your name as it should appear on the certificate

Your name at the time you took your exam (if different)

Sponsoring doctor's name at the time you took your exam

Year and month you took the exam (if you don't remember, please write the approximate year)

Mailing address (please indicate if this is your home or work address)

Contact phone number or email address

The information on this form is confidential and may be legally privileged. It is intended solely for the addressee. If you are not the intended recipient, any disclosure, copying, distribution or any action taken or omitted to be taken in reliance on it is prohibited and may be unlawful.



American Association of Oral and Maxillofacial Surgeons

9700 W. Bryn Mawr Ave.

Rosemont, IL 60018-5701

800-822-6637 • 847-678-6200 • fax: 847-678-6286

AAOMS.org

DENTAL ANESTHESIA ASSISTANT
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National Certification Examination®



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: _____

Course Sponsor: _____

Location: _____

Name of person submitting information: _____

Email address: _____ Phone: _____

Title: _____ Date: _____

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? **Yes No**

2. Number of hours of instruction: _____

3. Is this course sponsor AGD PACE or ADA CERP approved? **Yes No**

ACD PACE Provider Number: _____

ADA CERP Provider Number: _____

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? **Yes No**

If yes, please summarize the changes below:

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: _____ Date: _____

Printed Name: _____

OMS Professional Staff Development Courses

AAOMS allied staff members are eligible for a discounted course registration fee. For more information on AAOMS allied staff membership visit the [Membership Categories](#) page.



Follow Staff Programs on Facebook!

AAOMS Professional Staff Development courses are designed specifically for the oral and maxillofacial surgery assistant. More information about each program can be found by clicking on the links below.

[EXPAND ALL](#) | [COLLAPSE ALL](#)

Courses	Category
+ Advanced Protocols for Medical Emergencies in the OMS Office	Live In-Person
+ Anesthesia Assistants Skills Lab	Live In-Person
+ On-Line Anesthesia Review for Dental Anesthesia Assistants	Online
– Anesthesia Assistants Review Course	Live In-Person
<p>The AAOMS Anesthesia Assistants Review Course is a continuing education course for clinical staff to improve their anesthesia knowledge and skills. Participants will benefit from this intensive review course which focuses on principles of anesthesia learned through structured training, as well as discussion of the latest innovations and methods of anesthesia administration, monitoring, and emergency management.</p> <p>Taught by oral and maxillofacial surgeons, this comprehensive review course will include basic sciences, patient evaluation and preparation, anesthetic drugs and techniques, monitoring, and emergency procedures.</p> <p>The Anesthesia Assistants Review Course is open to all members of dental anesthesia assisting teams. After completing the course, participants will be better prepared to assist in the administration of sedation and/or general anesthesia and patient monitoring in the office. The AARC also helps assistants prepare for the Dental Anesthesia Assistant National Certification Examination (DAANCE).</p> <p>Due to current COVID-19 restrictions in Cook County, Ill., the AARC – scheduled for March 12-13, 2022 – has been cancelled.</p> <p>Those currently registered for the course will be issued a full refund by Jan. 14. Questions? Contact AAOMS registration staff. Note: Registrants are responsible for canceling their own transportation and hotel accommodations.</p> <p>OMS staff are encouraged to register for the On-Line Anesthesia Review for Dental Anesthesia Assistants.</p>	



**American Association of Oral and Maxillofacial Surgeons
Anesthesia Assistants Review Course
December 3-4, 2021
Sheraton Grand Chicago
Chicago, IL**

Day 1- Friday, December 3, 2021

7:00 AM to 8:00 AM	Registration - Continental Breakfast provided	
8:00 AM to 8:05 AM	Welcome, Introduction & Opening remarks	Donald P. Lewis, DDS
8:05 AM to 8:30 AM	A Systems Approach	“
8:30 AM to 10:00 AM	The Respiratory System Parts I and II	“
10:00 AM to 11:45 AM	The Immune and Other Body System	“
11:45 AM to 12:30 PM	<i>Lunch provided</i>	
12:30 PM to 3:30 PM	The Cardiovascular System Introduction to the Conducting System of the Heart EKG Interpretation	J. Alexander Smith, DMD

Day 2- Saturday, December 4, 2021

7:00 AM to 7:45 AM	Continental Breakfast provided	
7:45 AM to 9:15 AM	The Nervous System and The Endocrine System	Larry E. Stigall, DDS
9:15 AM to 9:30 AM	Preparation of the Patient for Anesthesia	“
9:30 AM to 11:00 AM	Anesthetic Drugs and Techniques	“
11:00 AM to 12:00 PM	Pediatric and Geriatric Considerations	“
12:00 PM to 1:00 PM	Emergency Scenarios and Q & A	“



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Patient Safety Is Our Priority

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Chicago

December 4-5, 2022

Assistant Course

December 4-5, 2022

[Chicago Hotel Reservations](#)

[CE + Fee Info](#)



The General Anesthesia and Minimal & Moderate Sedation courses offer 16 hours of CE and

[Click for Phoenix Handouts](#)

x

and includes one lunch on the first day, and continental breakfasts and breaks each day.

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 12 continuing education credits. The ADSA is an Accepted National Sponsor (#218597) for FAGD/MAGD Credit.

Special early-bird fees starting at just \$645 remain discounted only until the hotel cutoff date. Cancel anytime less \$50.

Covid, Duty of Care & Waiver/Release Information

Covid Information

Call Us

Email Us

211 E. Chicago Ave. | Suite 1720 | Chicago, IL 60611



A21-Chicago | 1 hr CE | Sedation in the Post COVID-19 P...

Online Course

\$49.0



Course Content

1hr CE - Ernest Luce, DDS of University of Texas Health Science Center San Antonio leads this course.

Credits

1

Objectives:

- Learn about the lung sounds in post-covid patients
- Learn about cardiac abnormalities in post-covid patients
- Explain how neurocognitive "fragile" patients who are post-COVID-19 may be at greater risk of further cognitive decline with a sedation/anesthesia procedure.

Speaker:

Ernest Luce, DDS
University of Texas Health Science Center San Antonio
luce@uthscsa.edu

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 3/1/2022 for Three Years



Enroll in the course to see this area.

A21-Chicago | 1 hr CE | Understanding the Fundament...

Online Course

\$49.0



Course Content

1 hr CE - Jason W. Brady, DM, leads this course on Understanding the Fundamentals of Sedation.

Credits

1

Objectives:

- Describe the use of monitors
- Describe the Fundamentals of Sedation
- Discuss common medications

Speaker:

Jason Brady, DMD
University of Southern California
jwbrady@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 3/1/2022 for Three Years



Enroll in the course to see this area.

A21-Chicago | 1 hr CE | The Rock Star Dental Assistant ...

Online Course

\$49.0



Course Content

Tija Hunter leads ADSA's Anesthesia and Sedation course for auxiliaries.

Objectives:

- Creating Your Own Mission Statement
- Being Kind To Yourself
- Planning Your Future

Speaker:

Tija Hunter

tijaefda@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology

211 E. Chicago Ave. #1720

Chicago, IL 60611

Refunds/Cancellation:

312.664.8270

adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 3/1/2022 for Three Years

Credits

1



Enroll in the course to see this area.

A21-Chicago | 1.5 hr CE | Keys to Successful Airway Ma...

Online Course

\$73.5



Course Content

1.5hr CE - Kenneth Lee, DDS, leads this course for assistants.

Credits

Objectives:

- Learn About Airway Rescue
- Discuss Airway Anatomy
- Learn About Airway Emergencies

1.5

Speaker:

Kenneth Lee, DDS
Associate Clinical Professor and Director of Moderate Sedation
University of Southern California
anesthesiaDDS@mac.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE:
ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1.5 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:
NONE

Published 3/1/2022 for Three Years



Enroll in the course to see this area.

A21-Chicago | 1.5 hr CE | Office Preparation and Use of ...

Online Course

\$73.5



Course Content

Andrea M Fonner, DDS, Dentist Anesthesiologist, leads ADSA's Anesthesia and Sedation course for auxiliaries features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- Describe General Office Preparation for medical emergencies
- Teach use of the Ten Minutes App
- Describe the ideal emergency kit and prep

Speaker:

Andrea M Fonner, DDS

Private Practice

afonnerdds@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology

211 E. Chicago Ave. #1720

Chicago, IL 60611

Refunds/Cancellation:

312.664.8270

adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 3/1/2022 for Three Years

Credits

1.5



Enroll in the course to see this area.

A21-Chicago | 2 hr CE | Recognizing and Treating Emer...

Online Course

\$98.0



Course Content

2.0 hr CE - Kenneth Lee, DDS, leads this course for assistants.

Objectives:

- Learn About Recognizing and Treating Emergencies in Anesthesia
- Discuss the Anatomy of an Error
- Learn About Respiratory Emergencies

Speaker:

Kenneth Lee, DDS
Associate Clinical Professor and Director of Moderate Sedation
University of Southern California
anesthesiaDDS@mac.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE:
ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 2.0 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:
NONE

Published 3/1/2022 for Three Years

Credits

2



Enroll in the course to see this area.

Assistants | 1 hr CE | Anesthetic Drugs | HD-20.0 Video

Online Course

\$49.0



Course Content

1 hr CE - Kenneth Lee, DDS, leads this course for assistants.

Objectives:

- Considerations for Drug Selection & Administration
- Learn Basic Intravenous Techniques
- Opioid Agonists Utilized in Dental Anesthesia

Speaker:

Kenneth Lee, DDS
Associate Clinical Professor and Director of Moderate Sedation
University of Southern California
anesthesiaDDS@mac.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #780
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:

NONE

Published 6/1/2020 for Three Years

Credits

1



Enroll in the course to see this area.

Assistants | 1 hr CE | Identifying Roles in an Anesthetic ...

Online Course

\$49.0



Course Content

1 hr CE - Maria Arcuri, RN, BScN, MEd, leads ADSA's Anesthesia and Sedation course for auxiliaries features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- Why do medical emergencies occur?
- Preventing medical emergencies
- Preparing for emergencies
- Team empowerment
- Communication

Speaker:

Maria Arcuri, RN, BScN, MEd
Ora Dental Nursing
maria.arcuri@oradentalnursing.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE:

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:
NONE

Published 6/1/2020 for Three Years

Credits

1



Enroll in the course to see this area.

Assistants | 1 hr CE | Key Points in Pediatrics | HD-20.0 ...

Online Course

\$49.0



Course Content

1 hr CE - Amanda Okundaye, DDS, leads ADSA's Anesthesia and Sedation course for auxiliaries.

Credits

1

Objectives:

- Discuss goals for sedation to control behavior to allow intended procedure to be completed
- Considerations for anatomical and physiological differences
- Discuss how pediatric patients may be more vulnerable to respiratory depression and may pass into deeper sedation than what was intended

Speaker:

Amanda Okundaye, DDS
University of Nevada Las Vegas
ddsanesthesia@gmail.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE:

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:
NONE

Published 6/1/2020 for Three Years



Enroll in the course to see this area.

Assistants | 1 hr CE | Nitrous Oxide | HD-20.0 Video

Online Course

Course Content

1 hr CE - Kenneth L. Reed, DMD, leads ADSA's Anesthesia and Sedation course for auxiliaries.

Objectives:

- Discuss The Properties of Nitrous Oxide
- Discuss The Ideal Candidates for N2O
- Explain The Uptake, Distribution, Elimination Of A Gas

Speaker:

Kenneth L. Reed, DMD
NYU Langone Hospitals - Brooklyn
klrdmd@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 6/1/2020 for Three Years

Credits

1



Enroll in the course to see this area.

Assistants | 1 hr CE | Preparation for Pediatric Procedu...

Online Course

\$49.0



Course Content

1hr CE -Jeffrey Brownstein, DDS leads this review course for auxiliaries that features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Credits

1

Objectives:

- Levels of Procedural Sedation & Anesthesia
- Differences Between Pediatric & Adult Anatomy
- Preparing A Pediatric Patient for Procedural Sedation
- Preparing An Operatory for Procedural Sedation & Anesthesia

Speaker:

Jeffrey Brownstein, DDS
Private Practice
doctorjnb@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE: ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests: NONE

Published 6/1/2020 for Three Years



Enroll in the course to see this area.

Assistants | 1.5 hr CE | Emergencies Scenarios: An inter...

Online Course

\$73.5



Course Content

1.5 hr CE - Kenneth Lee, DDS, leads this course for assistants.

Credits

1.5

Objectives:

- Learn how to handle respiratory emergencies like an airway obstruction
- Learn the anatomy of an error
- Considerations for preparation, training, practice, readily available equipment and medications

Speaker:

Kenneth Lee, DDS
Associate Clinical Professor and Director of Moderate Sedation
University of Southern California
anesthesiaDDS@mac.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #780
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 6/1/2020 for Three Years



Enroll in the course to see this area.

Assistants | 1.5 hr CE | Emergency Preparedness | HD...

Online Course

\$73.5



Course Content

1.5 hr CE - Maria Arcuri, RN, BScN, MEd, leads ADSA's Anesthesia and Sedation course for auxiliaries features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- Types of sedation delivered and their characteristics
- Airway/respiratory system review
- Review and demonstration of airway adjuncts
- Review and demonstration of other useful medical equipment

Speaker:

Maria Arcuri, RN, BScN, MEd
Ora Dental Nursing
maria.arcuri@oradentalnursing.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE:

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1.5 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:
NONE

Published 6/1/2020 for Three Years

Credits

1.5



Enroll in the course to see this area.

Assistants | 1.5 hr CE | Intraoperative + Postoperative ...

Online Course

\$73.5



Course Content

1.5 hr CE - Maria Arcuri, RN, BScN, MEd, leads ADSA's Anesthesia and Sedation course for auxiliaries features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- The purpose and use of anesthetics
- Understanding
- Local Anesthesia
- Oral Sedation
- Inhaled Anesthetics
- Intravenous Anesthetics

Speaker:

Maria Arcuri, RN, BScN, MEd
Ora Dental Nursing
maria.arcuri@oradentalnursing.com

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CE:

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Corporate Sponsorship/Conflict of Interests:
NONE

Published 6/1/2020 for Three Years

Credits

1.5



Enroll in the course to see this area.

Assistants | 2 hr CE | Office-Based Mobile General Anes...

Online Course

\$98



Course Content

2hr CE -Jeffrey Brownstein, DDS leads this review course for auxiliaries that features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- Understand the four ASA Levels of Procedural Sedation.
- Understand the indications & contraindications of office-based general anesthesia.
- Understand the differences between the open airway & intubated general anesthetic techniques.
- Understand the advantages & disadvantages of the open airway vs. intubated general anesthetic techniques.
- Understand the 3 methods for medication delivery during a general anesthetic.
- Understand the use of the Mallampati and Brodsky Airway Classifications.
- Understand the monitoring systems utilized during general anesthesia.
- What are the basic elements of informed consent?
- What are the surgical benefits associated with general anesthesia?
- Understand the types of induction used in general anesthesia.

Speaker:

Jeffrey Brownstein, DDS
Private Practice
doctorjnb@gmail.com

Sponsoring Organization:
American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:
312.664.8270
adsahome@icloud.com

Course Type:
Video Online Quiz

CE: ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 2 hours of continuing education credit.

Corporate Sponsorship/Conflict of Interests: NONE

Published 6/1/2020 for Three Years

Credits

2

Enroll in the course to see this area.

Assistants | 1.5 hr CE | Preoperative Assessment | HD...

Online Course

\$73.5



Course Content

1.5 hr CE - Maria Arcuri, RN, BScN, MEd, leads ADSA's Anesthesia and Sedation course for auxiliaries features an in-depth approach designed especially for those who work in oral and maxillofacial surgery and moderate sedation practices.

Objectives:

- Identifying ASA physical status classifications prior to care
- Collection of appropriate documentation for the use of obtaining medical history and being able to identify medically compromised patients
- Correspondence with family physicians and specialists through written correspondence in providing medical letter writing in providing proper medical management prior to dental care
- How to assess patient mobility for safe patient handling and fall management
- How to prepare patients for treatment using the ADA guidelines for sedation
- Pre-operative baseline vital signs assessment (what is considered normal ?)

Speaker:

Maria Arcuri, RN, BScN, MEd
Ora Dental Nursing
maria.arcuri@oradentalnursing.com

Sponsoring Organization:

American Dental Society of Anesthesiology
211 E. Chicago Ave. #1720
Chicago, IL 60611

Refunds/Cancellation:

312.664.8270
adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

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Corporate Sponsorship/Conflict of Interests:

NONE

Published 6/1/2020 for Three Years

Credits

1.5



Enroll in the course to see this area.

A21-Chicago | 1.5 hr CE | Learn, Leverage & Lead | 21 V...

Online Course

\$73.5



Course Content

Tija Hunter, CDA leads ADSA's Anesthesia and Sedation course for auxiliaries.

Objectives:

- The Qualities of a Great Leader
- Elements of Personal Communication
- Planning Strategically

Speaker:

Tija Hunter

tijaefda@gmail.com

Sponsoring Organization:

American Dental Society of Anesthesiology

211 E. Chicago Ave. #1720

Chicago, IL 60611

Refunds/Cancellation:

312.664.8270

adsahome@icloud.com

Course Type:

Video Online Quiz

CE:

ADSA is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. ADSA designates this activity for 1.5 hour of continuing education credit.

Corporate Sponsorship/Conflict of Interests:

NONE

Published 3/1/2022 for Three Years

Credits

1.5



Enroll in the course to see this area.



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.com

Permit to Monitor Patients Under Anesthesia Course Review

Course Title: _____

Course Sponsor: _____

Location: _____

Number of hours: _____

Is this course intended to provide the basic information needed for dental assistants to become permitted to monitor patients under anesthesia? Yes No

Is this course AGD PACE or ADA CERP approved? Yes No

ACD PACE Provider Number: _____

ADA CERP Provider Number: _____

Description of course:

See Attached

Culture of Safety -
Introduction to preparing the provider, staff and environment for implementing safe procedural sedation in the practice.

Course syllabus and instructor CV are attached: Yes No

Name of person submitting information: _____

Email address: _____

Title: _____ Date: _____

Culture of Safety - Introduction to preparing the provider, staff and environment for implementing safe procedural sedation in the practice.

Patient Assessment - This module will cover basic patient assessment skills, including medical history taking, physical examinations, ASA classification, and patient selection.

Sedation - Introduction to the physiology of sedation and review of common sedative agents.

Pain - Introduction to the physiology of pain and review of common analgesic agents.

Patient Monitoring - This module will cover basic patient monitoring of vital signs during sedation including ventilation, oxygenation, heart rate and rhythm, blood pressure and temperature.

Adverse Events – Airway and Respiratory - Introduction to the causes, early recognition and treatment of potential adverse events associated with the airway and ventilation.

Adverse Events – Cardiac and Neurological - Introduction to the causes, early recognition and treatment of potential adverse events associated with the cardiovascular and nervous systems.

Recovery & Discharge - This module covers the recovery and discharge criteria of patients following procedural sedation.

RANDY PIGG BSN

14252 County Road 251 Salida, CO 81201
PHONE 888 - 581 - 4448 • E-MAIL RANDY@SEDATIONCONSULTING.COM

EDUCATION

1982 - Lone Oak High School, Paducah, KY

- ☐ Diploma

1982-84 University of Kentucky, Lexington, KY

- ☐ Undergraduate Studies

1989-91 United States Army. Ft. Knox, KY, Ft. Sam Houston, San Antonio TX, Ft. Polk, Leesville, LA

- ☐ Combat Medic Training
- ☐ Emergency Medical Technician
- ☐ Expert Field Medical Badge

1991-93 Barnes College of Nursing at Washington University Medical Center, St. Louis, MO.

- ☐ Baccalaureate of Science in Nursing

WORK EXPERIENCE

1992-02 Barnes Jewish Hospital at Washington University Medical Center, St. Louis, MO

- ☐ Patient Care Technician
- ☐ Registered Nurse, Neurology Unit
- ☐ Registered Nurse, Emergency Department, Level I Trauma Center
- ☐ Night Shift Charge Nurse

2002-06 St. Joseph Hospital West, Lake St. Louis, MO

- Registered Nurse, Emergency Department, Level II Trauma Center

2006 – Present, Conscious Sedation Consulting LLC

- ☐ Founder & Chief Executive Officer

TRAINING / ASSOCIATIONS

1989 – Present, Basic Life Support Certified

1992 – Present, Advanced Cardiac Life Support Certified

1993 – Present, Trauma Nurse Core Curriculum Certified

1993 – Present, Member Emergency Nurses Association

2006 – Present; Founder and CEO of Conscious Sedation Consulting;
Provides hands on training for physicians, dentists, nurses and dental
assistants on intravenous access, medical emergency management and
airway management techniques nationally.

2008 - Present, Member American Society of Dental Anesthesiology

2010 - Present, Member Society of Ambulatory Anesthesia by the American Society
of Anesthesiologists



South Dakota State Board of Dentistry

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www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: _____

Course Sponsor: _____

Location: _____

Name of person submitting information: _____

Email address: _____ Phone: _____

Title: _____ Date: _____

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? **Yes No**

2. Number of hours of instruction: _____

3. Is this course sponsor AGD PACE or ADA CERP approved? **Yes No**

ACD PACE Provider Number: _____

ADA CERP Provider Number: _____

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? **Yes No**

If yes, please summarize the changes below:

The course will emphasize the importance of the monitoring assistants' role as part of the anesthesia delivery team during the management of dental patients undergoing office based sedation and anesthesia. Review of the Team Model and Culture of Safety emphasis during dental anesthesia in an office based setting. Introduction of the concept of CRM(crisis resource management) and optimal team performance.

Improved understanding of the types of monitoring, how the monitors work and how to troubleshoot when they don't work.

Improved review of ECG, ECG monitoring and identifying abnormal rhythms and when to alert the anesthesia provider and team.

Review of need for early detection and intervention for life threatening emergencies.

A simulation module using a high fidelity Laerdal full body SIM Man training simulator, including a hands-on experience for assistants performing basic airway management and CPR. We will present a variety of emergency scenarios and allow them to work as a team in response to those emergency scenarios. We will provide opportunities to debrief these scenarios and learn from them .

Hands on review of office anesthesia monitoring equipment and emergency equipment including AED, airway adjuncts and emergency drugs.

Basic review of the human cardiovascular, pulmonary and central nervous systems and how they interact with anesthesia and emergency medications.

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: _____ Date: _____

Printed Name: _____

Course outline: Sedation and Anesthesia Monitoring in the Dental Practice 2022- 8 hours

- Basic review of anatomy, physiology and pathology- how does it all work and what goes wrong?
- History and Physical Examination- what is the doctor looking for?
- Monitors- what are they and how do they work?
- Basic ECG and Identifying Abnormal Rhythms
- South Dakota State Administrative Rules & Regulations & anesthesia monitoring
- Review of Anesthetic Agents- what do we use and how do they work?
- Review of Anesthesia Emergencies- what do we use and when do we use them?
- Emergency equipment & procedures- what do we need and when do we need it?
- CRM Concept
- Simulation Demonstration- putting it all together
- Question & Answer
- Course Evaluation

Added course content will emphasize the importance of the monitoring assistants' role as part of the anesthesia delivery team during the management of dental patients undergoing office based sedation and anesthesia. Review of the Team Model and Culture of Safety emphasis during dental anesthesia in an office based setting. Introduction of the concept of CRM(crisis resource management) and optimal team performance.

Improved understanding of the types of monitoring, how the monitors work and how to troubleshoot when they don't work. Improved review of ECG, ECG monitoring and identifying abnormal rhythms and when to alert the anesthesia provider and team. Review of need for early detection and intervention for life threatening emergencies.

A simulation module using a high fidelity Laerdal full body SIM Man training simulator, including a hands-on experience for assistants performing basic airway management and CPR. We will present a variety of emergency scenarios and allow them to work as a team in response to those emergency scenarios. We will provide opportunities to debrief these scenarios and learn from them .

Hands on review of office anesthesia monitoring equipment and emergency equipment including AED, airway adjuncts and emergency drugs.

Basic review of the human cardiovascular, pulmonary and central nervous systems and how they interact with anesthesia and emergency medications.

CURRICULUM VITAE

for

Jay A. Crossland, D.D.S.

**Black Hills Oral Surgery & Dental Implant
Center**

3415 5th Street Rapid City, SD 57701

PO Box 5690 Rapid City, SD 57709

605-348-6818 Work

605-348-4690 Fax

605-415-5502 Cell

bhoralsurg@gmail.com

PROFESSIONAL/PERSONAL MISSION STATEMENT

Clinically my primary interests are providing the safest and highest quality delivery of surgery and anesthesia within the scope of contemporary oral & maxillofacial surgery. I am consistently focused on maintaining the highest standards of surgical and anesthesia practice through continuous continuing education and applying the latest procedures and techniques based on evidence-based practices. In addition to clinical practice, I enjoy educating patients, fellow dental and medical colleagues and the community-at-large about oral health and the various restorative and surgical options available to them. As a member of the Black Hills community, I am always seeking opportunities to serve those less fortunate in my community while balancing my time between family, community and professional obligations and responsibilities.

EXPERIENCE & EDUCATION/TRAINING

08/2006-Present	President, Partner/Owner Private Practice- Black Hills Oral & Maxillofacial Surgery, P.C. DBA Black Hills Oral Surgery & Dental Implant Center 3415 5 th Street Rapid City, SD 57701
07/2005-08/2006	Associate Oral & Maxillofacial Surgeon-Private Practice-Foothills Oral & Maxillofacial Surgery. 6700 N. Oracle Ste. 238 Tucson, AZ
2001-2005	Resident, University of Cincinnati- University Hospital, Department of Surgery/Division of Oral & Maxillofacial Surgery-Cincinnati, OH Date of Completion: 06/25/05
2004-2005	Chief Resident, University of Cincinnati- University Hospital, Department of Surgery/Division of Oral & Maxillofacial Surgery-Cincinnati, OH
1997-2001	Baylor College of Dentistry, a Member of The Texas A&M University Health Science Center,Dallas, TX-DDS
1993-1996	University of Massachusetts- Amherst, MA- BA
1991-1993	University of Massachusetts-Boston, MA
1987-1991	Milton High School- Milton, MA
1977-1987	Lake Dallas Independent School District- Lake Dallas, TX

SURGICAL EXTERNSHIPS

March 4-12, 2000	Baylor College of Dentistry OMS Externship Program. Dallas, TX
June 4-24, 2000	University of Texas Southwestern Medical Center- Parkland Memorial Hospital OMS Externship Program- Dallas, TX
July 29-August 26, 2000	Medical College of Virginia/Virginia Commonwealth University OMS Externship Program- Richmond, VA

MEMBERSHIPS / FELLOWSHIPS &

BOARD CERTIFICATIONS

2019-present	Member, American College of Oral and Maxillofacial Surgeons.
2015-present	American Institute of Parliamentarians-member
2013-present	Midwestern Society of Oral & Maxillofacial Surgery
2006-Present	South Dakota State Dental Association-Member
2006-Present	Black Hills District Dental Association-Member
2006-present	Upper Midwest Component of American Dental Society of Anesthesiologists-Member
2005-2006	Arizona Society of Oral & Maxillofacial Surgeons
2005-Present	American Association of Oral & Maxillofacial Surgeons-/Fellow
2007-Present	American Board of Oral & Maxillofacial Surgery- Diplomate- recertified 2017-2027
2005-2006	Pima Dental Study Club- Tucson, AZ
2005-2006	Southern Arizona Dental Association
2005-2006	Arizona Dental Association
2005-present	National Dental Board of Anesthesia- Diplomat
2005-present	American Dental Society of Anesthesiologists- Fellow
2001-2005	Resident Member, American Association of Oral & Maxillofacial Surgeons
2001-2005	Resident Member, Ohio Society of Oral & Maxillofacial Surgeons
1999-2001	American Association of Dental Schools
1999-2002	American Student Dental Association
1998-2001	Delta Sigma Delta Dental Fraternity member
1998-1999	Student Research Group member
1997- 2001	Dallas County Dental Society
1997- 2001	Texas Dental Association
1997-present	American Dental Association-Member

CURRENT & PAST OFFICES HELD

2020-present	President, South Dakota Dental Association.
2020-present	Member, AAOMS House of Delegates Committee on Credentials
2020-present	Member, AAOMS Special Committee on Recovery and Response to the Pandemic
2019-2020	President-Elect, South Dakota Dental Association
2019-present	Investigator, South Dakota Board of Dentistry.
2019-2021	President, Upper Midwest Dental Society of Anesthesiology
2019-present	Member, AAOMS-Committee on Public & Professional Communication-District V
2019-Sept 2021	Chairman, Department of Oral & Maxillofacial Surgery and Dentistry- Monument Health Hospital
2019-2020	VP, South Dakota Dental Association
2016-2019	Speaker of the House, South Dakota Dental Association
2018-2019	Delegate, Upper Midwest Dental Society of Anesthesiology
2013-present	Board of Trustees, South Dakota Dental Association
2012-present	OMS Foundation- liaison to SDOMS
2011-present	President, South Dakota OMS Society
2011-present	Delegate South Dakota District V, AAOMS HOD
2006-present	Member, South Dakota Board of Dentistry- Anesthesia Credentialing Committee & Office Anesthesia Evaluator
2011-2012	Black Hills District Dental Society-President
2009-2011	Chairman, Department of Dentistry and Oral Surgery- Medical Executive Committee. Rapid City Regional Hospital.
2002-2004	Resident Representative for Program Director's Committee on Graduate Medical Education- University of Cincinnati, University Hospital
2001-2005	Member, Resident Action Committee for Graduate Medical Education
1999-2003	Delegate, American Association of Dental Schools Council of Students for Baylor College of Dentistry, a Member of The Texas A&M University Health Science Center
1999-2000	Vice President of Dental Class, Baylor College of Dentistry, Texas A & M Univ. Health Science Ctr.

REVISED 09-03-2021

1999-2000	President, Delta Sigma Delta- Lambda Lambda Chapter. Baylor College of Dentistry/TAMUHSC
1997-2000	Dental Class Fundraiser, Baylor College of Dentistry/TAMUHSC
1995-1996	President, Commuter Area Government at University of Massachusetts-Amherst
1995-1997	Student Senate Representative for Residential living Area at University of Massachusetts-Amherst
1992-1993	President of Chemical Society at University of Massachusetts- Boston

RESIDENCY ROTATIONS

January 2001	Inpatient Internal Medicine, Veteran's Administration Hospital, Cincinnati, OH
July-September 2002	General Anesthesia University of Cincinnati, University Hospital, Cincinnati, OH
October-November 2002	General Surgery-Trauma/Critical Care Service University of Cincinnati, University Hospital, Cincinnati, OH
February-March 2003	Pediatric General Anesthesia Children's Hospital Medical Center, Cincinnati, OH
April-May 2003	Family Practice Inpatient Medicine, Mercy Franciscan-Mt. Airy Campus, Cincinnati, OH
June 1-July 31, 2003	Facial Trauma Rotation University of Tennessee Medical Center-Knoxville, TN
November-December 2003	General Surgery- The Christ Hospital, Cincinnati, OH
January 2004	Surgical Intensive Care Unit, Trauma/Critical Care Service University of Cincinnati, University Hospital, Cincinnati, OH

PROFESSIONAL & VOLUNTEER SERVICE

2009-present	American Heart Association Training Center Medical Director- Rapid City Regional Hospital.
2013-present	Medical Team OMS Rapid City Rush Hockey
2012-2014	United Way of the Black Hills-Board Member
2009-2012	Wellspring Treatment Facility- Board Member
2008-2010	Youth & Family Services- Board Member
2001-present	Resident team member Oral Surgery service for University of Cincinnati Football Team-Big East Conference
2001-present	Resident team member Oral Surgery Service for Cincinnati Mighty Ducks hockey team-American Hockey League
1999	Volunteer as a Dallas County Dental Society member at the Southwest Dental Conference- Dallas, TX

1997	Volunteer for <i>BY THE ROOTS</i> children's dental health educational program -Progresso, TX
1998	Volunteer for the Special Olympics' <i>Special Smiles Dental Health Program</i> -Dallas, TX

CONFERENCES/MEETINGS

2021	American Dental Society of Anesthesiology Annual Session- 17 CE March 2021 Online
2020	Cook County-Future of OMS 5 CE Virtual Mtg
2019	Advanced Airway-Anesthesia Emergencies-PALS Simulation Course. Dental Simulation Specialists. At BHOMS Rapid City. 12 CE. October 3 & 4.
2019	101 st AAOMS Annual Session. Boston, MA.
2019	American College of Oral & Maxillofacial Surgeons. 40 th Annual Session. April 7-9, 2019. Santa Fe, NM. 14.25 CE.
2019	American Dental Society of Anesthesiology. Annual Session. April 5-6. Santa Fe, NM. 16 Anesthesia CE
2018	AAOMS Dental Implant Conference. Nov 29-Dec.1, 2018. Chicago, IL. 6.5 CE
2018	AAOMS Anesthesia Update: Office Based Anesthesia-Past, Present & Future. Chicago, IL Oct 10, 2018 6.25 Anesthesia CE
2018	Advanced Airway-Anesthesia Emergencies-ACLS office course with Simulation. September 2018. 8 Anesthesia CE
2018	100 th Annual Session American Association of Oral & Maxillofacial Surgeons- Chicago, IL
2018	South Dakota Dental Association. Sioux Falls, SD Speaker: Dental Anesthesia Assistants Monitoring Course. Dr. Jeff Dean & Dr. Jay Crossland
2018	ADSA Annual Session. Boston, MA 16 Anesthesia CE hours
2018	Anesthesia Simulation Training. Dental Simulation

	Specialists. Review of Medical Emergencies Hands-On Course In Office. Rapid City, SD January, 2018. 8 Anesthesia CE hours
2017	Pikos Institute Symposium. Orlando, FL Full Arch Options: State of the Art. November 1-4 32 CE hours
2017	American Association of Periodontics Annual Session. Sept9-12, 2017. Boston, MA
2017	AAOMS Annual Session . San Francisco, CA 15.25 CME (14.25 Anesthesia Credit hours)
2017	SDDA Annual Session Sioux Falls, SD Keynote, Chad Greenway Code #1456 <i>"A New Perspective on Occlusion and TMD" James Mckee, DDS. Code #4276</i>
2017	2017 Anesthesia Patient Safety Conference. ASA Headquarters Schaumburg, IL. April 27,2017. 6.5 Anesthesia CE hours.
2017	CEREC Level III Training-Provisionalizing and Restoring Implants with CEREC. Mark Fleming, DDS, Sameer Puri, DDS, Mike Skramstad, DDS. Spear Center. Scottsdale, AZ. March 11-12, 2017. 13 CE.
2016	Hospital/Physician Collaboration and Alignment-The Path Forward. Dan Petereit, MD. Rapid City Regional Hospital. Rapid City, SD. January 17,2017. 1.5CME.
2016	Airway Emergency Management of the Sedated Patient. Black Hills OMS. Rick Ritt, EMT-P, MA. Rapid City, SD. November 3, 2016. 8 Anesthesia CE hours.
2016	Aesthetic Implant Restoration with Hands-on Training sponsored by Dentsply Sirona. Dr. Christopher Barawacz. Rapid City, SD Friday September 16, 2016. 4 CE.
2016	Zygoma & Tilted Implant Concept Lecture and Cadaver Lab. Lewisville, TX May 20 & 21, 2016. Drs. Franco, Gonzalez, Guzman, Rios, Cooke &

Triplett. 8 CE Lecture, 8 CE Lab

- 2016 Sclar Center for Empowered Dental Implant Learning. Soft Tissue Immersion Course-Soft tissue grafting for teeth and implants. Anthony Sclar, DMD. South Miami, FL. February 21-24, 2016.
- 2015 Dental Office Emergencies and Airway Management- Human Simulation In Situ High Fidelity Training. 8 CME. Rapid City, SD October 14, 2015.
- 2015 AAOMS 97th Annual Meeting. 11.5 CME. Washington, D.C. September 28-October 3.
- 2015 15th Annual Oral & Maxillofacial Surgery Review. 18.75 CME. Minneapolis, MN. August 22-23.
- 2015 Sclar Center All-On-4 Full Arch Immediate Function Course. 24 CME. South Miami, FL May 3-5.
- 2015 ADSA General Anesthesia Course 16 CME. ADSA Human Simulation Course & Exam 6.5CME. Las Vegas, NV Feb. 20-21.
- 2015 Carestream 2015 Oral & Maxillofacial Surgery Summit. Atlanta, GA 9 CME.
- 2014 Immediate Full Arch Restorations with nSequence. Ozzie Richi. Rapid City, SD 2 CME
- 2014 NIH Protecting Human Research Participants Course. 3 CME. Online via UHS-PEP MCV/VCU.
- 2014 AAOMS Annual Session 3.5 CME Honolulu, HI
- 2013 AAOMS Annual Session 10 CME Orlando, FL
- 2012 Biomet/3i-*Practical Solutions for Immediate Full Arch Restoration-DIEM* Dr. Brent Boyse 7 CME. Las Vegas, NV
- 2012 AAOMS Annual Session -8 CME San Diego, CA
- 2012 Institute for Comprehensive Implant Planning-Soft Tissue Graftin around teeth and Implants 21 credits. Milton, MA
- 2012 SDDA "A Practical Review & Update of Oral

	Pathology” Dr. John Wright BCOD Rapid City, SD 6 CDE
2012	AAOMS Annual Session 8 Credits. San Diego, CA
2012	American Dental Society of Anesthesiology General Anesthesia and Deep Sedation and Human Simulation Course 20.5 Credits. Las Vegas,NV
2012	FACES Surgical Orthodontic Conference Vail, CO
2012	Sclar Comprehensive Surgery Course for Novice and Experienced Implant Surgeons-Soft tissue, Bone grafting and Implant Therapy-Miami, FL
2011-2012	Black Hills Spear Study Club-12 CDE-Rapid City, SD
2011	Current Techniques and Materials in Root Canal Therapy-Rapid City, SD ACC
2011	Ellsworth AFB Dental Corps Non-surgical Endodontics-Mgmt of Immature Tooth Non-surgical Endodontics-Endodontic Zebras Non-surgical Endodontics-Veterinary Endo
2011	SDDA Annual Session- Sioux Falls, SD May 12-14
2011	Oral Plastic Surgery Dr. Edward P. Allen Dallas, TX at Center for Advanced Dental Education
2011	Carestream Annual Training 16 CME The Use and Benefits of CBCT in OMS Practice Intro to 3D software Getting the Most out of 3D software Synergy of CBCT Bone Grafting & Implants Optimum Utilizatoion of an Implant Coordinator
2010	AAOMS Annual Session Anesthesia Update 11.0 CME Mandibular Trauma 2.0 CME Syposium Immed Loading Implants 2 CME Perio Plastic Surgery-2 CME
2010	SDDA Annual Session-Rapid City, SD May 13-15, 2010
2010	FACES- Surgical/Orthodontic Conference- Steamboat, CO March 8-12, 2010 29.75 CE
2009	University of Iowa Surgical Orthodontic Conference, Vail, CO Jan 31- Feb. 7, 2009 20 CE.
2008	Miami-Toronto Bone Symposium, WDW Contemporary Resort. October 31-Nov. 2, 2008. 16.5 CE
2008	South Dakota Dental Association. Dr. Aldo Leopardi, “Dental Implant Removable Overdenture Therapy: Biomechanical Approach to Treatment Planning & Prosthetic Considerations”. 7 CDE.
2008	23 rd Annual Academy of Osseointegration Meeting/Scientific Session Boston, MA

	February 28-March 1 st 12 CDE
2008	ADSA General Anesthesia/Deep/Moderate Sedation & Ambulatory Anesthesia Complications Las Vegas, NV February 15-16 16 CE
2008	ADSA Human Simulation Seminar & Workshop: <u>Respiratory</u> Complications During Sedation & Anesthesia. Las Vegas, NV February 14, 2008 4 CE hours
2008	ADSA Human Simulation Seminar & Workshop: <u>Cardiovascular</u> Complications During Sedation & Anesthesia. Las Vegas, NV February 14, 2008 4 CE hours
2007	University of Cincinnati, Division of Oral & Maxillofacial Surgery. Contemporary Management of Oral Cancer & Management of BRONJ. Dr. Eric Carlson UTMCK Cancer Institute. June 30, 2007 6hrs CDE.
2007	AAOMS Webinar: Osteonecrosis of the Jaws. 1.5 credit hours. 05-30-2007
2006	Louisiana State University Oral & Maxillofacial Surgery Board Review Course 10/28/06-11/01/06 44 hours
2006	Advanced Bone Grafting and Reconstruction Seminar, Dr. Alan Hereford Cincinnati, OH- 06/26/06 -4.5 hours
2006	Atlantis Lecture. Dr. Ryan Farnum. Tucson, AZ May 9 th , 2006 2 hours.
2006	Nobel BioCare World Conference, Phoenix, AZ May 4-6, 2006. 18 hours
2006	Restorative Implant Dentistry Speaker- Lifecore Biomedical- Tucson, AZ -8 hours
2005	University of Colorado Oral & Maxillofacial Surgery Board Review Course Denver, CO 11/12/05-11/19/05- 63 hours
2005	AO/ASIF Trauma Fixation Meeting Columbus, OH April 30-May 1
2005	<u>ADSA General Anesthesia Review/Fellowship Exam.</u> Bosack/Campbell/Orr/Quinn/Reed- Las Vegas, NV Feb. 25-27. MGM Grand
2005	<u>ADSA-Anesthesia & Sedation for Dentistry: Pearls & Pitfalls in Clinical Practice.</u> Cincinnati, OH 02/12/05 -7.5 hours
2005	<u>28th Annual Oral & Maxillofacial Pathology Review Course-</u> Robert E. Marx, DDS & Diane Stern, DDS- San Francisco, CA Jan 22-26 th – 50 hours
2004	<u>16th Annual Tri-State Craniofacial Conference</u> Cincinnati, OH at CCHMC Craniofacial Center.-4.5 hours

2004	<u>AAOMS 86th Annual Meeting-</u> San Francisco, CA September 28 th -October 3 rd -7.0 hours
2004	<u>Achieving Optimal Implant Placement Using Mandibular Block Autrafts:</u> A Biological and Biomechanical Approach to Avoid Functional and Esthetic Pitfalls. Columbus, OH. Dr. Michael Pikos-6.0 hours
2004	<u>Restorative Driven Surgical Practice(RDSP)-Nobel</u> Biocare. Cincinnati, OH Drs. Schwab & Sullivan-7 hours
2002	Surgical Orthognathic Conference-UNC School of Dentistry, Chapel Hill, N.C. –Turvey & Proffit
2002	<u>Practical Approaches to the Diagnosis & Mgmt. of</u> <u>TMJ Disorders-</u> U.C. University Hospital, Cincinnati, OH – F.Dolwick-5.5 hours
2001	Ohio, Michigan, Kentucky & Indiana Dental Societies of Anesthesiology Annual Meeting- Cincinnati, OH June 23,2001
2000	Branemark, Nobel Biocare Prosthetic Curriculum-- Baylor College of Dentistry, Dallas, TX
2000	Straumann ITI Dental Implant Course-Baylor College of Dentistry, Dallas, TX
1997-2001	Southwest Dental Conference, Dallas, TX
2000	AADS Annual Session-House of Delegates, Washington, D.C.
2000	Texas Dental Association- House of Delegates, San Antonio, TX
1999	AADS Regional Meeting, New Orleans, LA

RESEARCH EXPERIENCE

June-August 1998	IADR Grant for Cranial suture morphogenesis research related to TGF B's 1, 2 & 3. Mentor: Lynn A. Opperman, PhD, Developmental Biologist, Texas A & M University Health Science Center, Baylor College of Dentistry, Biomedical Sciences Department
July 2004-June 2005	Diabetes Study comparing Infection rates between diabetic and non-diabetic patients undergoing dento- alveolar surgery. PI: Drs. Robert B. Horton & Robert D. Marciani, Professor & Chairman, University of Cincinnati, Department of Surgery, Division of Oral & Maxillofacial Surgery- not published

PUBLICATIONS

2013	Texas Dental Journal February 2013 Oral & Maxillofacial Pathology “ Case of the Month”-Necrotizing Sialometaplasia
2014	Texas Dental Journal March 2014 Oral & Maxillofacial Pathology

REVISED 09-03-2021

“ Case of the Month”-Lingual Stafne Defect

CERTIFICATES

Advanced Cardiac Life Support	10/2022
Advanced Cardiac Life Support, Instructor	10/2022
Pediatric Advanced Life Support, Instructor	10/2021
Basic Life Support	09/2020
Basic Life Support, Instructor	09/2020
Advanced Trauma Life Support	07/06

DENTAL BOARDS/LICENSING

National Dental Board Parts I & II	1997 & 2000
Western Regional Clinical Board Examination	2001
Ohio State Dental Board Limited Residency License	2001-2005
Arizona State Dental License	2004-2006
General Anesthesia Permit-Arizona Dental Board	2005-2006
South Dakota State Board of Dentistry License #D0621	2006-Present

DIPLOMATE

National Dental Board of Anesthesia	2005
American Board of Oral & Maxillofacial Surgery	2007

FELLOW

American Dental Society of Anesthesiologists	2005
AAOMS	2007

LANGUAGES SPOKEN

English
Conversational Spanish

HOBBIES & RECREATIONAL INTERESTS

Golfing
Traveling
Hunting/ Fishing
Home Improvement
Snow & Water Skiing
Private Pilot



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Intravenous Conscious Sedation Course

Course Sponsor: Dental College of Georgia at Augusta University

Location: Dept of Oral and Maxillofacial Surgery, GC-1042

Name of person submitting information: Lynn Thigpen, Dept of Oral & Maxillofacial Surgery, GC-1042

Email address: lbthigpen@augusta.edu

Phone: 706-721-1447

Title: DCG CE Coordinator

Date: 04/13/2022

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? ☒ Yes ☐ No

2. Number of hours of instruction: 104.00

3. Is this course sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

ACD PACE Provider Number: 12/31/2022

ADA CERP Provider Number: 12/31/2022

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: Lynn B. Thigpen

Date: 4/18/22

Printed Name: Lynn B. Thigpen

Permit to Monitor Patients Under Anesthesia Course Review

The program for the assistants training here at DCG AU is very intense and thorough. We encourage the Dentist to bring his assistant with him for the clinical portion of the Sedation program. We only have one student at a time for clinical portion of the program. The ratio of faculty to student is two or three to one. That is two or three faculty.

The dental assistant is trained by the surgical nurse and the trained surgical assistants. The clinical week also stresses airway management and the use of airway adjuncts. These include the face mask, oral airway, nasal airway, the LMA and endotracheal tubes.

The dental assistant is trained by the surgical nurse and the surgical assistants to do the following:

1. Prepare the tubing and fluids for administration.
2. Place the monitoring devices including, EKG leads, pulse oximetry leads, BP and capnography equipment.
3. Operate the patient monitor.
4. Take the pre-op base line measurements and review the patients chart.
5. Set up the sedation record and enter base line pre-operative recording.
6. Monitor the patient during the sedation and record the observations
7. To record the drugs given.
8. To assist the dentist during the procedure and help maintain a dry clear airway.
9. To assist the dentist in the management of the patient post operatively.
10. How to transport the patient for discharge.
11. How to prepare the discharge package for the patient and the escort.
12. How to prepare the discharge information for the patient.
13. How to maintain the drug cabinet and secure it.
14. How to (with) the dentist maintain the drug cabinet records.
15. How to properly (with the dentist) dispose of and record the drugs not used.
16. How to check the sedation record and the consents.
17. How to maintain the sedation records.
18. How to assist in the management of emergencies (with the dentist).
19. How to maintain the emergency drugs and equipment.
20. How (with the dentist) to prepare and train for the management of medical emergencies

We stress the need for constant preparation of the dental staff for the management of medical emergencies. We stress frequent simulations in the office. We stress the need to rotate emergency roles during this training. This is cross training. We stress the need to keep a record of the types of training done. We stress preparedness, patient evaluation, patient safety and patient selection.

Henry "Butch" Ferguson, DDS
Course Director
Department of Oral and Maxillofacial Surgery

Intravenous Conscious Sedation Course 2022

Augusta University
Dental College of Georgia Department
of Oral and Maxillofacial Surgery

Classroom Session All Students

COURSE INFORMATION FOR IV SEDATION COURSE

The following is the course schedule for the IV Conscious Sedation Course. We will try to adhere to the schedule as much as possible. However there will be occasions when we will have to change the order of the lectures or the speakers. The faculty for this course also have hospital and clinic coverage duties/responsibilities. There will be times when either the lecture or the lecturer will have to be moved or changed. This will be rare, but due to the nature of a hospital and clinical practice at a level one trauma center these changes may have to be made. It will not affect the total hours of the course or the clinical practice time.

Effective 01/01/2021 the Didactic portion of the course will be six days. This decision was made because participants were attending 7:30 am – 10 pm on Wednesdays, Thursdays and Fridays. You should arrive in Augusta, Georgia on the Monday before the start of class on Tuesday. We start at 7:30 am on Tuesday. The course participants have been divided into one person groups for those taking the entire course. During the classroom/ didactic portion, all groups participate in the classroom activities, and training with the interactive simulation mannequin.

For those returning for the clinical/hands on training portion, there will be a clinical start on the Monday following the completion of the Sunday classroom activities, and every following Monday until all participants have received training. Exceptions will be made for Monday holidays where there will be a 4 day week. Scheduling will be coordinated by Continuing Education.

This should be an intensive, informative and enjoyable educational experience for all of us. It never ceases to amaze us that we can learn so much from the CE participants. Most of you bring with you a great deal of clinical experience and practice management skills. We are looking forward to working and interacting with you all.

For the classroom portion of training: the participant will be given the sedation text upon arrival. A flash drive will be mailed to you prior to your arrival. All presentations plus extra material will be on the flash drives. If there is anything covered during the presentations, not on the drive, alert the program director. **It is recommended that you load the material on your laptop, and review it prior to arrival. Bring the flash drive with you since we may make some additions to it during the course. You should bring a laptop with you that is able to read power point presentations. A pretest and posttest will be administered.**

There are millions of patients who cannot receive routine dentistry and associated care because of fears, anxieties, and phobias. Managing these fears, anxieties and phobias is a special “gift” that can profoundly change your professional life. During the didactic portion of training, you will be **immersed** in information and dialogue which will provide the participant the skills to manage patient anxieties, fears, and phobias in a safe, predictable, safe and independent manner. In addition to being immersed in the sedation protocols and techniques, the management of office emergencies will be comprehensively addressed. There will be a thorough overview of critical factors needed to manage office emergencies. This includes, overview of the physical plant, emergency equipment, review of emergency drug pharmacology and indications, discussion of the emergency “Action Plan”, overview of the provider and ancillary staff responsibilities, and review of specific office emergency scenarios and their management.

A block of instruction will be provided for hands on simulation training with the high-fidelity simulation mannequin. The participants will be required to make real time responses to commonly occurring anesthetic and non-anesthetic office emergency scenarios. Also during this block of instruction with the simulation mannequin, the participants will have dedicated hands on training involving basic and advanced airway management and resuscitation techniques which includes use of both basic and advanced airway adjuncts. Lastly, discussions will be directed to preparing the participants for the office anesthesia examination required for certification to provide conscious sedation.

The IV Sedation Course faculty have responsibilities relating to coverage of OMS Clinic and Operation Room activities. Many of the activities are emergent /urgent and cannot be rescheduled. Because of this, we may have to alter the order of the presentations as scheduled. However, all material will be covered

ACLS: Advanced Cardiac Life Support is mandatory for parenteral sedation. ACLS will be offered to any participants who request it. The ACLS training will take place on the Wednesday, Thursday, and Friday evenings after completion of the sedation didactic training. **The ACLS portion of the course times are subject to change so we have extended the course by one day!**

For the hands on clinical patient care portion of the course: the scheduled participant will start on the Monday following completion of the Sunday classroom activities. The day will start at 7:30 a.m. with the participant meeting with the clinic nurse to orient, review the daily schedule, discuss patients where needed, and assemble the sedation armamentarium and drugs. Follow on participants should arrive in Augusta on the Sunday to start Monday at 7:30 as detailed above (unless otherwise instructed)

While engaged in the clinical hands on training, each participant will provide the patient assessment, establishment of intravenous access, delivery of sedation medications, patient monitoring, oversight of patient recovery from sedation, and assessment for discharge. All questions/concerns will be directed to the clinical nurse, course director or attending faculty.

Because of the significant learning opportunities available, and ability to interact with the clinical faculty, nurses and staff, participants are encouraged to bring their ancillaries to participate with them in the hands on clinical training. Coordination with the CE Department and registration is required if this option is taken. Each clinical group should finish before 5:00 pm on the final clinical Friday. Groups will finish the final day with the post test, course after-action review and final comments with the course director.

It is mandatory that each participant query their State's Board of Dentistry to confirm the Boards requirements for number of patients to be managed, and level of sedation which will be recognized by the Board for case acceptance.

**Dr. H. W. Ferguson
Course Director
I.V. Conscious Sedation CE course
Associate Professor Oral and Maxillofacial Surgery
Augusta University
Dental College of Georgia**

Intravenous Conscious Sedation Patient Management in Dental Practice
TUESDAY - DAY ONE Classroom/Didactic Session

7 - 7:30am Continental Breakfast provided
Registration and Course Introduction

7:30 – 8:00am **Written Pre-Test - Dr. Ferguson**
Objective(s) To determine the participants, present level of patient management techniques, conscious sedation modalities and pain control methods

8- 9am **Philosophy and rationale for Intravenous Sedation - Dr. Ferguson**
Objective(s): Discussion of the philosophy and indications for iv sedation, with review of the sedation continuum, definitions of the different levels of sedation, overview of advantages, disadvantages, commonly occurring complications, and adverse events.

9-10am **Requirements for IV Sedation -- Ferguson**
Objective(s): To provide an over view of the requisites for performing safe, efficient, and independent iv conscious sedation. This presentation will highlight the key components of the pre-anesthetic, peri-anesthetic and post-anesthetic management of the sedation patient.

10-11am **Routes of Administration – Dr. Ferguson**
Objective(s): Review the various routes of administration for sedation medications and discussion of advantages and disadvantages of each

11-12pm **IV Sedation Patient Monitoring – Dr. Ferguson**
Objective(s): Review of the sedation continuum, with emphasis on the importance of patient monitoring to maintain the appropriate levels of sedation, recognize changes which may put the patient in danger, and maintain the needed margins of safety. Patient vital sign monitoring, oxygen saturation, and End Tidal CO2 monitoring techniques and armamentarium will be discussed.

12 - 1pm **Lunch Munch and Learn (lunch provided) – Dr. Ferguson**
Continuation of morning's didactic presentations, course participant question, answer and review

1– 2pm **ADA Guidelines for the Use of IV Sedation - Ferguson**
Objective(s): To review the ADA's guidelines for providing safe and effective sedation and anesthesia to the dental patient. The incorporated discussions will provide definition of critical anesthesia terms, clear definitions of the various levels of sedation, and the critical actions and responsibilities within each level of sedation and anesthesia which must be followed by the provider to deliver efficient sedation with a high margin of safety.

2-4pm

**Pharmacology of Benzodiazepines, and Their
Reversal Agents –**

Objective(s): Identify drugs, classifications, interactions, effects, reversal agents, where drugs act and the drug degradation routes

4– 5pm

Pharmacology Local Anesthesia –

Objective(s): Discuss the pharmacology, physiology, and specific profiles of commonly used dental local anesthetic agents

5- 6pm

IV Sedation Patient Assessment

Objective(s): To examine and discuss the components of the IV sedation patient assessment process. In so doing, the student will recognize patient assessment as the primary tool for identifying the overall level of the health of the patient, and its value in assessing the level of risk of treating/sedating the patient.

6 - 9pm

**Advanced Cardiac Life Support Training – Ms. Shawn Neal
(Dinner will be Provided)**

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

WEDNESDAY - DAY TWO

Classroom/Didactic Session

7:30 am

Continental Breakfast Provided

8-10am

**Basic Airway Management and Resuscitation part I – Dr.
Holzhaur**

Objective(s): To review relevant airway anatomy, respiratory physiology and the effects of sedative drugs on respiration; to discuss the importance of basic airway assessment by way of the history and physical assessment/examination; to review the causes and signs of airway obstruction and ventilatory distress with emphasis on managing airway obstruction and ventilatory distress/impairment with basic and advanced airway management techniques, use of basic and advanced airway adjuncts and equipment.

10-11am

**IV Conscious Sedation Documentation and Review of the
Sedation Armamentarium – Nurse Graham, Dr Holzhaur**

Objective(s): Review the documentation necessary to perform IV Conscious Sedation in the dental office. This will include the patient anesthesia record and what must be documented to accurately fulfill the anesthesia record's function as a medico-legal document. The discussion will have emphasis on timing, medications used, recording patient vital signs, intraoperative monitoring data, and the patient's progression to recovery, to clearly evaluate discharge criteria for appropriate patient dismissal. Also reviewed will be pertinent items of the pre anesthetic work up, patients past medical and

past anesthetic history, and important questions which should be asked. A review of the necessary armamentarium for IV sedation, and sedation fluids will be demonstrated.

11– 12pm Overview of Venipuncture Anatomy and Technique – Dr. Holzhaur, Nurse Graham

Objective(s): To review the basic vascular anatomy of the upper arm, forearm and dorsum of the hand in recognizing appropriate venous structures which might be employed to gain venous access, and the locations of other vascular structures which should be avoided. Basic venipuncture techniques will be demonstrated and basic complications will be discussed.

**12– 1pm Lunch Munch and Learn (lunch provided) – Dr. Ferguson
Continuation of morning's didactic presentations, course participant question, answer and review**

1-3pm Venipuncture and Intravenous Access Hands on Exercise for all Participants – Dr Holzhaur, Nurse Graham

Objective(s) Review the armamentarium of IV sedation; recognize the tourniquet, catheters, tubing, drug ports, and recommended IV fluids; review in real time the vascular anatomy, and the venipuncture techniques. Each participant will have opportunities to assemble and prepare the infusion setup, perform the venipuncture, conform flow and properly stabilize the infusion setup.

3-5pm Pharmacology of Adjunctive Anesthetic Agents – Dr. Ferguson

Objective(s): Review several medications many of which are not classified as anesthetic medications which can be used before an anesthetic is administered as premedications and during anesthesia to augment anesthetic effects or diminish undesirable side effects. The medications will be discussed in regard to their classifications, pharmacologic actions, and indications for use

5-6pm The Role of Nitrous Oxide in Conscious Sedation - Dr. Ferguson

Objective(s): Discuss history of nitrous oxide and role of inhalation sedation in dentistry; identify equipment used in inhalation sedation; understand patient selection, indications and contraindications for inhalation sedation; and explain function of equipment, and risk management.

**6- 9pm Advanced Cardiac Life Support Training – Ms Shawn Neal
(Dinner will be Provided)**

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

THURSDAY - DAY THREE Classroom/Didactic Session

7:30 am **Continental Breakfast provided**

8-10am **Basic Airway Management and Resuscitation part II – Dr. Ferguson**

Objective(s): To continue discussion on airway management and resuscitation for the sedation dentist with special focus on the importance of a basic airway assessment by way of the history and physical assessment/examination; reviewing the causes and signs of airway obstruction and ventilatory distress, discussing management strategies with emphasis on managing airway obstruction and ventilatory distress/impairment with basic and advanced airway management techniques, and discussion of the indications for use of basic and advanced airway adjuncts and equipment.

10-11am **Misconceptions in the management of Office Emergencies – Dr. Ferguson**

Objective(s): To discuss how medical emergencies in the dental office are a reality, and can happen anytime, anyplace and to anyone; discuss how many dental practices are unprepared to handle them, and embrace several well-known misconceptions associated with managing office emergencies; to discuss the common misconceptions and how they can be avoided in properly addressing and managing an emergent medical problem.

11-12pm **Review of Basic Emergency Medications, Pharmacology and Indications - Dr. Ferguson**

Objective(s): To review Emergency Drug Kit (EDK), and the basic emergency medications recommended by the ADA, their pharmacology and indications. Also discussed are medications which should be available for the provider practicing office intravenous sedation.

12 – 1pm **Lunch Munch and Learn (lunch provided)– Dr. Ferguson**
Continuation of morning's didactic presentations, course participant question, answer and review

1-3pm **Anesthetic Management of Common Systemic Illnesses/Conditions Part I – Dr Ferguson**

Objective(s): To highlight many of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral. The discussion will emphasize review of the basic pathophysiology, sedation indications, contraindications, and basic sedation/anesthesia strategies for safe patient sedation outcomes

3– 5pm **Factors Critical to Managing Office Medical Emergencies – Dr. Ferguson**

Objective(s): To recognize and appreciate the many factors which are critical, and must be present to allow the provider, ancillaries and staff to efficiently, effectively and predictably manage an emergent medical event in the office. The discussion will

highlight appropriate emergency equipment, airway management, medications, and proper training for the Dentist and staff.

5- 6pm Office Emergency prevention, Recognition, and the Basic Action Plan– Dr. Ferguson

Objective(s) To appreciate that “an ounce of prevention is worth a pound of cure” by reviewing tools possessed by the provider which can assist with establishing risk of patient treatment, discussing common symptoms which suggest a problem is at hand, and reviewing the Basic Action Plan which offers the provider a mental flow chart to step by step manage the problem and identify when the next level of care must be summoned.

**6- 9pm Advanced Cardiac Life Support Training – Ms. Shawn Neal
(Dinner will be Provided)**

Objective(s): To learn and become proficient with the Advanced Cardiac Life Support (ACLS) or advanced cardiovascular life support clinical interventions directed to the urgent treatment of cardiac arrest, stroke and other life-threatening medical emergencies, as well as the knowledge and skills to deploy those interventions.

FRIDAY- DAY FOUR Classroom/Didactic Session

**7-8am Continental Breakfast Provided for Munch and Learn –
Dr. Ferguson**

Objective(s): To review and answer questions from the past three days of training and with the upcoming simulation exercises with the high fidelity Simulation Mannequin, to discuss the group dynamics necessary for proper management of an office emergency

8-12 pm Harrison Medical Commons Simulation Lab

**8 – 9:30am Review of Basic and Advanced Airway Adjuncts
Hands on Airway Management Skill Stations – Dr. Ferguson,
Sim Lab Personnel**

Objective(s) To review upper and lower airway anatomy, and to expose the participants to common airway management techniques, and basic and advanced airway adjuncts. Using the Simulation Mannequin as the primary teaching tool, the participant will have the opportunity to review discussed airway management techniques, discuss indications for airway adjunct use, and experience the real time placement of commonly used airway adjuncts with emphasis on both the placement of commonly employed supraglottic devices, and the confirmation of appropriate placement.

**9:30 – 12pm Management of Commonly Occurring Office Emergencies and
Adverse Sedation Events Using the High Fidelity Simulation
Mannequin (Sim Man)**

Objective(s): To engage each participant with an office emergency or adverse sedation

event where the participant on the “hot seat”, using the monitored high fidelity simulation mannequin will have to diagnose the problem, activate the basic action plan, call for assistance, and manage the team members while providing the appropriate treatment(s) under real time. All scenarios will have an after-action review to discuss what was done right, and where improvements could be made.

12 – 1pm Lunch Munch and Learn (lunch provided) – Dr. Ferguson

Objective(s): To review and discuss each office emergency or adverse anesthesia event from the simulation exercises, with the intent to highlight appropriate actions and discuss how other activities should be modified, omitted, or approved to provide the most efficient and predictable patient outcomes. A point of emphasis will be how the group is managed and delegation of activities.

**1-3pm Anesthetic Management of Common Systemic
Illnesses/Conditions Part II – Dr. Ferguson**

Objective(s): To highlight many of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral. The discussion will emphasize review of the basic pathophysiology, sedation indications, contraindications, and basic sedation/anesthesia strategies for safe patient sedation outcomes

**3-6pm Management of Commonly Occurring Dental Office Medical
Emergencies and Adverse Events Part I - Dr. Ferguson**

Objective(s): To review commonly occurring medical emergencies with discussion of the pathophysiology, review of the signs and symptoms, implementation of the Basic Action Plan with appropriate management strategies and approaches, and importance of instituting early involvement of the EMS when necessary.

SATURDAY - DAY FIVE Classroom/Didactic Session

**7-8am Continental Breakfast Provided for Munch and Learn
Patient recovery and Discharge - Dr. Ferguson**

Objective(s): To review the monitored patient and discuss the critical findings suggestive of appropriate recovery from sedation for patient discharge, and emphasize importance of discharge to escort in wheelchair.

**8 - 10am Management of Commonly Occurring Dental Office Medical
Emergencies and Adverse Events Part II - Dr. Ferguson**

Objective(s): To continue discussion and review of commonly occurring medical emergencies, discussion of the pathophysiology, review of the signs and symptoms, implementation of the Basic Action Plan, appropriate management strategies and approaches, and importance of instituting early involvement of the EMS when necessary

10-12pm

**Anesthetic Management of Common Systemic
Illnesses/Conditions Part III – Dr. Ferguson**

Objective(s): To continue review and discussion of the common systemic illnesses and conditions seen by the IV sedation provider which must be properly managed and understood to provide safe and uneventful sedation, or referral.

12 – 1pm

Lunch Munch and Learn (lunch provided)– Dr. Ferguson

Objective(s): To review, discuss and ask questions pertaining to the common office emergencies and common systemic co-morbidities which the sedation dentist must be able to manage or avoid.

1-2pm

**Sedation and Special Patient Populations
Sedation and the Geriatric Patient**

Sedation of the Obese Patient – Sedation Course Faculty

Objective(s): Identify the anatomic, physiologic and functional differences of the geriatric and obese patient populations and how these factors must be understood and managed for the safe and predictable use of sedation agents.

2- 4pm

**From Pre-sedation Evaluation to Patient Discharge: Putting It
All Together – Sedation Course Faculty**

Objective(s): To review and discuss the key activities and important considerations in the out patient office intravenous conscious sedation progression. Key items of discussion will include the pre sedation evaluation, activities on the day of procedure, NPO considerations, patient recovery protocols, and patient discharge.

SUNDAY - DAY FIVE Classroom/Didactic Session

Schedule will be updated over the coming months and we will send out to potential participants at that time.....

**MONDAY DAY SIX
CLINICAL PATIENT CARE**

7-7:30am

Review of Sedation Principles – Nurse Graham

Objective(s): prior to live patient treatment basic sedation principles and venipuncture technique will be reviewed.

7:30-8am

Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm

Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic

Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm

Lunch

1 – 3pm

Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3 - 4pm

Common Dosing Calculations

Objective(s): To review common calculations and dilutions with sedation drugs and local anesthetics, with emphasis on how to calculate toxic drug levels, deliver emergency doses, and how to convert pounds to kilograms

4– 6pm

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation – Dr. Ferguson

Objectives(s): What oral drugs are effective? What is the goal of oral pre-medication? Can oral pre-medication combined with Nitrous Oxide play a role in Conscious sedation? Complications of oral sedation. Contraindications of oral pre-medication. What are the Limitations of oral pre-medication.

TUESDAY DAY SEVEN CLINICAL PATIENT CARE

7-7:30am

Review of patient monitoring – Nurse Graham

Objective(s): To review the monitoring modalities needed for IV sedation vital sign monitoring and their importance to an uneventful sedation experience. .

7:30-8am

Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm

Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm

Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 5pm Preparation for the Office Anesthesia Evaluation Pt I – Dr. Ferguson, Sedation Course Faculty

Objective(s) to prepare the participants for the office evaluation. The presentation will provide a review of important considerations in the office physical plant and IV treatment rooms, adjunctive equipment, back up equipment, instrumentation, emergency drug kits, drug preparation and security, record keeping, and monitoring requirements. State requirements may vary. Information should be available through the participant's state web sites. This is the responsibility of the participant.

5 – 6pm Managing Emergencies: 9 Key Elements of Office Emergency Management - Dr. Ferguson

Objective(s): To review key elements which will aid the practitioner and his/her staff in the management of office emergencies. This presentation will review key elements which will assist the provider in preparing both the office physical plant and personnel, as well as actual management of the patient with a medical emergency.

**WEDNESDAY DAY EIGHT
CLINICAL PATIENT CARE**

7-7:30am Review of airway management techniques – Nurse Graham

Objective(s): To review basic airway management techniques and emphasize the need of the sedation student to be ever vigilant to drug induced changes in airway mechanics.

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8 - 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 4pm Preparation for the Office Anesthesia Evaluation PT II Dr. Ferguson, Sedation Course Faculty

Objective(s) to prepare the participants for the office evaluation. The presentation will provide a review of important considerations in the office physical plant and IV treatment rooms, adjunctive equipment, back up equipment, instrumentation, emergency drug kits, drug preparation and security, record keeping, and monitoring requirements. State requirements may vary. Information should be available through the participant's state web sites. This is the responsibility of the participant.

4- 6pm Interactive Office Emergency Scenarios - Dr. Ferguson

Objective(s): Office emergency scenarios with specific signs, symptoms and factors will be presented to the participant. Specific to the described scenarios, will be an interactive discussion between participant and faculty where the participants will verbally detail the diagnosis, action plan with specific patient management strategies, to include activation of EMS as needed. After the management plan is provided by the participant, it will be discussed and critiqued by the faculty. Predisposing actors and related pathophysiology of the individual medical emergencies will be reviewed.

**THURSDAY DAY NINE
CLINICAL PATIENT CARE**

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the

advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3- 4pm Review of Prevention, Recognition, and Implementation of the Basic Action Plan- Dr Ferguson

Objective(s) To review preventive measures, signs and symptoms which may suggest an upcoming emergent event, and implementation of the Basic Action Plan which is designed to assist the provider in determining if the problem at hand is one which can be managed on site, or if the next level of care is required.

4- 6pm Interactive Office Emergency Scenarios - Dr. Ferguson

Objective(s): Office emergency scenarios with specific signs, symptoms and factors will be presented to the participant. Specific to the described scenarios, will be an interactive discussion between participant and faculty where the participants will verbally detail the diagnosis, action plan with specific patient management strategies, to include activation of EMS as needed. After the management plan is provided by the participant, it will be discussed and critiqued by the faculty. Predisposing actors and related pathophysiology of the individual medical emergencies will be reviewed.

FRIDAY DAY TEN

CLINICAL PATIENT CARE Group

7-7:30am Review of IV Sedation Record Keeping – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8 - 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 3pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

3 - 4pm

Review of sedation principles and pearls- Dr Ferguson

Objective(s) To highlight up 10 days of comprehensive training and review key sedation principles and knowledge pearls for safe, uneventful, and predictable patient sedation experiences. The discussions will emphasize good risk management, proper patient selection, proper written consent; detailed sedation plan documentation, and monitoring,

4 – 5pm

IV Sedation Post-test

Questions and Answers, Complete course critique - Dr. Ferguson

Objective(s): to administer the IV Sedation Post Test.

To review sedation cases and associated management questions or problems.

The discussions will emphasize the importance of Dentist and staff training through CE, staying current with national and state rules and changes; good record keeping and periodic review and process improvement..

FL/NY RESIDENTS ONLY (THREE ADDITIONAL CLINICAL DAYS)

MONDAY, DAY ELEVEN

FL/NY RESIDENTS ONLY CLINICAL PATIENT CARE

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

TUESDAY, DAY TWELVE

CLINICAL PATIENT CARE

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

**WEDNESDAY, DAY THIRTEEN
CLINICAL PATIENT CARE**

7-7:30am Review of Recovery Protocol – Nurse Graham

Objective(s): To review the recovery process after cessation of provocative stimuli and identify factors suggestive of a level of recovery required for discharge

7:30-8am Case review and Setup - Nurse Graham

Objective(s): Review sedation cases of the day to identify patient concerns or special needs; to prepare IV armamentarium and sedation drugs

8- 12pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Observe and participate in patient sedation, monitoring and recovery. Describe the advantages and disadvantages of the intravenous route of drug administration and review the set-up and application of monitors.

12 - 1pm Lunch

1 – 5pm Clinical Patient Care - Nurse Graham, Dr. Ferguson, Clinic Staff

Objective(s): Witness and participate in live patient sedation and recovery; describe the advantages and disadvantages of the intravenous route of drug administration; and review set-up and application of monitors.

CURRICULUM VITAE

Name and Present Position:

Henry W. Ferguson, DMD
Associate Professor
Vice Chairman and Director of Residency Training
Department of Oral and Maxillofacial Surgery
Augusta University Dental College of Georgia
Augusta, GA 30912

Work Address:

Augusta University
Dental College of Georgia
Department of Oral and Maxillofacial Surgery
1430 John Wesley Gilbert Drive
Room GC 1056
Augusta, GA 30912

Telephone:

Work: (706) 721-2411/2412
Fax: (706) 721-3511
e-mail: hferguson@gry.edu

Home Address:

430 Congressional Court
Martinez, GA 30907

Mailing Address:

430 Congressional Court
Martinez, GA 30907

Telephone:

Home: (706)- 863-0910
Cell: (706)- 951-7387

Home of Record:

8360 Bricelyn Street
Pittsburgh, PA 15221

Date and Place of Birth: 13 Feb 54, Pittsburgh, Pennsylvania

Citizenship: USA

Education:

B.A. 1976 Slippery Rock State College
Slippery Rock, PA 16057

D.M.D. 1980 University of Pittsburgh School of
Dental Medicine, Pittsburgh, PA 15222

Post Graduate Education:

Certificate 1991 Oral and Maxillofacial Surgery Residency Program
Eisenhower Army Medical Center
Fort Gordon, GA 30905-5650

Board Certification:

Diplomate American Board of Oral and Maxillofacial Surgery
ABOMS Recertification September 2003
Diplomate National Dental Board of Anesthesiology 2001

Fellowships:

Fellow American Association of Oral and Maxillofacial Surgeons
Fellow American College of Oral and Maxillofacial Surgeons
Fellow American Dental Society of Anesthesia

Professional Society Membership:

American Dental Association
Georgia Dental Association
American Association of Oral and Maxillofacial Surgery
American College of Oral and Maxillofacial Surgeons
American Dental Society of Anesthesia
National Society of Oral and Maxillofacial Surgeons
Georgia Society of Oral and Maxillofacial Surgeons
American Dental Education Association

State License:

Georgia	Active
South Carolina	Active
Pennsylvania	Inactive

Hospital Affiliations:

May 2004- present	MCG/GHSU/GRU/AU Medical Center Augusta, Georgia MCG/GHSU/GRU Children's Medical Center/ CHOG (Children's Hospital of Georgia, formerly CMC Children's Medical Center Augusta, Georgia
May 2004-Present	Veterans Administration Hospital and Medical Center Augusta, Georgia
April 2006-present	Augusta State Medical Prison Grovetown, Georgia
June 1994-March 2004	Eisenhower Army Medical Center Fort Gordon, Georgia
Jan 1992-June 1994	Ireland Army Community Hospital Fort Knox, Kentucky
July, 1991-Dec, 1994	William Beaumont Army Medical Center Fort Bliss, Texas
July 1987-July 1991	Eisenhower Army Medical Center Fort Gordon, Georgia

Professional Appointments:

June 2006-present	Vice Chair Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912
Jun 2005-June 2006	Interim Chairman Department of Oral and Maxillofacial Surgery MCG School of Dentistry Augusta, GA 30912
May 2005-Dec 2017	Director of Post Graduate Training Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912 Department of Oral and Maxillofacial Surgery Augusta, GA 30912

May 2004-present	Associate Professor Department of Surgery Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Augusta, GA 30912
Apr 2004-present	Associate Professor Augusta University Medical Center (formerly the Medical College of Georgia, Georgia Health Sciences University, Georgia Regents University Augusta) Dental College of Georgia (former College of Dental Medicine) Department of Oral and Maxillofacial Surgery Augusta, GA 30912 College of Dental Medicine Department of Oral and Maxillofacial Surgery Augusta, GA 30912
Mar 2004-Apr 2004	Awaiting faculty appointment to MCG
Mar 2003-Mar 2004	Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA Mentor/Teaching Faculty, Oral and Maxillofacial Surgery Residency Program Teaching Faculty, for Graduate Dental Education Programs US Army Dental Activity Fort Gordon GA 30905
Feb 2001-Mar 2003	Chairman, Department of Oral and Maxillofacial Surgery Eisenhower Army Medical Center, Fort Gordon, GA 30905 Program Director, Oral and Maxillofacial Surgery Residency Training Program Eisenhower Army Medical Center, Fort Gordon, GA 30905 Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA
Feb 2001-July 2002	Chairman, Department of Hospital Dentistry Eisenhower Army Medical Center, Fort Gordon, GA 30905

Jul 1994-Aug 1999	Chief, Dental Services 249th General Hospital Fort Gordon, GA.
Mar 1998-Feb 2001	Assistant Chairman, Department of Oral and Maxillofacial Surgery Eisenhower Army Medical Center Fort Gordon, GA
	Assistant Program Director, Oral and Maxillofacial Surgery Residency Training Program
Jul 1994-Mar 1998	Mentor, Oral and Maxillofacial Surgery Residency Program
	Staff, Oral and Maxillofacial Surgeon, Eisenhower Army Medical Center Fort Gordon, GA
Nov 1992-July 1994	Adjunct Assistant Professor, Department of Surgical and Hospital Dentistry, University of Louisville School of Dentistry, Louisville, KY
Jan 1992-July 1994	Assistant Chief, Oral and Maxillofacial Surgery Service Staff Oral and Maxillofacial Surgeon Ireland Army Community Hospital Fort Knox, KY Mentor in Oral and Maxillofacial Surgery for Advanced Education in General Dentistry and Post Graduate Training in Orthodontic Residency Programs
July 1991-Dec 1991	Staff, Oral and Maxillofacial Surgery Mentor, Oral and Maxillofacial Surgery Residency Program, William Beaumont Army Medical Center, Fort Bliss, TX
1987-1991	Residency in Oral and Maxillofacial Surgery Eisenhower Army Medical Center Fort Gordon, GA
1985-1987	General Dental Officer Fort Meade, MD

1984-1985 General Dental Officer
Chief, Oral Surgery Svc, Carius Dental Clinic
10th MED DET
Youngsan, Korea

1980-Dec 1983 General Dental Officer
Fort Gordon, GA

Teaching Affiliations:

Jan 2006-present Course Director, Advanced Oral and Maxillofacial Surgery
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

June 2005-present Co-Course Director, Intravenous Conscious Sedation Course
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

Apr 2004- present Department of Oral and Maxillofacial Surgery
Dental College of Georgia (former College of Dental Medicine)
Augusta, GA 30912

April 2004-preent Department of Surgery
Augusta University Medical Center (formerly the Medical College of
Georgia, Georgia Health Sciences University, Georgia Regents University
Augusta)
Augusta, GA 30912

July 1994-Mar 2004 Eisenhower Army Medical Center
Fort Gordon, GA

Sept 1994-Aug 1998 USADENCOM Sponsored Army Implant Course Faculty

Nov 1992-July 1994 Adjunct Assistant Professor, Department of
Surgical and Hospital Dentistry,
University of Louisville School of Dentistry,
Louisville, KY

Jan 1992-July 1994 Ireland Army Community Hospital
Fort Knox, KY

July 1991-Dec 1991 William Beaumont Army Medical Center,
Fort Bliss, TX

Committees:

Sept 2006 –present	MCG School of Dentistry Nobel Biocare Operations Committee
May 2005 – present	MCG Medical Center OR Committee
May 2005 – present	MCG School of Dentistry Facilities and Equipment Committee
Feb 2005 – Mar 2006	Secretary Graduate and Post Graduate Section American Dental Education Association (ADEA)
Mar 2005 – Mar 2007	Chairman Elect, Graduate and Post Graduate Section American Dental Education Association (ADEA)
Mar 2007 – Mar 2008	Chairman, Graduate and Post Graduate Section American Dental Education Association (ADEA)
May 2004-present	MCG School of Dentistry Implant Committee
July 2004–2006	MCG School of Dentistry Admissions Committee
June 2005-present	MCG School of Dentistry Advanced Education Committee
January 2013-present	Promotion and Tenure Committee
April 2001-April 2005	Member, American Association of Oral and Maxillofacial Surgeons Committee on Membership
April 2005-October 2010	Chairman, American Association of Oral and Maxillofacial Surgeons Committee on Membership

Certifications:

- Advanced Trauma Life Support (ATLS)
- Advanced Cardiac Life Support (ACLS)
- Pediatric Advanced Life Support (PALS)
- Basic Life Support (BLS)-

Awards, Honors and Decorations

- Outstanding Faculty Award MCG School of Dentistry 2006-07
- Surgeon General's "A" Proficiency Designator in Oral and Maxillofacial Surgery
- Meritorious Service Medal
- Army Commendation Medal (X4)
- Army Achievement Medal
- National Defense Service Medal
- Expert Field Medical Badge

- Parachutist Badge
- Army Service Ribbon
- Overseas Service Ribbon

Publications:

Sutley, SH, Ferguson, HW, Quigley, NC: Infection Control in Oral Surgery; AGD Update Series June 1993.

Moody, John B., Quigley, Nicholas, Ferguson, H.W., Sutley, Stephen H: Odontogenic Keratocyst. General Dentistry Vol 45 #2, March-April 1997, pp 172-176.

Wright, William, Ferguson, H.W., Drugs Used in Oral and Maxillofacial Surgery, EAMC Publication, 1996.

John W. Hellstein; Ronald L. Roholt; Henry W. Ferguson, The case of a subtle expansion of the mandible. Journal of Contemporary Dental Practice 2002;3(4):93-95.

Hellstein JW, Roholt RL, Ferguson HW
AAOMP case challenge: "The case of a subtle expansion of the mandible".
J Contemp Dent Pract.[Electronic Resource] 2002 Nov 15;3(4):66-72.

Fallah DM, Baur DA, Ferguson HW, Helman JI
Clinical application of the temporoparietal-galeal flap in closure of a chronic oronasal fistula: review of the anatomy, surgical technique, and report of a case.
J Oral Maxillofac Surg. 2003 Oct;61(10):1228-30.

Velez, Martin R., Ferguson, Henry W., Dorsett, Cecil, Hansen, Karla,
Lemierre's syndrome: a case report.
J Oral Maxillofac Surg. 2003 Aug; 61(8):968-71.

Clark,C., Strider, J., Hall, C. Ferguson, HW.
Distraction osteogenesis in irradiated rabbit mandibles with adjunctive hyperbaric oxygen therapy.
J Oral Maxillofac Surg. 2006 Apr;64(4):589-93.

Ferguson,HW, Stevens, MR
Advances in head and neck radiotherapy to the mandible
Oral and Maxillofacial Surgery Clinics of North America. Nov 2007 19 (4):553-563

Ferguson, HW,
Preprosthetic Surgical Considerations in Textbook of Complete Dentures, 6th Ed
Rahn AO, Ivanho JR, Plummer KD, Peoples Medical Publishing House, Shelton, Connecticut
2009, pp65-85

Wayne W. Herman¹, DDS, MS; Henry W. Ferguson², DDS;
Dental Care for the patient with heart failure: an update
J Am Dent Assoc, July 2010, Vol 141, No 7, 845-853

Rafik A. Abdelsayed, DDS, Suash Sharma, MD and Henry Ferguson, DDS
Fibrous Cortical defect (nonossifying fibroma) of the mandibular ramus: report of two cases
Oral Surg oral Med Oral path Oral Radiol Endo 2010;110:504-508

Etezadi A, Ferguson H, Emam HA, Walker P.
Multiple Remediation of soft tissue reconstruction in osteoradionecrosis of mandible: a case report
J Oral Maxillofac Surg. 2013 Jan;71(1):e1-6. doi: 10.1016/j.joms.2012.09.011

Ferguson, HW
Postoperative Cognitive Dysfunction
OMS Knowledge Updates (to be released summer 2013)

Table Clinics:

Third International Conference on Head and Neck Cancer
San Francisco, California July 26-30, 1991

Arcuri, Michael R, Ferguson, HW, Autogenous Bone Grafts with Titanium Implants for
Segmental Mandibular Defect Reconstruction

Arcuri, MR, LaVella WE, Hoffman HH, Ferguson HW: Implant Fixation in Irradiated Bone for
Intraoral Prosthetic Rehabilitation

Lectures/Presentations:

Georgia Society of Dental Assistants
Masters Inn Conference Center, Augusta, Ga.
Preparing the Office for Medical Emergencies
Pathophysiology and Management of Dental Emergencies
May 1995

EAMC
MED/SURG ward 10w
In-service lecture
Post-op Management of the OMS Patient

April 1995

EAMC

Dept of Family practice

Maxillofacial Trauma

Jan 4, 1996

USADENTAC, Ft Gordon

Rationale, Techniques, and Complications of Intravenous Access

Anatomy and Techniques for Venipuncture

January 1996

EAMC

Dept of OMS

Wound Healing

Local Flaps in Facial Reconstruction

PIG LAB/Hands on instruction

Jan 30, 1996

EAMC

Dept of Family practice

Odontogenic Infection

Mar 7, 1996

USADENTAC, Ft Gordon

Overview of Oral and Maxillofacial Surgery

Apr 16, 1996

Migrant Clinicians Network/_Migrant Stream Dental Forum

Sponsored By US Dept of Public Health

Stouffer Hotel

Nashville, Tenn.

Overview and Management of Medical Emergencies

May 1996

Stouffer Hotel

Nashville, Tennessee

Complications of Dentoalveolar Surgery

May 4-5, 1996

EAMC MED/SURG ward 10w

In-service Lecture

Post-op Management of the OMS Patient

May 9, 1996

USADENTAC, Ft Gordon, GA

Endodontics Residency Program

Anatomy of Odontogenic Space Infections

May 16, 1996

Craniofacial Implant Course

Menger Hotel

San Antonio, Texas

Surgical Management of the Atrophic Mandible and Maxilla in the Pre-implant Era

May 21-22, 1996

EAMC SICU

In-service Lecture

SICU Concerns/Post-op Management of the OMS Patient

Overview of Maxillofacial Surgery Which Requires SICU Care

June 27, 1996

USADENTAC, Ft Gordon

Dental Assistants Course

Office Emergencies

Overview of the SPARK KIT/EDK

July 22, 1996

USADENTAC, Ft Gordon

Periodontics Residency Program

Intravenous Sedation Course

Preparing the Office for Medical Emergencies

Management of Office Emergencies

Overview of the Medical History and Physical Exam

July 25, 1996

EAMC SICU

In-service Lecture

SICU Concerns/Post-op Management of the OMS Patient

Overview of Maxillofacial Surgery Which Requires SICU Care Aug 1, 1996

USADENTAC, Fort Stewart

Ft Stewart, Ga.

Management of Facial Trauma

Management of Soft Tissue Trauma

August 15, 1996

USADENCOM Short course in Oral and Maxillofacial Surgery

Sheraton Hotel, Augusta, Ga.

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

September 9-13, 1996

9th East Coast Migrant Stream Forum
Sponsored By US Dept of Public Health
Tampa Fla.
Office Emergencies
Preparing the Office for Emergencies
Nov 1996

Fort Stewart Dental Activity
Preparing the Office for Medical Emergencies
Pathophysiology and Management of Dental Emergencies
Nov 1996

European Dental Conference/OMS consultant
Sonthoffen, Germany
Implants: A Historical Overview
Surgical Management of the Atrophic Mandible and Maxilla In The Pre-implant Era
Current Implant Systems
Craniofacial Implants
Advanced Implant Surgery
Implant Complications
April 1997

USADENCOM Implant Course
Fort Hood, Texas
Surgical Management of the Atrophic Mandible and Maxilla in the Pre-implant Era
Advanced Implant Surgery
Biology of Bone Healing
May 1997

USADENTAC, Ft Gordon
Periodontics Residency Program
Intravenous Sedation Course
Overview of the Medical History and Physical Examination
Preparing the Office for Medical Emergencies
Management of Medical Emergencies
July 1997

USADENTAC, Fort Stewart, GA
Dental Activity Hunter Army Airfield
Savannah Dental Society
Hunter Army Airfield Officer's Club
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
August 16, 1997

Fort Bragg Dental Activity

Fort Bragg, NC

2year AEGD Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

Implant Complications

August 1997

Augusta Dental Society

West Lake Country Club

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

January 1997

Patrick Air Force base

Melborne, FLA

OMS Consultant Visit

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

April 1998

Mississippi Black Professional Conference/Mississippi Dental Association

Biloxi, Mississippi

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

May 1998

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV Sedation Course

Overview of the Medical History and Physical Examination

Preparing the Office for Medical Emergencies

Management of Medical Emergencies

July 1998

Fort Benning Dental activity

1year GDR Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

August 1998

USADENCOM Implant Course

Fort Bragg, North Carolina

Advanced Implant Surgery

Biology of Bone Healing

Sept 16-18, 1998

USADENCOM Implant Course

Fort Hood, Texas

Advanced Implant Surgery

Biology of Bone Healing

Sept 23-25, 1998

Medical College of Georgia

Biological Sciences Lecture Series

Physiology of Skin and Mucosa Healing

Physiology of Bone Healing

Maxillofacial trauma: Management of Hard and Soft Tissue Trauma

October 19, 1998

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV sedation Course

Overview of the Medical History and Physical Examination

Preparing the office for medical emergencies

Management of medical emergencies

July 26-28, 1999

USA DENTAC Fort Benning 1yr GDR Program

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

Maxillofacial Trauma

Management of Soft Tissue Wounds

Complications of Dentoalveolar Surgery

August 26-27, 1999

USADENTAC FT Gordon, Ga.

Dept of Periodontics

IV Sedation Course

Overview of the Medical History and Physical Examination

Preparing the Office for Medical Emergencies

Management of Medical Emergencies

July 10-12, 2000

USA DENTAC Fort Benning 1yr GDR Program
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
Maxillofacial Trauma
Management of Soft Tissue Wounds
Complications of Dentoalveolar Surgery
Aug 24-25, 2000

Medical College of Georgia
Biological Sciences Lecture Series
Physiology of Skin and Mucosa Healing
Physiology of Bone Healing
Maxillofacial trauma: Management of Hard and Soft Tissue Trauma
October 10, 2000

USADENTAC FT Gordon, Ga.
Dept of Periodontics
IV Sedation Course
Overview of the Medical History and Physical Examination
Preparing the Office for Medical Emergencies
Management of Medical Emergencies
July 16-18, 2001

USA DENTAC Fort Polk, LA
Complications of Dentoalveolar Surgery
Management of Odontogenic Infections
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Jan 6-8, 2002

USA DENTAC Fort Benning, GA 1yr GDR Program
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
Maxillofacial Trauma
Management of Soft Tissue Wounds
Complications of Dentoalveolar Surgery
Feb 21-23, 2002

USADENTAC FT Gordon, GA
Alternate Wartimes Roles Lecture Series
Indications For Intravenous Therapy
Regional Anatomy for Venipuncture
Techniques for Venipuncture
Complications, and Management of Complications of Venipuncture

March 21, 2002

Georgia State Department of Corrections Dental Service
Macon, GA

Identification and Management of Common Complications of Dentoalveolar Surgery
April 16, 2002

Academy Of General Dentistry Mastership Course
Atlanta, GA

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

What the Practitioner Should Know About Antibiotics Before Prescribing

Maxillofacial Trauma Overview

Management of Dentoalveolar Trauma

Management of Soft Tissue Wounds

Principles for Performing Complicated Extractions

Complications of Dentoalveolar Surgery

Preprosthetic Surgery For the General Dentist

Implant Applications in Oral and Maxillofacial Surgery

Advanced Implant Surgery

Biopsy Principles and Techniques

May 3-5, 2002

Madigan Army Medical Center
Tacoma, WA

Annual Army Oral and Maxillofacial Surgery Review Course

Implant History

Implant Geometries and Surface Characteristics

Implant Applications in Oral and Maxillofacial Surgery

May 7-10 2002

USADENTAC FT Gordon, GA

Alternate Wartimes Roles Lecture Series

810th Medical Company (DS), Durham, NC

Maxillofacial Trauma Overview

Management of Maxillofacial Hard and Soft Tissue Trauma

Etiology and Pathophysiology of Odontogenic Infections

Regional Anatomy of Odontogenic Infection (Fascial Spaces)

Surgical and Medical Management of Odontogenic Infections

June 11, 2002

USADENTAC FT Gordon, GA

Alternate Wartimes Roles Lecture Series

808th Medical Company (DS), Fort Sheridan, ILL

Maxillofacial Trauma Overview

Management of Maxillofacial Hard and Soft Tissue Trauma

Etiology and Pathophysiology of Odontogenic Infections

Regional Anatomy of Odontogenic Infection (Fascial Spaces)

Surgical and Medical Management of Odontogenic Infections

July 17, 2002

Medical College of Georgia

Biological Sciences Lecture Series

Physiology of Skin and Mucosa Healing

Physiology of Bone Healing

Maxillofacial trauma: Management of Hard and Soft Tissue Trauma

October 9, 2002

Medical College of Georgia

OMS Lecture Series

Implant Overview: Historical Overview, Bone physiology

April 2004

Medical College of Georgia

Conscious Sedation Course

Medical History Review of Systems for Conscious Sedation

Requirements for Conscious Sedation

May 6, 2004

Medical College of Georgia

OMS Lecture Series

Patient Diagnosis, Review of anatomical considerations, Basic Surgical techniques

May 2004

Medical College of Georgia

OMS Lecture Series

Advanced Surgical techniques, Clinical applications, Grafting techniques and materials

May 2004

Medical College of Georgia

OMS Lecture Series: Complications of Implant Surgery

May 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Host organism relationship, Host immune response, Local host defenses

June 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Microbiology of odontogenic infections, Anatomy of fascial space infections

June 2004

Medical College of Georgia

OMS Lecture Series

Odontogenic Infection: Diagnosis of odontogenic infections, Surgical and medical management

of odontogenic infections,

June 2004

Kenna S. Givens, MD Plastic Surgery Symposia

Overview of Endosseous Dental Implants

June 18, 2004

Medical College of Georgia

OMS Lecture Series

Complications of Dentoalveolar Surgery

June 29, 2004

MCG School of Dentistry Implant Course

Advanced Implant Surgery

Complications of Implant Surgery

July 12-15 2004

Area Health Education Centers Symposia

Overview of Oral and Maxillofacial Surgery

July 20, 2004

Medical College of Georgia

OMS Lecture Series

Nitrous Oxide Sedation: Indications, Contraindications

Pharmacology, Armamentarium, Technique

August, 17 2004

38th Parallel Dental Meeting

Yongsan, Korea

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

What the Practitioner Should Know About Antibiotics Before Prescribing

Maxillofacial Trauma Overview

Management of Dentoalveolar Trauma

Management of Soft Tissue Wounds

Principles for Performing Complicated Extractions

Complications of Dentoalveolar Surgery

Preprosthetic Surgery For the General Dentist

Implant Applications in Oral and Maxillofacial Surgery

Advanced Implant Surgery

Biopsy Principles and Techniques

Nov 27-Dec 3 2004

Academy Of General Dentistry Mastership Course

Atlanta, GA

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections

Management of Odontogenic Infections

What the Practitioner Should Know About Antibiotics Before Prescribing

Maxillofacial Trauma Overview

Management of Dentoalveolar Trauma

Management of Soft Tissue Wounds

Principles for Performing Complicated Extractions

Complications of Dentoalveolar Surgery

Preprosthetic Surgery For the General Dentist

Implant Applications in Oral and Maxillofacial Surgery

Advanced Implant Surgery

Biopsy Principles and Techniques

February 18-20, 2005

Fort Hood Texas Dental Activity

AEGD Program

Management of Odontogenic Infections

Maxillofacial Trauma Overview

Complications of Dentoalveolar Surgery

Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies

Killeen, TX

April 1-2, 2005

AO ASIF

Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction

OR Nurse Course

General Principles of Orthognathic Surgery

Myrtle Beach, SC

November 29, 2005

MCG SOD Advanced Oral and Maxillofacial Surgery Course

Medico-legal Considerations

Major Pre-prosthetic Surgery

Infection 1

Infection 2

Biopsy Principles and Techniques

Management of Cysts and Benign Tumors

Overview of the Maxillary Sinus and Sinusitis

Salivary Gland Disease

Dentoalveolar and Soft Tissue Trauma

Diagnosis and Management of Facial Fractures

Correction of Dentofacial Deformities

Tempromandibular Disorders

Cleft Lip and Palate

Maxillofacial Reconstruction

Jan-May 2006

MCG SOD Department of Oral Medicine Lecture Series

Pulmonary Assessment

Pulmonary Disease

January 9, 2006

GEORGIA Academy of General Dentistry Annual Meeting

Alanta, GA

Oral Surgery Pearls for the General Dentist

February 4, 2006

MCG SOD Intravenous Conscious Sedation Course

Conscious Sedation Patient Management in Dental Practice

Introduction to 9 Key Elements of Office Emergency Management

Pharmacology of Adjunctive Anesthetic Agents

Office Emergencies: Preparation of the office for emergencies

Introduction to, Airway Management, Complications and Resuscitation

Preparing For an Office Evaluation

Introduction to Medical Emergency Management in the Dental Office

Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I

Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II

Sedation and the Geriatric Patient

From Presedation Evaluation to Patient Discharge: Putting It All Together

The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation

Augusta, GA

February 8-12, 2006

Augusta Tech Dental Assisting Program

Nitrous Oxide Inhalational Anesthesia:

Indications, Pharmacology, Armamentarium, Review of Technique

Augusta, GA

Feb 18, 2006

MCG SOD Oral Implantology Course

Overview Surgical Implant Placement

Dental Implant Site Development and Preservation

February 22, 2006

MCG SOD Medically Compromised Patient Course

Pulmonary Disease

March 6, 2006

AO ASIF

Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction

OR Nurse Course

General Principles of Orthognathic Surgery

Providence, RI

March 18, 2006

MCG SOD Intravenous Conscious Sedation Course
Conscious Sedation Patient Management in Dental Practice
Introduction to 9 Key Elements of Office Emergency Management
Pharmacology of Adjunctive Anesthetic Agents
Office Emergencies: Preparation of the office for emergencies
Introduction to, Airway Management, Complications and Resuscitation
Preparing For an Office Evaluation
Introduction to Medical Emergency Management in the Dental Office
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II
Sedation and the Geriatric Patient
From Presedation Evaluation to Patient Discharge: Putting It All Together
The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation
Augusta, GA
April 12-16, 2006

Tripler Army Medical Center
Department of Oral and Maxillofacial Surgery
Schofield Army Dental Activity 1 year GPR Program
Management of the Naso-Orbital-Ethmoid Fracture
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Complications of Dentoalveolar Surgery
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Advanced Implant Surgery
Honolulu, HI
May 12-14 2006

MCG SOD Intravenous Conscious Sedation Course
Conscious Sedation Patient Management in Dental Practice
Introduction to 9 Key Elements of Office Emergency Management
Pharmacology of Adjunctive Anesthetic Agents
Office Emergencies: Preparation of the office for emergencies
Introduction to, Airway Management, Complications and Resuscitation
Preparing For an Office Evaluation
Introduction to Medical Emergency Management in the Dental Office
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation Pt I
Cardiac Assessment, Cardiovascular Disease and Patient Selection for Conscious Sedation PT II
Sedation and the Geriatric Patient
From Presedation Evaluation to Patient Discharge: Putting It All Together
The role of oral pre-medication in conscious sedation in dentistry. The use of oral techniques with other techniques in conscious sedation
Augusta, GA

May 14-18, 2006

Georgia Dental Society
Annual Meeting
Complications of Dentoalveolar Surgery
Pearls for the General Dentist
Miami, Florida
June, 14 2006

AO ASIF
Principles of Operative Treatment and Craniomaxillofacial Trauma and Reconstruction OR
Nurse Course
General Principles of Orthognathic Surgery
Little Rock, AK
July 8, 2006

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant
Surgery
Augusta, GA
July 19, 2006

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
October 11-15, 2006

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
December 13-17, 2006

MCG SOD MCG SOD Advanced Oral and Maxillofacial Surgery Course
Lectures as noted in previous courses
Augusta, GA
January-May 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
January 17-21, 2007

MCG SOD Oral Implantology Course
Antral Augmentation
February 16, 2007

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 12, 2007

MCG SOD Medically Compromised Patient Course
Pulmonary Disease
March 8, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March 14-18, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May 9-13, 2007

Madigan Army Medical Center
Oral and Maxillofacial Surgery Short Course
Trauma in the Civilian World
Gun Shot Wounds & Reconstruction
Office Emergencies
Dental Implants & Pre-Prosthetic Surgery
Complications of Dentoalveolar Surgery
Tacoma, Washington
May 14-18, 2007

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant Surgery
Augusta, GA
July 19, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
August 15-19, 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2007

MCG SOD SOD Advanced Oral and Maxillofacial Surgery Course
Lectures as noted in previous courses
Augusta, GA
January-May 2007

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
January-February 2008

Academy Of General Dentistry Mastership Course
Atlanta, GA
Potpourri of Oral and Maxillofacial Surgery: Overview of the Scope and Emerging Technologies
Pathophysiology, Microbiology and Surgical Anatomy of Odontogenic Infections
Management of Odontogenic Infections
What the Practitioner Should Know About Antibiotics Before Prescribing
Maxillofacial Trauma Overview
Management of Dentoalveolar Trauma
Management of Soft Tissue Wounds
Principles for Performing Complicated Extractions
Complications of Dentoalveolar Surgery
Preprosthetic Surgery For the General Dentist
Implant Applications in Oral and Maxillofacial Surgery
Advanced Implant Surgery
Biopsy Principles and Techniques
February 1-3, 2008

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 20, 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March-April 2008

MCG Dental Implantology Maxi Course
Implants and the Medically Compromised Patient

Atlanta, GA
April 19, 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May-June 2008

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant
Surgery
Augusta, GA
July 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
August-September 2008

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2008

MCG SOD Department of Oral Medicine Lecture Series
Cardiac /Pulmonary Assessment
Jan 5, 2009

MCG SOD Department of Oral Medicine Lecture Series
Pacemakers, Defibrillators, and Arrhythmias
Jan 5, 2009

Augusta Tech Dental Assisting Program
Nitrous Oxide Inhalational Anesthesia:
Indications, Pharmacology, Armamentarium, Review of Technique
Augusta, GA
Feb 15, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
March-April 2009

MCG SOD Department of Oral Medicine Lecture Series
Overview of Pulmonary Disease; Pulmonary Assessment

March 2, 2009

MCG SOD Department of Oral and Maxillofacial Radiology Lecture Series
Advanced Oral and Maxillofacial Imaging: It's application to the management of complex trauma, pathologic resection and reconstruction, and implant rehabilitation,
March 24, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
May-June 2009

MCG School of Dentistry
Dental Implantology Course
Advanced Implant Surgery
Implant Complications
Risk Management and Informed Consent for Implant Surgery
Augusta, GA
July 2009

LAODI Implant Conference
Preparation of The office for emergencies
Review of the Emergency Drug Kit
Miami Hilton, Miami, Fla
August 20-21, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
August- September 2009

South Carolina State Dental Society
Bisphosphonate Associated Osteonecrosis of the Jaws
Marriott Hotel
Columbia, SC
October 6, 2009

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December 2009

Georgia AGD Fall CE/Hands on Surgery Course
Exodontia principles
Preprosthetic Surgery for the General Dentist
Complications of Dentoalveolar Surgery

Principles for the Management of Impacted Teeth
Intraoral Biopsy Principles
Bisphosphonate Induced Osteonecrosis of the Jaws
Pig jaw hands on Surgery Course
November 20-21, 2009
Athens, GA.

MCG SOD Last Chance CE Series
Preparation of the Office for Emergencies
December 4, 2009

Augusta Tech Dental Assisting Program
Overview of Nitrous Oxide/O2 Inhalation Sedation
Indications, Contraindications, Pharmacology, Armamentarium, and
Technique
Feb 15, 2010
MCG SOD

MCG/AAID Dental Implant Course
Dental implants and infection
Management of Office Emergencies /
Interactive maniquin simulation lab
March 4-7, 2010
Mariott Hotel, Augusta GA
MCG Interactive Simulation Lab

Georgia Academy of General Dentistry Master Trac Course
Hands on Surgery Course
Exodontia principles
Preprosthetic Surgery for the General Dentist
Complications of Dentoalveolar Surgery
Principles for the Management of Impacted Teeth
Intraoral Biopsy Principles
Bisphosphonate Induced Osteonecrosis of the Jaws
June 4-6, 2010
Hilton perimeter Hotel, Atlanta, GA

AO North America
Multispecialty ORP Course
RIF of Comminuted Mandible Fractures
June 27-27, 2010
Westin Lombard Yorktown Center
Lombard, Ill

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

August- September 2010

Georgia AGD Fall CE/Hands on Surgery Course

Review of Bisphosphonate Induced Osteonecrosis

Frequent Misconceptions in the Management of Office Emergencies

Preparation of the Office Physical Plant, and Personnel to Manage Office Emergencies

Review of Emergency Drugs

Review of Common Office Emergency Scenarios

Pig jaw hands on Surgery Course

September 17-18

Athens, GA.

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

November-December 10. 2010

American Dental Society of Anesthesia

General Anesthesia and Deep Sedation Winter Course

Pharmacologic and Other Considerations for the Prevention of Post Operative Nausea and Vomiting

Misconceptions in the Management of Medical Emergencies in the Dental office When Midazolam, Fentanyl, and propofol Aren't Doing the Job

Review of basic Emergency Drugs

Renaissance Chicago Hotel, Chicago, Ill December 5-6, 2010

MCG SOD Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta, GA

Jan-Feb, 2011

American Society of Maxillofacial Surgeons Advanced Course

Maxillofacial Trauma/Facial Bone Osteotomies

Jacksonville. Fla

February 18-20, 2011

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
March-April, 2011

MCG/AAID Dental Implant Course
Dental implants and infection

March 3, 2011
Mariott Hotel, Augusta GA

Mongalo Implant Institute
Anatomical/ Surgical Considerations and Techniques for Antral Augmentation

May 11-14, 2011
Marriott Casa Magna
Peurta Vallarta, Mexico

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
May-June, 2011

Georgia Academy of General Dentistry Master Trac Course
Oral and maxillofacial Surgery Overview

June 5, 2011
Hilton perimeter Hotel, Atlanta, GA

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses

Augusta, GA
August-September, 2011

Mongalo Implant Institute
Anatomical/ Surgical Considerations and Techniques for Antral Augmentation

September 20-24, 2011
Marriott Casa Magna
Peurta Vallarta, Mexico

GHSU CDM Continuing Education
Misconceptions in the Management of Emergencies in the Dental Office
Overview of Odontogenic Infection
Brasstown Lodge
Brasstown, GA
October 14-15, 2011

Fort Benning Dental Activity AEGD Program
Exodontial Principles
Impacted teeth/Complicated Dentoalveolar Surgery
Complications of Dentoalveolar Surgery
Preprosthetic Surgery
Fort Benning, GA November 16-17, 2011

MCG SOD Intravenous Conscious Sedation Course
Lectures as noted in previous courses
Augusta, GA
November-December, 2011

GHSU Last Minute CE
Review of management of Office Emergencies
Alumni Center GHSU
December 2, 2011

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
January 11-15, 2012 Classroom
January 16-February 24, 2012 Hands on Clinical Portion

MCG/AAID Dental Implant Course
Dental Implants and Infection
Healing of Dental Implants
Key Focus Points in the management of office Emergencies: The Doctor, the Ancillaries, and the Physical Plant/Equipment and Drugs
March 1, 2012
Wingate by Wyndam Hotel
Atlanta, GA 30312

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

March 14-18, 2012 Classroom

March 19-23, April 1- 27, 2012 Hands on Clinical Portion

Mongalo Live Implant Course

Overview of Antral Augmentation , Review of the Anatomy, Surgical Techniques,
And Management of Complications

March 25-31, 2012

Marriott Casa Magna, and The Mongalo Implant Institute

Puerto Vallarta, Mexico

AO Operating Room Personnel Course

Fundamentals of Orthognathic Surgery

May 5, 2012

Waverly Hotel

Atlanta, GA

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

May 16-20, 2012 Classroom

May 21-June 23, 2012 Hands on Clinical Portion

Palmetto Medical Dental and Pharmaceutical Association

Athletic Maxillofacial Trauma and Trauma Overview

Review of Odontogenic Infections and Their Management

May 26, 2012

Marriott Hotel

Columbia, SC

GHSU CE Course: Management of Emergencies in the Dental Office

Why is a strategy for managing office emergencies important

Misconceptions in the management of office emergencies

Management of common emergency scenarios

June 1-2, 2012

GHSU Allied Health Auditorium
Augusta, GA

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

May 16-20, 2012 Classroom

May 21-June 23, 2012 Hands on Clinical Portion

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

August 15-20, 2012 Classroom

August 20-September 21, 2012 Hands on Clinical Portion

Mongalo Live Implant Course

Overview of Antral Augmentation, Review of the Anatomy, Surgical Techniques,
And Management of Complications

September 9-15, 2012

Marriott Casa Magna, and The Mongalo Implant Institute

Peurta Vallarta, Mexico

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

October 17-21, 2012 Classroom

October 22-November 16, 2012 Hands on Clinical Portion

AO Operating Room Personnel Course

Fundamentals of Orthognathic Surgery

November 2, 2012

The Henry Hotel

Dearborn, MI

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

January 16-20, 2013 Classroom
January 20-February 22, 2013 Hands on Clinical Portion

MCG/AAID Dental Implant Course
Dental Implants and Infection
Healing of Dental Implants
Key Focous Points in the management of office Emergencies: The Doctor, the Ancillaries, and the Phsical Plant/Equipment and Drugs
March 7, 2013
Wingate by Wyndam Hotel
Atlanta, GA 30312

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
March 13-17, 2013 Classroom
March 18-April 26, 2013 Hands on Clinical Portion

Palmetto Medical Dental and Pharmaceutical Association
Overview of the Management of Office Emergencies with Emphasis on the Office/Physical Plant, the Equipment, the Doctor, the Ancillaries and Administrative Personal
Review of the Action Plan for Management of Office Emergencies
April 21, 2013
Marriott Hotel and Spa
Myrtle Beach, SC

Graduate Prosthetic Residency Program
Advanced Preprosthetic Surgery and Soft Tissue Management
GRU College of Dental Medicine
April 25, 2013

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 14-19, 2013 Classroom
May 20-June 28, 2013 Hands on Clinical Portion

Mongalo Live Implant Course
Overview of Antral Augmentation
Review of the Anatomy
Surgical Techniques Overview
Management of Complications
June 1-8, 2013
Bahia Principe Resort
Dominican Republic

GHSU CE Course: Management of Emergencies in the Dental Office
Why is a strategy for managing office emergencies important?
Misconceptions in the management of office emergencies
Management of common emergency scenarios
August 9-10, 2013
GHSU Allied Health Auditorium
Augusta, GA

AO Operating Room Personnel Course
Fundamentals of Orthognathic Surgery
September 7, 2013
Sheraton River Walk Hotel
Tampa, Florida

Hiossen Dental Implant Course
Surgical Anatomy for the Implant Dentist
Radiology for the Implant Dentist
Overview of Sutures and Suturing Techniques
Surgical Principles
Complications with Placing Implants
September 21, 2013
Comfort Suites Perimeter
Atlanta, GA 30312

Augusta Dental Society
Key Components in the Management of Office Emergencies
September 10, 2013
West Lake Country Club
Augusta, GA 30907

Hiossen Dental Implant Course
Live Hands on Training
Review of Surgical Technique
Patient Selection
September 28, 2013
Dr. Lattiere Private Office
Atlanta, GA 30312

GHSU CE Course: Management of Emergencies in the Dental Office
Why a Strategy for Managing Office Emergencies Important
Misconceptions in the Management of Office Emergencies
Management of Common Emergency Scenarios
Hands on Simulation Training
October 4-5, 2013
GHSU Allied Health Auditorium
Augusta, GA

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 16-20, 2013 Classroom
October 21-December 4, 2013 Hands on Clinical Portion

US Army DENTAC Fort Jackson
1 Year AEGD Program
Principles of Exodontia
Complicated Exodontia
Complications of Dentoalveolar Surgery
Preprosthetic Surgery
Odontogenic Infection Overview: Pathophysiology, Microbiology, Anatomic
Considerations, Diagnosis, Medical and Surgical Management
November 21-22, 2013
USADENTAC Fort Jackson, SC

Georgia Department of Corrections Dental Annual Meeting
Complicated Exodontia and Associated Complications of Dentoalveolar Surgery
December 19, 2013

Forsyth, GA

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

January 15-19, 2014 Classroom

Jan 20-February 28, 2014 Hands on Clinical Portion

Georgia AGD Annual Meeting

Oral Surgery for the General Dentist

Suturing Techniques/Hands on Pig Lab

January 24-25, 2014

Marriott Century Center

Atlanta, GA 30345

GHSU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

March 12-16, 2014 Classroom

March 17-May 2, 2014 Hands on Clinical Portion

MCG/AAID Dental Implant Course

Dental Implants and Infection

Healing of Dental Implants

Key Focus Points in the management of office Emergencies: The Doctor, the Ancillaries, and the Physical Plant/Equipment and Drugs

March 13, 2014

Wingate by Wyndam Hotel

Atlanta, GA 30312

Graduate Prosthetic Residency Program

Management of Office Emergencies:

The Office, the Equipment, The Doctor and Ancillaries

GRU College of Dental Medicine

March 20, 2014

Mongalo Live Implant Training Course

Overview of Antral Augmentation

Surgical Anatomy for the Implant Dentist

Surgical Techniques Overview
Management of Complications
March 22-29, 2014
Los Mariner Resort and Spa
Dominican Republic

Gwinnett Medical Center's Facial Trauma and Reconstruction Conference
Naso-Orbital-Ethmoid (NOE) Fractures
Contemporary approaches to treatment of NOE fractures
A sequential operative treatment plan to address such injuries
Management and complications of these NOE Fractures
May 3, 2014
Gwinnett Medical Center
Gwinnett, Georgia

GHSU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 14-18, 2014 Classroom
May 19-June 27, 2014 Hands on Clinical Portion

Medical Emergencies in the Dental Office CE Course
Preparation for Emergencies: Review of the Office Physical Plant, Emergency Equipment, the Doctor, Ancillaries, and Staff
Preparation for Emergencies: Principles for Prevention, Aids to Recognition, and a Plan for Response
Patient Assessment and Special Populations: The Geriatric Patient; The Obese Patient; and The Pregnant Patient
Review and Management of Common Office Emergencies
June 20-22, 2014
Marina Inn at Grand Dunes
Myrtle beach, South Carolina

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
August 13-17, 2014 Classroom
August 18-September 26, 2014 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 15-19, 2014 Classroom
October 20-December 6, 2014 Hands on Clinical Portion

Mongalo Live Implant Training Course
Surgical Anatomy for the Implant Dentist
Basic Implant Surgical technique
Principles of Flap Design
Review of Suturing Techniques
Management of Complications
November 10, 2014
Los Mariner Resort and Spa
Dominican Republic

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
January 14-18, 2015 Classroom
January 19-March 5, 2015 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
March 11-16, 2015 Classroom
March 17-May 2, 2015 Hands on Clinical Portion

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
May 13-17, 2015 Classroom
May 18-July 1, 2015 Hands on Clinical Portion

GRU/AAID Maxi-Course.

Medical Evaluation for Dentoalveolar/Implant Surgery

Medical Emergencies and the Surgery Patient

Physiology of Inflammation, Wound Healing/Infection

Review of Osseointegration and What Effects it has During Healing Phase

May 14, 2015

GRU Alumni Center

Augusta, Georgia

GRU General Dentistry Symposium

Office Emergencies: Are You Ready?

Pharmacology of Basic Emergency Medications

Complex Exodontia for the General Practitioner

Pre-prosthetic Surgery for the General Practitioner

July 3-5, 2015

King and Prince Beach Resort

St. Simons Island, GA 31522

Oral Surgery Hands On Surgical Course

Complicated Exodontia

Principles of Flap Design

Review of Suturing Techniques

August 8, 2015

Biohorizons Implant Corporate Center

Birmingham, Alabama

GRU CODM Intravenous Conscious Sedation Course

Lectures as noted in previous courses

GHSU CODM

Augusta, GA

August 12-16, 2015 Classroom

August 17-October 2, 2015 Hands on Clinical Portion

Mongalo Oral Surgery Hands on Course

Complicated Exodontia

Overview of Preprosthetic Surgery

Principles of Flap Design

Review of Suturing Techniques

Complications of Dentoalveolar Surgery

August 22, 2015
Guadalajara, Mexico
Affordable Dentures and Implant Leadership Conference
Medical Emergencies in the Dental Practice:
Preparation of the Office for Medical Emergencies
Common Misconceptions in the Management of Office Emergencies
Pharmacology of Basic Emergency Medications

October 1, 2015
Hyatt Regency Resort and SPA
Scottsdale, Arizona

GRU CODM Intravenous Conscious Sedation Course
Lectures as noted in previous courses
GHSU CODM
Augusta, GA
October 14-18, 2015 Classroom
October 19-December 5, 2015 Hands on Clinical Portion

Mongalo Third Molar Surgery Course
Complicated Exodontia
Overview of Preprosthetic Surgery
Principles of Flap Design
Review of Suturing Techniques
Techniques for Removal of Impacted Third Molars
October 22, 2015
Guadalajara, Mexico

Affordable Leadership Conference
A comprehensive review of Pre-prosthetic Surgery for the General Dentist
November 20, 2015
Airport Marriott
Atlanta, Georgia

Mongalo Live Implant Training Course
Surgical Anatomy for the Implant Dentist
Basic Implant Surgical technique
Principles of Flap Design
Review of Suturing Techniques
February 7, 2016
Guadalajara, Mexico

Academy of General Dentistry Master Track Symposium
Medical Evaluation of the Dentoalveolar Surgery Patient
Complex Exodontia for the General Dentist
Principles of Mucogingival Flap Design, Reflection, and Mobilization
Basic Suturing principles, Techniques, and Armamentarium
Review of Preprosthetic Surgery for the Dental Practitioner
Principles in the Management of the Impacted Third Molar for the General Dentist
Complications of Dentoalveolar Surgery
Odontogenic Infections Part 1:
 Host Defenses: Local, Cellular and Humoral
 Pathophysiology
 Microbiology
 Anatomic considerations
Odontogenic Infections Part 2:
 Radiologic Evaluation
 Diagnosis
 Management principles
 Principles of Treatment
Alveolar Ridge management: Socket Grafting
Misconceptions in the Management of Dental Office Medical Emergencies
Key Focus Points in the Management of Medical Emergencies
Evaluation of the Office, Equipment and Personnel for Medical Emergencies
Airway Management and Resuscitation for the Dental Practitioner
Prevention, Recognition, and Development of a Basic Action Plan
Management of Common Office Emergencies
Soft Tissue Biopsy Principles and Techniques for the General Dentist
May 6-7, 2016
Atlanta, GA

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
May 11-15, 2016 Classroom
May 16-July 1, 2016 Hands on Clinical Portion

Live Implant Training

Anatomic Considerations for the Maxilla and Mandible for the Implant Dentist:

“Identification of Anatomic Potholes “

Complex Exodontia

Principles for Mucogingival Flap Design Development and Mobilization

Suturing Principles and Armamentarium

Control of Hemorrhage and Hemostatic Agents for the Implant Dentist

Patient Evaluation

June 4-11, 2016

Guadalajara, Mexico

HIOSEN Implant Course

Anatomic Considerations for the Maxilla and Mandible for the Implant Dentist:

“Identification of Anatomic Potholes “Complex Exodontia

Principles for Mucogingival Flap Design Development and Mobilization

Suturing Principles and Armamentarium

Anatomic Considerations of the Maxillary Sinus, and Commonly Encountered Complications

Antral Augmentation using the Caldwell Luc Lateral Window Approach

Antral Augmentation using the Intracrestal approach

Antral Augmentation using the Lateral Window Kit

June 24-25, 2016

Atlanta, Georgia

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

August 11-14, 2016 Classroom

August 15- September 19, 2016

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

October 12-16, 2016 Classroom

October 17-December 5, 2016 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Principles Complex Exodontia Part I

Medicolegal Considerations

OMFS 5003

AU Educational Commons 1110

January 10, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

January 11-15, 2017 Classroom

January 15-February 27, 2017 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Principles of Complex Exodontia Part II

Principles of Tissue Re-approximation and Suturing

OMFS 5003

AU Educational Commons 1110

January 17, 2017

Factors Critical for Managing Office Medical Emergencies

Pharmacology of Emergency Medications

Georgia Academy of General Dentistry

Atlanta Century City Marriott Hotel

January 26-28, 2017

Advanced Oral and Maxillofacial Surgery

Microbiological and Anatomic Considerations of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 24, 2017

Anatomic Considerations for Maxillary and Mandibular Local Anesthesia

DANA 5002

CL 1103

January 30, 2017

Advanced Oral and Maxillofacial Surgery

Principles in the Diagnosis and Clinical Management of Odontogenic Infection

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 31, 2017

Advanced Oral and Maxillofacial Surgery

Oral Biopsy Principles and Techniques

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 7, 2017

Advanced Oral and Maxillofacial Surgery

Management of Odontogenic Cysts and Tumors

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 14, 2017

Advanced Oral and Maxillofacial Surgery

Anatomic and Clinical Consideration of the Maxillary Sinus

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 21, 2017

Indications for Orthognathic Surgery

Review of Commonly Used Orthognathic Surgery Osteotomies

Common Complications of Orthognathic Surgery

Georgia School of Orthodontics

Atlanta, Georgia

February 24, 2017

Advanced Oral and Maxillofacial Surgery

Salivary Gland Disorders

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 7, 2017

Orthodontic Lecture Series

Review of Head and Neck Anatomy for the Orthodontic Resident

Orthodontic Conference Room DCG

March 13, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Dentoalveolar and Soft Tissue Trauma

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 14, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

March 15-19, 2017 Classroom

March 20-May 5, 2017 Hands on Clinical Portion

Advanced Oral and Maxillofacial Surgery

Management of Facial Bone Fractures

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 21, 2017

Advanced Oral and Maxillofacial Surgery

Correction of Dentoskeletal Deformities

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 28, 2017

Maxillary Sinus Grafting: Review of Common Techniques

Implant 5001

AU Educational Commons 1110

April 10, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Temporomandibular Disorders

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 11, 2017

Grad Pros Lecture Series

Suturing Principles and Techniques

Hands on Techniques Course

Grad pros Conference room

April 17, 2017

Advanced Oral and Maxillofacial Surgery

Overview of Cleft Lip and Palate

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 18, 2017

Advanced Oral and Maxillofacial Surgery

Principles of Maxillofacial Reconstruction

OMFS 5003 Lecture Series

AU Educational Commons 1110

April 25, 2017

Review of Head and Neck Anatomy for the Orthodontic Resident

Management of Office Medical Emergencies

Georgia School of Orthodontics

Atlanta, Georgia

April 28, 2017

Full Thickness Mucoperiosteal Flap Design and Execution

Graduate Prosthodontics

Grad Pros Conference Room DCG

May 8, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

May 17-21, 2017 Classroom

May 22-June 30, 2017 Hands on Clinical Portion

Oral Surgery for the General Dentist:

Patient Assessment

Complex Exodontia

Preprosthetic Surgery

Complications of Dentoalveolar Surgery

AGD Annual Meeting

Caesars Palace, Las Vegas
July 13-16, 2017

DCG Implant Symposia (CLCR 8014 Implant Dentistry Course)

Implant Informed Consent

Implant Risk Assessment and Management

Educational Commons

July 19, 2017

Brighter Way Dental Institute

Live Surgery Course Teaching Faculty

Phoenix, Arizona

August 2-5, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

August 16-20, 2017

August 21-September 5, 2017 Hands on Clinical Portion

Factors Critical For Managing Dental Office Medical Emergencies

Indications and Pharmacology of Emergency Medications

South Carolina Central District Dental Society meeting

Columbia, South Carolina

September 8, 2017

Overview of Preprosthetic Surgery

Pros 5001

AU DCG Simulation Lab

September 25, 2017

Intravenous Conscious Sedation Course

Lectures as noted in previous courses

Augusta University Dental College of Georgia

Augusta, GA

October 11-15, 2017 Classroom

October 16-November 30, 2017 Hands on Clinical Portion

Fundamentals in History Taking and Patient Assessment

SNDA Group Presentation
AU Educational Commons
October 24, 2017

Principles of Preprosthetic Surgery

Affordable Dentures and Implants
Airport Marriott Hotel
Atlanta, Georgia
November 3, 2017

Brighter Way Dental Institute

Live Surgery Course Teaching Faculty
Phoenix, Arizona
December 6-9, 2017

Principles Complex Exodontia Part I

Medicolegal Considerations
Advanced Oral and Maxillofacial Surgery
OMFS 5003
AU Educational Commons 1110
January 9, 2018

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
January 10-14, 2018 Classroom sessions
January 15-March 2, 2018

Principles of Complex Exodontia Part II

Principles of Tissue Re-approximation and Suturing
Advanced Oral and Maxillofacial Surgery
OMFS 5003
AU Educational Commons 1110
January 16, 2018

Microbiological and Anatomic Considerations of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series
AU Educational Commons 1110
January 23, 2018

Principles in the Diagnosis and Clinical Management of Odontogenic Infection

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

January 30, 2018

Oral Biopsy Principles and Techniques

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 6, 2018

Management of Odontogenic Cysts and Tumors

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 13, 2018

Complications of Dentoalveolar Surgery

TXPL 5002 Course

AU Educational Commons 1120

February 19, 2018

Anatomic and Clinical Consideration of the Maxillary Sinus

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

February 20, 2018

Salivary Gland Disorders

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 6, 2018

Overview of Dentoalveolar and Soft Tissue Trauma

Advanced Oral and Maxillofacial Surgery

OMFS 5003 Lecture Series

AU Educational Commons 1110

March 13, 2018

Intravenous Conscious Sedation Course

Lectures as noted in previous courses
Augusta University Dental College of Georgia
Augusta, GA
March 14-18, 2018 Classroom Sessions
March 19-May 4, 2018

Management of Facial Bone Fractures

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
March 20, 2018

Correction of Dentoskeletal Deformities

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
March 27, 2018

Overview of Temporomandibular Disorders

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 10, 2018

Overview of Cleft Lip and Palate

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 18, 2018

Principles of Maxillofacial Reconstruction

Advanced Oral and Maxillofacial Surgery
OMFS 5003 Lecture Series
AU Educational Commons 1110
April 25, 2018

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and

Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

May 16-20, 2018 Classroom Sessions

May 21-June 22, 2018 hands on Clinical

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and

Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

Aug 14-18, 2018 Classroom Sessions

Aug 19-Sept 27, 2018 hands on Clinical

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and

Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

Oct 16-20, 2018 Classroom Sessions

Oct 21-NOV 22, 2018 hands on Clinical

OMFS 5003 Advanced Oral Surgery Lecture Series

Patient Assessment

AU Education Commons1120

January 8, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Complex Exodontia Pt 1

AU Education Commons1120

January 15. 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Complex Exodontia Pt 2

AU Education Commons1120

January 22. 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Odontogenic Infection Pt 1

AU Education Commons1120

January 29. 2019

Implant Pathways Symposium

Complex Exodontia, Mucoperiosteal Flap Management, and Alveoloplasty for
Implant Placement

Patient Assessment

Factors critical to managing Office Emergencies

Review of the Indication and Pharmacology of Basic Emergency Drugs

Management of Frequently Occurring Office Medical Emergencies

Phoenix Downtown Renaissance Hotel

Phoenix, Arizona

Jan 31-Feb 3, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Odontogenic Infection Pt 2

AU Education Commons1120

February 5, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Maxillary Sinus Overview

AU Education Commons1120

February 19, 2019 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Biopsy Principles and Indications

AU Education Commons 1120

March 12, 2019. 2019

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and

Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious Patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls
Augusta University Dental College of Georgia
Augusta, GA
Mar 13-17, 2019 Classroom Sessions
Mar 18-April 26, 2019 Hands on Clinical

OMFS 5003 Advanced Oral Surgery Lecture Series

Correction of Dentoskeletal Deformities
AU Education Commons1120
March 28, 2019

OMFS 5003 Advanced Oral Surgery Lecture Series

Cleft Lip and Palate
AU Education Commons1120
April 18, 2019 2019

Intravenous Conscious Sedation Course

Lectures for Updated Course Curriculum:
Philosophy and Rationale for Intravenous Sedation
Requirements for IV Sedation
Routes of Administration
IV Sedation Patient Monitoring
ADA Guidelines for the Use of IV Sedation
Pharmacology of Benzodiazepines, and Reversal Agents
Pharmacology Local Anesthesia
IV Sedation Patient Assessment
Basic Airway Management and Resuscitation part I and II
IV Conscious Sedation Documentation and Review of the Sedation
Armamentarium
Overview of Venipuncture Anatomy and Technique
Pharmacology of Adjunctive Anesthetic Agents
The Role of Nitrous Oxide in Conscious Sedation
Misconceptions in the Management of Office Emergencies
Review of Basic Emergency Medications, Pharmacology and Indications
Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III
Factors Critical to Managing Office Medical Emergencies
Office Emergency prevention, Recognition, and the Basic Action Plan
Management of Commonly Occurring Dental Office Medical Emergencies and
Adverse Events Part I, and II
Patient recovery and Discharge Management of Commonly Occurring Emergencies
Dental Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

May15-19, 2019 Classroom Sessions

May 20-Jun 21, 2019 Hands on Clinical

Emergency Preparedness Lecture Series

Patient Assessment

Prevention, Recognition, Management and the Basic Action Plan

Factors Critical for management of Dental Office Emergencies

Airway Management and Resuscitation

Review of Emergency Medications

DCG Emergency Protocols

DCG

July 10, 2019

CLCR 8014 Implant Dentistry Course

Sinus Augmentation Techniques

Implant Informed Consent and Risk management

AU DCG

July 15,2019

Kiawah Island CE

Patient Assessment

Prevention, Recognition, Management and the Basic Action Plan

Review of Emergency Drugs for the Dental Practitioner

Management of Frequently Occurring Dental Office Emergencies

Complex Exodontia, Mucogingival Flaps and Alveoloplasty

Kiawah Island, SC

July 18-19,2019

Department of Periodontology Lecture Series

Review of Emergency Drugs and the Emergency Crash Cart

Hands on Demonstration

DCG Department of Periodontology

August 2, 2019

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, and III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and Adverse Events Part I, and II

Patient recovery and Discharge Management of Commonly Occurring Dental

Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia
Augusta, GA
August 14-18, 2019

Grad Pros Lecture Series

Interactive review of 13 Common Office Emergency Scenarios
Review of the Pathophysiology of the 13 Common Office Emergencies
Grad Pros Department
September 23, 2019

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation
Requirements for IV Sedation
Routes of Administration
IV Sedation Patient Monitoring
ADA Guidelines for the Use of IV Sedation
Pharmacology of Benzodiazepines, and Reversal Agents
Pharmacology Local Anesthesia
IV Sedation Patient Assessment
Basic Airway Management and Resuscitation part I and II
IV Conscious Sedation Documentation and Review of the Sedation
Armamentarium
Overview of Venipuncture Anatomy and Technique
Pharmacology of Adjunctive Anesthetic Agents
The Role of Nitrous Oxide in Conscious Sedation
Misconceptions in the Management of Office Emergencies
Review of Basic Emergency Medications, Pharmacology and Indications
Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II, III
Factors Critical to Managing Office Medical Emergencies
Office Emergency prevention, Recognition, and the Basic Action Plan
Management of Commonly Occurring Dental Office Medical Emergencies and Adverse Events Part I, and II
Patient Recovery and Discharge
Dental Sedation and Special Patient Populations: Sedation and the Geriatric Patient
Sedation of the Obese Patient
From Pre-sedation Evaluation to Patient Discharge: Putting It All Together
Common Dosing Calculations
Management of the Anxious patient. The role of oral pre-medication in conscious sedation in dentistry
Preparation for the Office Anesthesia Evaluation Pt I
Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II
Review of Prevention, Recognition, and Implementation of the Basic Action Plan
Review of sedation principles and pearls
Augusta University Dental College of Georgia
Augusta, GA
October 9-13, 2019

Grad Pros Lecture Series

Factors Critical for Managing Dental Office Emergencies
Prevention, Recognition, and Implementation of the Basic Action Plan
Grad Pros Department
October 14, 2019

Otolaryngology Lecture Series

Anatomic Basis for Local Anesthesia of the Fifth Cranial Nerve
AU Department of Otolaryngology
October 28, 2019

Last Chance CE

Oral Surgery for the General Practitioner
Complicated Exodontia, Flaps, Alveoloplasty and complications
Factors critical to managing office emergencies
Prevention recognition and management of office emergencies
Augusta University Dental College of Georgia
Augusta, GA
December 6, 2019

DCG Faculty Retreat

Cardiovascular Health Issues, Dental Management and Emergency Protocols
Augusta University Dental College of Georgia
Augusta, GA
December 18, 2019

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation
Requirements for IV Sedation
Routes of Administration
IV Sedation Patient Monitoring
ADA Guidelines for the Use of IV Sedation
Pharmacology of Benzodiazepines, and Reversal Agents
Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation
Armamentarium

Overview of Venipuncture Anatomy and Technique

Pharmacology of Adjunctive Anesthetic Agents

The Role of Nitrous Oxide in Conscious Sedation

Misconceptions in the Management of Office Emergencies

Review of Basic Emergency Medications, Pharmacology and Indications

Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II,III

Factors Critical to Managing Office Medical Emergencies

Office Emergency prevention, Recognition, and the Basic Action Plan

Management of Commonly Occurring Dental Office Medical Emergencies and
Adverse Events Part I, and II

Patient Recovery and Discharge

Dental Sedation and Special Patient Populations: Sedation and the Geriatric Patient

Sedation of the Obese Patient

From Pre-sedation Evaluation to Patient Discharge: Putting It All Together

Common Dosing Calculations

Management of the Anxious patient. The role of oral pre-medication in conscious
sedation in dentistry

Preparation for the Office Anesthesia Evaluation Pt I

Managing Emergencies: 9 Key Elements of Office Emergency Management

Preparation for the Office Anesthesia Evaluation PT II

Review of Prevention, Recognition, and Implementation of the Basic Action Plan

Review of sedation principles and pearls

Augusta University Dental College of Georgia

Augusta, GA

January 15-19, 2020

Intravenous Conscious Sedation Course

Philosophy and Rationale for Intravenous Sedation

Requirements for IV Sedation

Routes of Administration

IV Sedation Patient Monitoring

ADA Guidelines for the Use of IV Sedation

Pharmacology of Benzodiazepines, and Reversal Agents

Pharmacology Local Anesthesia

IV Sedation Patient Assessment

Basic Airway Management and Resuscitation part I and II

IV Conscious Sedation Documentation and Review of the Sedation

Armamentarium
Overview of Venipuncture Anatomy and Technique
Pharmacology of Adjunctive Anesthetic Agents
The Role of Nitrous Oxide in Conscious Sedation
Misconceptions in the Management of Office Emergencies
Review of Basic Emergency Medications, Pharmacology and Indications
Anesthetic Management of Common Systemic Illnesses/Conditions Part I, II,III
Factors Critical to Managing Office Medical Emergencies
Office Emergency prevention, Recognition, and the Basic Action Plan
Management of Commonly Occurring Dental Office Medical Emergencies and
Adverse Events Part I, and II
Patient Recovery and Discharge
Dental Sedation and Special Patient Populations: Sedation and the Geriatric Patient
Sedation of the Obese Patient
From Pre-sedation Evaluation to Patient Discharge: Putting It All Together
Common Dosing Calculations
Management of the Anxious patient. The role of oral pre-medication in conscious
sedation in dentistry
Preparation for the Office Anesthesia Evaluation Pt I
Managing Emergencies: 9 Key Elements of Office Emergency Management
Preparation for the Office Anesthesia Evaluation PT II
Review of Prevention, Recognition, and Implementation of the Basic Action Plan
Review of sedation principles and pearls
Augusta University Dental College of Georgia
Augusta, GA
March 13-17, 2019

WEBINARS

Affordable Care Affiliated Dentists

Webinar on Oral Surgery for the General Dentist Part I
April 30, 2015

Affordable Care Affiliated Dentists
Webinar on Oral Surgery for the General Dentist Part II
May 7, 2015



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

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Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Assisting on the Sedated Patient
Course Sponsor: Dentinomics
Location: Utah
Name of person submitting information: Kevin Croft DDS
Email address: dentinomics@gmail.com Phone: 8014775337
Title: President Date: 4/8/2022

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? ☒ Yes ☐ No

2. Number of hours of instruction: 8

3. Is this course sponsor AGD PACE or ADA CERP approved? ☒ Yes ☐ No

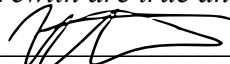
ACD PACE Provider Number: 365390

ADA CERP Provider Number: _____

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature:  Date: 4/8/2022

Printed Name: Kevin Croft DDS

Dentinomics

Outline of Didactic Coursework

Intro to Mod. Sedation & Dent. Phlebotomy

Quiz

Components of a Patient Workup 1 of 2

Components of the Patient Workup 2 of 2

Quiz

Blood Pressure Cuff Basics and other Monitoring Training

Quiz

Airway, Airway, Airway 1 of 2

Nasal Cavity

Pharynx

Larynx

Quiz

Airway, Airway, Airway 2 of 2

Pulmonary and Systemic Circulation

Quiz

Route of Administration

Quiz

The Sedation Spectrum

Quiz

Treatment Planning Sedation

Quiz

Intro to Pharmacology

Pharmacology of Local Anesthesia

Quiz

Basic Pharmacology

Quiz

Basic Pharmacology

Quiz

Sedative Pharmacology 1

Quiz

Sedative Pharmacology 2

Quiz

Anesthetic Technique: Workup, Equipment, Monitoring & Charting

Perioperative Monitoring and Considerations 1

Perioperative Monitoring and Considerations 2

Perioperative Monitoring and Considerations 3

Perioperative Monitoring and Considerations 4

Perioperative Monitoring and Considerations 4 of 4a

Quiz

Airway MANAGEMENT techniques 1

Precordial Stethoscope

Airway MANAGEMENT techniques 2

Capnography

IV access and admin 1

IV Catheterization

IV access and admin 2

IV Push and Flush

Post-Op Management, Transfer to Support Staff, Discharge Criteria

IV access and admin

Quiz

Charting & Monitoring 1

Quiz

Charting & Monitoring 2

Quiz

General Management Principals of Complications 1

General Management Principals of Complications 2

Quiz

O2 Dissociation Curve

General Management Principals of Complications

PPV

Quiz

Complications-Airway 1

Complications-Airway 2

Quiz

Review and Conclusions

Review Session 1

Resources

[ADA Guidelines for Sedation Dentists.pdf](#)

[Recovery_form_generic.jpg](#)

[ADA-AAPDSample-Sedation-Record-GenericMASTER_V2.pdf](#)

[sedation_charting_sample.1.pdf](#)

[sedation_charting_sample.2.pdf](#)

CURRICULUM VITAE

November 2018

Name Kevin Croft, D.D.S.

President
DDSleep: Ambulatory Anesthesia Services

Positions Dean
Institute for the Management of Pain and Anxiety

Director at Large
American Society of Dentist Anesthesiologists

President
Dentinomics: Cutting-Edge CE for Cutting-Edge Dental Professionals

Founder & Executive Director Caring International Nonprofit

Faculty
University of Nevada Las Vegas School of Dental Medicine

Address P.O. Box 522354
Salt Lake City, Utah, 84152

Phone 801-477-5337 (o)
801-970-4371 (c)
dr.croft.dds@gmail.com

Education

2013 **American Dental Board of Anesthesiology-Diplomate**

2012 **Advanced Education in Dental Anesthesiology**, State University of New York-Stony Brook University Medical Center. Accredited by the Commission on Dental Accreditation.

2010 **DDS (Doctor of Dental Surgery)**, State University of New York-Stony Brook School of Dental Medicine. Top 10 in graduating class.

2006 **BS Psychology**, University of Utah. **Magna Cum Laude**, 3.8/4.0 GPA
Diploma-Highland High School, top 8% of graduating class

EMPLOYMENT HISTORY

2017 – present	Dean, Institute for the Management of Pain and Anxiety
2017 – present	Executive director, Caring International Nonprofit: Providing dental grants for populations in need. (www.caringinternational.com)
2017 – present	Faculty, University of Nevada Las Vegas School of Dental Medicine
2017 – present	Adjunct faculty, Weber State University Department of Dental Hygiene
2015 – present	President, Dentinomics: Cutting-edge continuing education for dentists, physicians and other healthcare professionals.
2015 - 2017	Director of Anesthesiology, International Post-Graduate Medical College, Montego Bay, Jamaica
2014 – 2017	Clinical Assistant Professor, University of Utah School of Dentistry
2012 – present	President, DDSleep: Pain and anxiety management services for patients across the spectrum of medical complexity, with emphasis on outpatient general anesthesia and sedation.
2005-2006	Course Instructor, Dental Admissions Test Prep, Kaplan Inc.

Licensure

2018-present	State of Massachusetts dental license & general anesthesia permit (pending)
2018-present	State of New Hampshire dental license & general anesthesia permit (pending)
2018-present	State of Mississippi dental license & general anesthesia permit
2017-present	State of Colorado dental license & general anesthesia permit
2017-present	State of South Dakota dental license & general anesthesia permit
2017-present	State of Nevada dental license & general anesthesia permit
2017-present	State of Virginia dental license & general anesthesia permit
2016-present	State of Alaska dental license & general anesthesia permit
2012-present	State of Utah dental license & general anesthesia permit

Professional Associations

2017-present	Pierre Fauchard Academy
2010-present	American Society of Dental Anesthesiology
2016-present	Society for Head and Neck Anesthesia
2014-2016	Society for Ambulatory Anesthesia member
2012-present	Utah Dental Association, Salt Lake District board member
2008-present	International Association of Student Clinicians member
2008-2010	International Association for Dental Research member
2008-2010	American Association for Dental Research member
2008-2010	International Assoc. for Dental Research Dental Anes. Group member
2008-2010	International Assoc. for Dental Research Network for Practice-based Research member
2008-2010	International Association for Dental Research Pharmacology, Therapeutics, & Toxicology Group member
2006-present	American Dental Association member
2006-2010	American Student Dental Association member

AWARDS & HONORS

2017	Inductee-Pierre Fauchard Academy
2010	Pioneer in Dentistry Award, Significantly advancing curriculum, academic standards and opportunities at the SUNY-SB School of Dental Medicine (emphasis in pain and anxiety management)
2008	International Association of Student Researchers inductee
2008	ADA Student Clinician Award for excellence in research
2008-2010	Team Leader for the research project Monitoring Alveolar Bone Loss Through Digital Subtraction, SUNY-Stony Brook SDM of Dental Medicine
2008	Evidence Based Dentistry and Critical Thinking I team leader

2008	Greater NY Academy of Prosthodontics 54 th Scientific Meeting invitee
2008	Pain Control II SUNY-SB class representative
2007	Practice Management SUNY-SB class representative
2007	Medical Emergencies I SUNY-SB class representative
2007	Pain Control I SUNY-SB class representative
2006	D. Brent Scott Presidential Endowed Academic Scholarship
2003-2006	Honors at Entrance Scholarship, an academic full-ride scholarship awarded to the top 5% of students admitted to the University of Utah
2006	Dean's List University of Utah
2006	National Dean's List List University of Utah
2005	University of Utah Dean's List University of Utah
2005	National Dean's List List University of Utah
2004	University of Utah Dean's List University of Utah
2004	National Dean's List List University of Utah
2003	University of Utah Dean's List University of Utah
2003	National Dean's List List University of Utah
1998-2000	Student Judiciary Council member
2000	Varsity soccer, Highland High School captain
2000	Student Government Council, Highland High School member
2000	Varsity Cheerleader, Highland High School
2000	Madrigals acapella group Highland High School pitch leader
1999	Outstanding Jr. Humanities Student Award
1999	Member, madrigals acapella group, Highland High school
1996	Eagle Scout
1995	Academic Excellence Award, top 1% of class GPA

1994

Valedictorian, Rosslyn Heights Elementary School

RESEARCH AND SCHOLARLY PRODUCTIVITY

Major Research Interests

Management of Pain and Anxiety

- Novel approaches to management of pain and anxiety including the team approach, treatment planning, informed consent, bedside manner, and surgical technique
- Analytics of safety, costs, profitability, availability of trained providers, current training standards and access to care as relates to the full range of pain and anxiety management modalities
- Investigation of novel uses of existing and new approaches, modalities and medications for pain and anxiety management.
- Evaluating outcomes-based patient care modalities for special-needs and non traditional dental populations.

The practice of Modern Dentistry

- Evaluating and modernizing approaches in dental education to better address and meet the current and projected needs of dental professionals and their patients.
- Utilizing an evidence-based approach to formulate and establish new modalities of interfacing with healthcare providers of other disciplines.
- Analyzing how current trends in the profession of dentistry affect past, present, and future dental professionals.

Grant Support

Pending Grants:

2018 **Multi-Institutional Analysis of various faculty/student ratios in training institutions and their effect on safety outcomes; PI: Kevin Croft; Co-I: Daniel Orr II, D. L Orr II Research fund; \$20,000 (Direct, Preliminary approval 2018)**

Proposed Research Projects & Associated Grants:

2018 **Ropivacaine: A comparison of the pure S-Enantimer of Bupivacaine as a local-anesthetic in dental and oro-facial procedures; PI: Kevin Croft; Co-I: Daniel Orr II, D. L Orr II Research**

fund; (Direct, Proposed)

- 2018 **Post-Operative Effects of Short-Duration Anesthetics on the Cognitive State of Autistic Patients;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Double-Blinded Clinical Trial: Remimidazolam: Evaluation of the fast-acting GABA agonist benzodiazepine (currently in phase II clinical trials) as a component of sedative techniques in outpatient surgeries;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **Utilizing the Fast-acting Mu Receptor Agonist Remifentanil for Deliberate Hypotension in Orthognathic Surgeries;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Comparison of Quality of Care as Provided in Educational Institutions, Corporate Dental Offices, and Single-Practitioner Dental Offices;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **Traditional Search Engine Optimization (SEO): An analysis of the cost-effectiveness of such an approach.** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **The value of the Modern Dental Degree: Evaluating the intentions and perceptions of dental students regarding the use of their dental degrees.** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **An Analysis of Cost-Effectiveness of Various Treatment Modalities in Dentistry;** PI: Kevin Croft (p.p.); (Proposed)
- 2018 **A Double-Blinded Clinical Trial: Fast-Acting Calcium-Channel Blockers for Deliberate Hypotension in Orthognathic Surgery;** PI: Kevin Croft (p.p.), (In preparation)
- 2018 **A Double-Blinded Clinical trial: Utilizing Alpha-2 Agonists for Deliberate Hypotension in Orthognathic Surgeries.** PI: Kevin Croft (p.p.), Co-I Daniel Orr (UNLV). (In preparation)

Professional Presentations

Speaker Invitations (all offered for Continuing Education Credit)

Keynote Speaker, Montana Fly Fishing Study Club, Host: Dr. John Mccullah, July, **2020**

Program Speaker, Academy of General Dentistry Annual Scientific Meeting, Connecticut
Host: Dale Gibbons. July, **2019**.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Chicago. Host: J. Tom, President. April, **2019**.

Program Speaker, North Star Optometry Seminars, Salt Lake City, Utah. Host: Brian
Vincent, OD, President. February, **2019**.

Keynote Speaker, Montana Fly Fishing Study Club, Host: Dr. John Mccullah, July 12-13,
2018.

Program Speaker, Academy of General Dentistry Annual Scientific Meeting, New Orleans.
Host: Dale Gibbons. June 6-8, **2018**.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Las Vegas. Host: Amy Brown, Executive Director. May 4, **2018**.

Program Speaker, Smiles at Sea, Cozumel, Mexico, Host: Elijah Desmond RDH. March 14-
19, **2018**.

Keynote Speaker, Alaska Dental Society, Host: David Logan DDS, February 21, **2018**

Program Speaker, Smiles at Sea, Cancun, Mexico, Host: Elijah Desmond RDH. July 7-9,
2017.

Program Speaker, American Society of Dental Anesthesiology Annual Scientific Meeting,
Fort Lauderdale. Host: Amy Brown, Executive Director. May 6, **2017**.

Keynote Speaker, Virginia Academy of General Dentistry Scientific Meeting. Host: Karen
Huddleston, Executive Director. April 29-30, **2017**.

Keynote Speaker, Utah Dental Association Annual Scientific Meeting. Host: Dr. Jerald
Boseman. April 28, **2017**.

Keynote Speaker, Oregon Health Sciences University School of Dentistry, Host: Alexandria
Dewey, Executive Director. April 22, **2017**.

Keynote Speaker, Utah Dental Hygiene Association Spring Scientific Meeting, Host: Natalie
Nelson RDH, March 4, **2017**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Jason

Haws, October 27-29, **2016**.

Invited Speaker, Temple School of Dentistry-New Paradigms in Pain and Anxiety Management. Host: Dr. Mehran Hossaini. May 2, **2016**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Jared Staples. June 13-15, **2016**.

Keynote Speaker, First Choice Dental Lab Continuing Education Summit Host: Mr. Matt Cushing & The First-Choice Dental Laboratory. May 7, **2016**.

Keynote Speaker: Academy of General Dentistry, Utah Chapter, Annual Meeting. Host: Dr. Scott Stucki. April 22, **2016**.

Inaugural and Keynote Speaker: Inter-Professional Education Seminar at Roseman University Dental School, Host: Dr. Andrew Drollinger. April 20, **2016**.

Keynote Speaker: Brigerland Study Group. Host: Dr. Fryer, April 11, **2016**.

Course Director, Moderate Dental Sedation Clinical Seminar and Series. Host: Dr. Tyler Utley April 7-9, **2016**.

Keynote Speaker, 2015 Minot Dental Lab Continuing Education Summit Host: Mr. John Aitchison & The Minot Dental Laboratory. November 4, **2015**.

Advisor, Roseman University School of Dentistry Ad-Hoc Committee on Special Needs Dentistry, Host: Dr. Andrew Drollinger. July 23, **2015**.

Guest Lecture Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. December 9, **2015**.

Distinguished Lecture Series, Department of Oromaxillofacial Surgery, University of Nevada Las Vegas School of Dental Medicine. Host: Dr. Daniel Or, November 21, **2015**.

International Lecture Series, Suqian Medical Hospital, Host: Dr. Karl Koerner. September 18, **2015**.

Keynote Speaker, Post-Graduate Medical College, Montego Bay, Jamaica Host: Dr. Christopher Ogunsalu June 6, **2015**.

Guest Lecturer Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. April 29, **2015**.

Guest Lecturer Series, General Practice Dentistry University of Utah. Host: Dr. Craig Proctor. September 23, **2014**.

Keynote Speaker, Quarterly Wasatch Dental Hygiene Forum, Host: Dr. Reve Chaston, May 8, **2014**.

Guest Lecturer, University Of Utah School of Dentistry. Host: Dean Rena D'Souza. November 20, **2013**

Guest Lecturer, Brigham Young University Pre-Dental Association. Host: Dr. Daniel Orr. September 23, **2013**

Guest Lecturer, Utah Valley University Pre-Dental Association. Host: Dr. Daniel Orr. September 23, **2013**

Guest Lecturer, Weber State Pre-Dental Association. Host: Dr. Daniel Orr. September 24, **2013**.

Guest Lecturer, University of Utah Pre-Dental Association. Host: Dr. Daniel Orr. September 24, **2013**.

International Lecturer Series, Guilin Medical Hospital, Guilin, China Host: Dr. Karl Koerner. September 23, **2013**.

Keynote speaker, Great Basin Academy Quarterly Symposium. Host: Dr. Norm Rounds. September 13, **2013**.

Keynote speaker, St. George Treatment Planning Conference. Host: Dr. Jared Staples. May 3, **2013**.

Keynote speaker, Ogden Dental Seminar. Host: Dr. Host: Dr. Edwin Hurst. April 27, **2013**.

Keynote speaker, Ogden Academy Quarterly Symposium. Host: Dr. Mark Crowden. March 21, **2013**.

Keynote speaker, Advanced Clinical Education Seminars Symposium. Host: Dr. Steve Larsen. February 26, **2013**.

Invited speaker, The Childrens' Center: A Social Skills Training Group for Disabled Children, Host: Ms. Lori Krasney. January 18, **2013**.

Keynote speaker, Multidisciplinary Treatment Planning Group Quarterly Symposium. Host: Dr. Larisse Skene. August 8, **2012**.

Keynote speaker, Dissident Study Group Monthly Meeting. Host: Dr. Mike Haynie. April 26, **2012**.

Keynote speaker, Ogden Academy Quarterly Symposium. Host: Dr. Mark Crowden. January 27, **2012**.

Keynote speaker, Davis Study Group Monthly Meeting. Host: Dr. David McMillan. January 10, **2012**.

Presenter, New York Society of Anesthesiology, "General Anesthesia for ASA III and IV

Patients” Presentation. March **2011**.

Presenter, 149th International Association of Student Clinicians-American Dental Association, Monitoring Alveolar Bone Loss Through Digital Subtraction. San Antonio, TX October 17-19, **2008**.

Presenter, American Dental Association Student Research Conference, Gaithersburg, MD. March 20-22, **2008**.

COMMITTEE AND ADMINISTRATIVE SERVICE

Local, National, and International Service

2017 - present	Ongoing philanthropic efforts via Caring International Nonprofit
2017 – present	Welfare Coordinator, LDS Church, Parley's 4 th Ward
2016 – present	Site Visitor, Commission on Dental Accreditation (CODA) Advanced General Dentistry
2015	Give Kids A Smile, Salt Lake District Dental Society
2015	Dental Humanitarian Expedition, Suqian China
2015	Give Kids A Smile, Salt Lake District Dental Society
2014-2017	Sedation Committee University of Utah Medical Center, committee member
2014	Give Kids A Smile, Salt Lake District Dental Society
2013-Present	Delegate Utah Dental Association House of Delegates
2013-Present	Salt Lake District Board Member, Utah Dental Association
2013	Dental Humanitarian Expedition, Guilin China
2013	Give Kids A Smile, Salt Lake District Dental Society
2012-Present	Boy Scouts of America Troop 600 pack leader
2012	Free Dental Day, Smith & McDonald Dental
2010-2012	Elders Quorum Terryville LDS Church president
2010-2012	Anesthesia Progress Scientific Journal ad-hoc reviewer

2006-2012	Multiple Give Kids a Smile Suffolk County District Society
2008-2010	Terryville LDS Church clerk
2006-2012	Multiple Suffolk County Elementary School Dental Education Seminars
2006-2010	Mental Health Advisory Board Stony Brook Health Science Center
2006-2010	NYS Dental Assisting Program, SUNY-SB instructor
2006-2008	Terryville LDS Church executive secretary
2006	American Student Dental Association class representative
2005	Utah Down Syndrome Foundation volunteer
2000-2002	Official Governmental Translator, English Teacher, Missionary, District Leader, Zone Leader, Area Supervisor, for the Church of Jesus Christ of Latter-Day Saints in Albania

TEACHING & CURRICULUM DEVELOPMENT

2017-present	Dean, Institute for the Management of Pain and Anxiety. Overseeing development of national curriculum in pain/anxiety. Geared towards dental professionals at all levels of education, training and experience.
2016-present	Course Director, New Paradigms in Dental Sedation Training. Post-Graduate Continuing Dental Education taught at multiple CODA-Accredited dental, dental hygiene institutions.
2013-2017	Course Director, Dental Anesthesiology I, Pre-Doctoral Dental Curriculum University of Utah
2013-2017	Course Director, Dental Anesthesiology II, Pre-Doctoral Dental Curriculum University of Utah
2013-2017	Course Lecturer, Human Diseases and Therapeutics, Pre-Doctoral Dental Curriculum University of Utah

CONTINUING EDUCATION (Selected Courses/Lectures)

Academy of General Dentistry Annual Scientific Session, 16 hours of AGD-PACE; June **2018**.

American Society of Dentist Anesthesiologists Annual Scientific Session, 16 hours of ADA-CERP Credit; May **2018**.

American Society of Dentist Anesthesiologists Annual Scientific Session, 16 hours of ADA-CERP Credit; May **2017**.

American Society of Dentist Anesthesiologists Annual Scientific Session, May **2016**.

"Making Sense of Soft and Hard Tissue Grafting" Patrick Brain DDS, University of Utah School of Dentistry, 2 hours of AGD-PACE Credit, October 22, **2015**.

"New Paradigms in Anesthesia Education Technology, Office Based, Non-traditional Methodologies", Larry Chu, MD, MS, American Society of Dentist Anesthesiologists Annual Scientific Session; 2 hours of ADA-CERP Credit; May 1, **2014**.

"Teaching, Training, and Maintaining: Best Practices for Dental Anesthesia Education", Carilynne Yarascavatch, DDS, PhD, American Society of Dentist Anesthesiologists Annual Scientific Session; 2 hours of ADA-CERP Credit; May 1, **2014**.

"Anesthesia Risk Management", Mr. Ted Tpasineau, American Society of Dentist Anesthesiologists Annual Scientific Session, 3 hours of ADA-CERP Credit; May 1, **2014**.

"Understanding and Managing Risk in Office-Based Anesthesia" Dean Schweitzer, DDS, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Newly Approved Agents for Multimodal Analgesia” Mana Saraghi, DMD, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Oral Surgery and Anesthesia Needs for Orthognathic Surgery” Dan Spagnoli, MD, 2 hours of ADA-CERP Credit; May 2, **2014**.

“Outcomes in Office-Based Anesthesia” Michael Walsh, MD, 2 hours of ADA-CERP Credit; May 2, **2014**.

Curriculum Vision, Design and Implementation, Carol Anne Murdoch-Kinch DDS PhD, University of Utah School of Dentistry, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Columbia University College of Dental Medicine Curriculum: Past, Present and Future”, Ronnie Myers DDS, University of Utah School of Dentistry, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Developing an Integrative Curriculum for a New School of Dentistry”, Frank Licari DMD MPH MBA, 2 hours of ADA-CERP Credit, November 2, **2013**.

“Introduction to Evidence-Based Dentistry”, Richard Niederman DMD, 3 hours of ADA-CERP Credit, November 1, **2013**.

“Steps to Developing a Practice-Based Research Network”, Tomothy DeRouen, 3 hours of ADA-CERP Credit, November 1, **2013**.

“The History of Dental Anesthesiology and ASDA, ADBA, and ADSA” Joel Weaver, DDS, PhD, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Review of ASDA Parameters of Care”, Steven Ganzberg, DDS, MS, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Review of HIV” Mana Saraghi, DMD, 2 hours of ADA-CERP Credit; September 22, **2014**.

“Perioperative Airway Management Planning” Anthony Caputo, DDS, 2 hours of ADA-CERP Credit; September 22, **2013**.

“Drug Alternatives Due to Shortages”, Joseph Giovannitti, DMD, 2 hours of ADA-CERP Credit; September 21, **2013**.

“ECG Review & Management of Arrhythmias” Steve Ganzberg, DMD, MS, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Current Antiemetic Strategies” Gino Gizzarelli, DDS, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Review of Analgesics and Postop Pain Strategies” Ken Reed, DMD, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Review of Enteral Sedation” *Michael Hoffmann, DDS*, 2 hours of ADA-CERP Credit; September 21, **2013**.

“Drugs for Diseases We Treat”, John Svirskey DDS, Utah Dental Association Annual Convention, 2 Hours of AGD-PACE Credit, February 29, **2013**.

“Pain Medications: Therapy and Abuse”, Glen Hanson DDS PhD, Utah Dental Association Annual Convention, 2 Hours of AGD-PACE Credit, February 29, **2013**.

“**10 ½ Things No Dental Speaker Ever Said**”, **Barry Packer DDS**, Utah Dental Association Annual Convention, 1 Hour of AGD-PACE Credit, February 29, **2013**.

“Medical Emergencies in the Dental Office”, Mel Hawkins DDS, Utah Dental Association Annual Convention, 3 Hours of AGD-PACE Credit, February 29, **2013**.

Continuous Quality Improvement Seminar Salt Lake Dental Society, 2 hours of Utah-DOPL Credit, November 15, **2012**.

“Interdisciplinary Treatment Modalities”, Steve Luddington DDS, Davis Study Group, November 1, **2012**.

“Twelve Habits of a Successful Dental Practice”, Charles Simonsen DDS, Salt Lake Dental Society, 2 hours of Utah-DOPL Credit, September 20, **2012**.

“The Physiology of the Truly Painless Injection”, Steve Luddington DDS, Davis Study Group, September 11, **2012**.

“Practice Management”, Mr. Gary Takacs, Academy of LDS Dentists, 3 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Periodontics and Implants”, Samuel Low DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Fixed and Removable”, Terence Donovan DDS, Academy of LDS Dentists, 3 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Insurance and Coding”, Charles Blair DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

“Pharmacology”, Peter Jacobson, PhD DDS, Academy of LDS Dentists, 1 hours of Utah-DOPL approved Credit, August 22, **2012**.

BIBLIOGRAPHY

Published Articles & Peer-reviewed Publications

1. Croft K., Motanabbbeh, A. Atypical Presentations of Malignant Hyperthermia: A Case Report. In preparation.
2. Croft K., Remifentanyl for Deliberate Hypotension: A Case Report, In preparation.
3. Croft K., Orr D., Orthognathics, Orthodontics and Anesthesia: A Multidisciplinary Approach to Care. In Preparation
4. Croft K., Office-Based Management of a Post-Gunshot Trauma Patient with a Tracheostomy for Endodontic Therapy. In Preparation
5. Croft K., Making Sedation Accessible, Professional Insurance Exchange, Quarterly Newsletter; 2012 Fall; 3-5
6. Croft K., Probst S., "Deliberate Hypotensive Anesthesia With the Rapidly Acting, Vascular-Selective, L-Type Calcium Channel Antagonist—Clevipidine: A Case Report", Anesth Prog. 2014 Spring; 61(1): 18–20. PMCID: PMC3975609. numerous citations in professional publications
7. Croft, K., Louie T., Colosi D., "Management of Rapidly Progressing Periapical Pathologies: A Case Report.", N Y State Dent J. 2014 Jan;80(1):22-5. PMID: 24654365



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

Permit to Monitor Patients Under Anesthesia Course Review

Please submit this form with a course syllabus and instructor CV to contactus@sdboardofdentistry.com by April 15.

The Board will review courses annually and may only approve courses that have submitted documentation necessary to verify that the course requirements outlined in ARSD 20:43:09:10 have been met. If a completed form is not returned by the date above, your course cannot be approved.

Course Title: Monitoring Sedation/General Anesthesia Intravenous Insertions

Course Sponsor: Sedation Consult, LLC

Location: Varies; Primarily Minneapolis, Minnesota

Name of person submitting information: Allan Schwartz, DDS, CRNA

Email address: SedationConsult@outlook.com Phone: (573) 268-4899

Title: President Date: March 27, 2022

1. Does this course provide the instruction or training necessary for dental assistants to competently monitor patients under moderate sedation or deep sedation/general anesthesia? ☒ Yes ☐ No

2. Number of hours of instruction: 20

3. Is this course sponsor AGD PACE or ADA CERP approved? ☐ Yes ☐ No

ACD PACE Provider Number: ADA/CERP credit is available from our provider

ADA CERP Provider Number: Dynamic Dental Educators in Tampa, Florida

4. Has this course changed since the last time it was evaluated by the Board (annual evaluation)? ☐ Yes ☒ No

If yes, please summarize the changes below:

I certify that all the information contained in this form and in any attachments or additional documents submitted herewith are true and correct.

Signature: Allan Schwartz

Digitally signed by Allan Schwartz
Date: 2022.03.26 14:16:03 -05'00'

Date: March 26, 2022

Printed Name: Allan Schwartz, DDS, CRNA

Course Curriculum Monitoring Sedation/General Anesthesia Intravenous Insertions Course
March 26, 2022

- Review of Basic Sciences: anatomy, physiology, and pharmacology.
- Evaluation of patients with systemic diseases in preparation for anesthesia, recognizing the implications of systemic disease on the delivery of anesthesia.
- Review of patient records, medical history for essential data and screening medical histories [Day of Surgery patient assessment form].
- ASA Physical Status assessment, classification, and appropriate patient selection.
- Properly attach a monitor to a patient, and evaluate monitor values.
- Observe a patient as a form of monitoring.
- Assemble fluids, intravenous lines, intravenous catheters, and needed armamentaria to insert an intravenous catheter into a patient.
- Discuss sterile technique and prevention of infection.
- Discuss fluids and electrolytes.
- Perform insertion of a minimum of six intravenous catheters, with at least two into a patient.
- Discuss common anesthesia and resuscitation drugs.
- Properly equip and maintain a facility where anesthesia is delivered.
- Appropriate patient records: [health history assessment, anesthesia consent, source consent, and time-sensitive anesthesia record].
- Informed consent.
- Monitoring and assessment of the sedated patient during treatment and recovery.
- Appropriate documentation of the management and treatment of sedated patients.
- Time oriented anesthesia record.
- Appropriate discharge criteria.
- Auxiliary roles in response to most common emergencies incident to administration of anxiolysis, moderate sedation, deep sedation/analgesia, and general anesthesia.
- Patient positioning; venous thromboembolism prophylaxis.
- Successful completion of an examination measuring knowledge necessary for safe and effective anesthesia care of a sedated patient.

Curriculum Vitae and Personal Data
Confidential

Allan J. Schwartz
6202 Signature Ridge
Columbia, Missouri 65201
Cell Phone: (573) 268-4899
Birthdate: March 9, 1955
E-mail: ddscrna@hotmail.com; SedationConsult@outlook.com

Educational Background

- 1994 Graduated from the Washington University School of
Nurse Anesthesia with a certificate in Nurse Anesthesia.
- 1991 Bachelor of Science in Nursing
St. Louis University
St. Louis, Missouri Honors: Magna Cum Laude
- 1980 Doctor of Dental Surgery
Baylor College of Dentistry
Dallas, Texas
- 1977 Bachelor of Arts in Chemistry
Arizona State University
Tempe, Arizona Honors: Magna Cum Laude

Work Experience

- | | |
|----------------------------|--|
| July 2021 to Present | CRNA with Quincy Medical Group of Quincy, IL |
| March 2021 to July 2021 | CRNA with Sedation Consult, LLC of Columbia, MO |
| May 2019 to February 2021 | CRNA with Anesthesia Associates of Southern Illinois |
| August 2018 to May 2019 | CRNA with Columbia Endoscopy Center, Columbia, MO |
| April 2018 to Present | National lecturer DOCS Education of Seattle, Washington |
| June 2013 to Present | National lecturer, clinician, and consultant with Sedation Consult
of Columbia, Missouri |
| January 2015 to Present | Locum Tenens CRNA |
| September 2017 to Present | Christian Hospital, St. Louis, MO Locum Tenens CRNA |
| March 2017 to August 2017 | Blessing Hospital, Quincy, Illinois Locum Tenens CRNA |
| June 2016 to March 2017 | Christian Hospital, St. Louis, MO Locum Tenens CRNA |
| September 2015 to May 2016 | St. Anthony's Hospital, Effingham, IL Locum Tenens CRNA |
| July 2015 to August 2015 | Laser Spine Institute, St. Louis, MO Locum Tenens CRNA |
| March 2012 to July 2015 | Registered Nurse Anesthetist for Saint Louis University Hospital
Saint Louis, Missouri |
| August 2011 to June 2013 | National lecturer, clinician, and consultant with Conscious
Sedation Consulting of Saint Peters, Missouri |
| July 2009 to March 2012 | Registered Nurse Anesthetist for St. Elizabeth's Hospital
Belleville, Illinois and locum tenens dental anesthesia provider. |

September 2008 to July 2009	Locum tenens nurse anesthetist based in Columbia, Missouri and locum tenens dental anesthesia provider.
January 2005 to September 2008	Dentist anesthesia provider with ProDental Columbia, Missouri and Allan Schwartz, D.D.S.
January 2000 to December 2004	Locum tenens nurse anesthetist based in Columbia, Missouri
September 1994 to December 1999	Staff Nurse Anesthetist. The University of Missouri Hospital and Clinics Columbia, Missouri
May 1991 to August 1992	Surgical intensive care unit nurse. Veterans Administration Medical Center St. Louis, Missouri
July 1981 to August 1994	General practice of dentistry
June 1980 - July 1981	General Practice Residency in Dentistry The Jewish Hospital of St. Louis, Missouri

Professional Activities and Accomplishments

- Authored Airway Management of the Oral Surgery Patient, Oral and Maxillofacial Surgery Clinics of North America, May 2018.
- Authored article: Emergency Medications Every Dentist Should Know Part 2. DentalTown April 2017.
- Co-Authored Textbook Drug/Drug Interactions Chapter 8, Pure Opioid Antagonists. Published June 2016.
- Reviewer: Elsevier-Mosby's ASPAN: Certification Review for PeriAnesthesia Nursing, 4th edition.
- Editorial Consultant: Mosby's Dictionary of Medicine, Nursing, & Health Professions. 10th Edition. 2015.
- Authored article: Three Basic Emergency Medications You Should Know How to Use. DentalTown, August 2014.
- Authored article: The Anesthetic Implications of Post-Polio Syndrome. Journal of the American Association of Nurse Anesthetists. Published October 2012.
- Editorial Board Member and Consultant: Mosby's Dictionary of Medicine, Nursing, & Health Professions. 9th Edition. 2013.
- Authored Textbook Chapter 15, entitled Prophylaxis for Aspiration Pneumonitis: Pharmacology for Nurse Anesthesiology, Ouellette and Joyce, to be published in 2015.
- Authored Textbook Chapter 55, entitled Anesthesia for Office-Based Pediatric Dental Surgery: Case Studies in Nurse Anesthesia, Sass Elisha, 2011.
- Published as Contributing Consultant: Mosby's Dictionary of Medicine, Nursing, & Health Professions, Eighth Edition, 2009 and as an Editor for the as yet unpublished Ninth Edition.
- Authored Textbook Chapter 53, entitled Anesthesia for Therapeutic and Diagnostic Procedures for Textbook: Nurse Anesthesia, Fourth Edition, Nagelhout and Plaus. (Release Date February 2009)
- Consultant to the Missouri Dental Board Policy Review Committee for the rewriting of the dental anesthesia rules and regulations.
- Appointed to the American Dental Assoc. Continuing Education Online editorial board January 18, 2007.
- Appointed to the Parenteral Conscious Sedation Committee of the Missouri Dental Board October 28, 2006.
- Consultant to the American Dental Association Council on Dental Practice, September 2006-September 2008.
- Published article: Learning the Essentials of Epidural Anesthesia, January 2006 for the journal Nursing 2006.
- Appointed Journal Reviewer for the Journal of the American Association of Nurse Anesthetists, August 2005 ongoing.
- Published article: Drugs every dentist should know for Focus MDA for the Missouri Dental Association, July/August 2005.
- Published article: Insertion of an LMA Around a Palatal Torus for the Journal of the American Association of Nurse Anesthetists, June 2005.
- Published editorial entitled: Diagnosis and Treatment of Negative Pressure Pulmonary Edema in a Pediatric Patient in the February 2005 Journal of the American Association of Nurse Anesthetists.
- Authored Chapter 49, entitled Anesthesia for Therapeutic and Diagnostic Procedures for Textbook: Nurse Anesthesia, Third Edition, Nagelhout and Zaglanichny.
- Manuscript Reviewer for nursing journal: Nursing 2004, ongoing started October, 2004, 2005, 2006, 2007, 2008.
- Served as an Expert Witness in nurse anesthesia involving a wrongful death trial in Minnesota during July 14-16, 2004.
- Lectured for IPGE, Current Trends in Clinical Anesthesia: Oral Inspection, Intro. To Dentistry Parts 1 & 2, Oral Cancer Concepts for the CRNA, and Dislocation of the Mandible. February 8, 2004 in Puerto Vallarta, Mexico.

- Lectured at the 32nd Annual Refresher Course for Nurse Anesthetists, Frank Moya Continuing Education Programs, Introduction to Dentistry Parts 1 and 2, Dislocation of the Mandible, November 14, 2003 in Orlando, Florida.
- Published articles in the April and June, 2003 issues of the Journal of the American Association of Nurse Anesthetists entitled: Helen Lamb: Some insight into her life and times.
- Published opinion article, Oral Conscious Sedation, in ADA News, March 17, 2003.
- Published article in the December 2000 issue of the Journal of the American Association of Nurse Anesthetists entitled, "Dislocation of the Mandible"
- Published editorial in the August 2000 issue of the Journal of the American Association of Nurse Anesthetists entitled, "Dental guards: Helpful or hazards?"
- Elected Secretary to the Missouri Association of Nurse Anesthetists on October 20, 2001 to October 26, 2002.
- Presented paper entitled, "Dislocation of the Mandible" at the World Congress of Nurse Anesthetists convention in Chicago, Illinois on August 9, 2000. Awarded as one of the top six papers presented at international convention of certified registered nurse anesthetists.
- Elected to Sigma Theta Tau nursing honor society 1991.
- Chief Forensic Odontologist to the Medical examiner for the County of Maricopa, Phoenix, Arizona 1982-1988.

References Available upon request.

Application Review Policy: It is the policy of the Board to use the Application Review Policy as guidance when determining whether to issue a license, registration, or permit. “Complex” encompasses any application or document that includes the disclosure of or absence of information that warrants additional review.

Applications

- Dentist License Applications: Temporary - A completed application will be reviewed and may be approved by board office staff. License applications require a two staff review before approval of a temporary. A complex application will be reviewed and may be approved by a member of the Board.
- Dental Hygienist License Applications: Temporary - A completed application will be reviewed and may be approved by board office staff. License applications require a two staff review before approval of a temporary. A complex application will be reviewed and may be approved by a member of the Board.
- Dentist: License Applications – The Board may approve an application.
- Dental Hygienist: License Applications – The Board may approve an application.
- Radiographer Applications - A completed application will be reviewed and may be approved by the board office staff. A complex application will be reviewed and may be approved by a member of the Board.
- Registered Dental Assistant Applications - A completed application will be reviewed and may be approved by the board office staff. A complex application will be reviewed and may be approved by a member of the Board.
- Collaborative Supervision Applications and Agreements - A completed application or agreement will be reviewed and may be approved by board office staff. A complex application or agreement will be reviewed and may be approved by the Board.
- Corporation Applications - A completed application, or a change in the ownership or management of a registered corporation, will be reviewed and may be approved by the board office staff.
- General Anesthesia and Deep Sedation Permit, Moderate Sedation Permit, or Host Permit Applications and Inspections - A completed application or inspection will be reviewed and may be approved by board office staff. A complex application or inspection will be reviewed and may be approved by a member of the Board or the chair of the Anesthesia Credentials Committee.
- All other permit applications - A completed application will be reviewed and may be approved by the board office staff.

Volunteer Applications

- Dentist and Dental Hygienist: Volunteer Applications – A completed application will be reviewed and may be approved by board office staff. A complex application will be reviewed and may be approved by a member of the Board.
 - Dentist – Volunteer temporary nitrous oxide, host, moderate sedation or general/deep sedation: To obtain a temporary permit, the applicant must verify that he or she holds a valid permit to provide this service or is otherwise allowed to provide this service under a regular dental license in his or her home state and that he or she has been regularly providing such service during the three years preceding application, or if the person has graduated less than three years preceding

application, that he or she has been regularly providing such service since graduation. The Board reserves the right to inspect any facility where anesthesia is being provided.

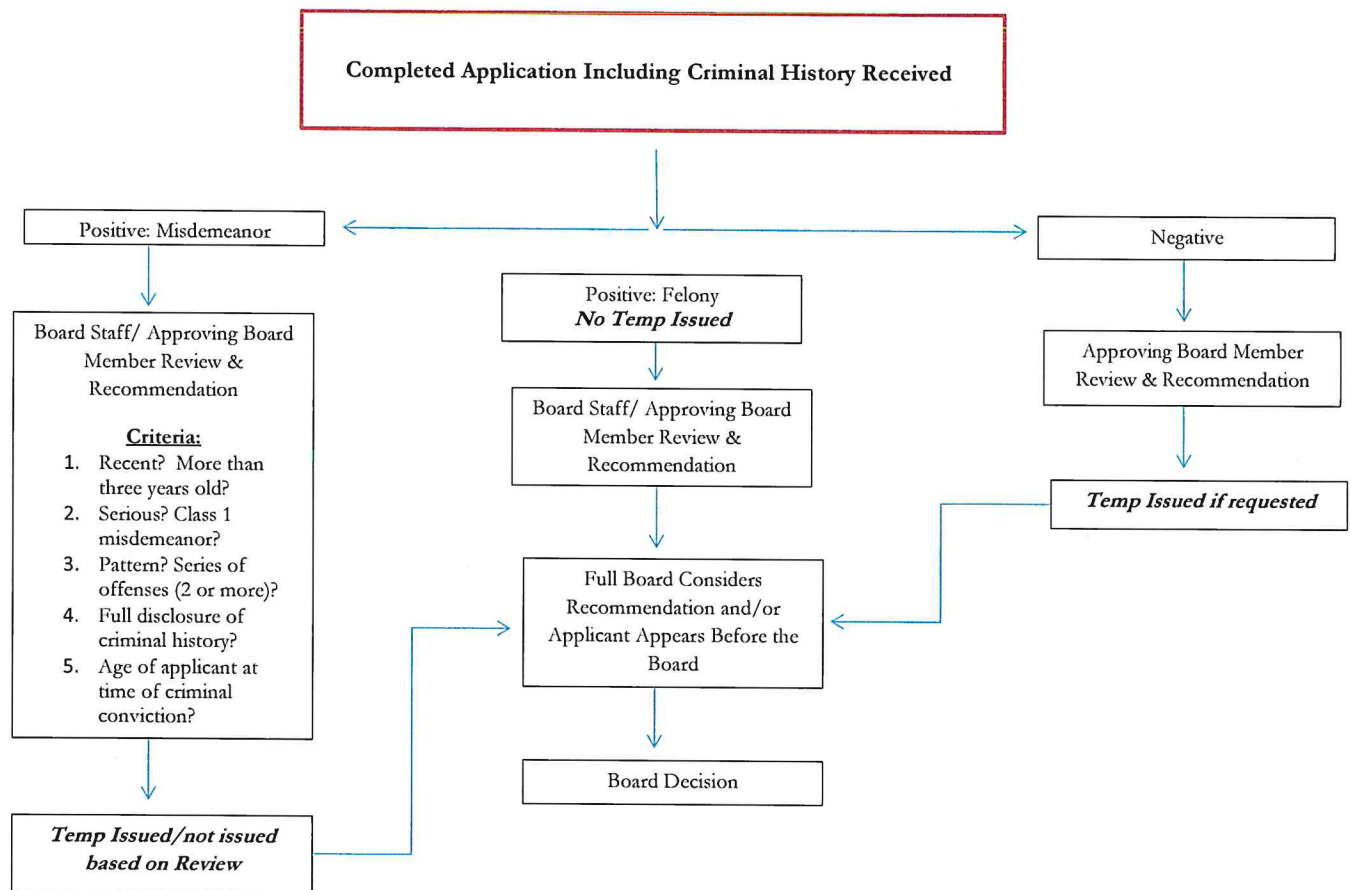
- Dental Hygienist – Volunteer temporary local anesthesia, nitrous oxide and monitoring patients under anesthesia: To obtain a temporary permit, the applicant must verify that he or she holds a valid permit to provide this service or is otherwise allowed to provide this service under a regular dental hygiene license in his or her home state and that he or she has been regularly providing such service during the three years preceding application, or if the person has graduated less than three years preceding application, that he or she has been regularly providing such service since graduation. The Board reserves the right to inspect any facility where anesthesia is being provided.

Anesthesia Application Policy: It is the policy of the Board to use the Anesthesia Application Policy as guidance when determining whether to issue a Moderate Sedation or General Anesthesia and Deep Sedation Permit. The Board, or a member of the Board and/or Anesthesia Credentials Committee, will be consulted as appropriate for complex applications.

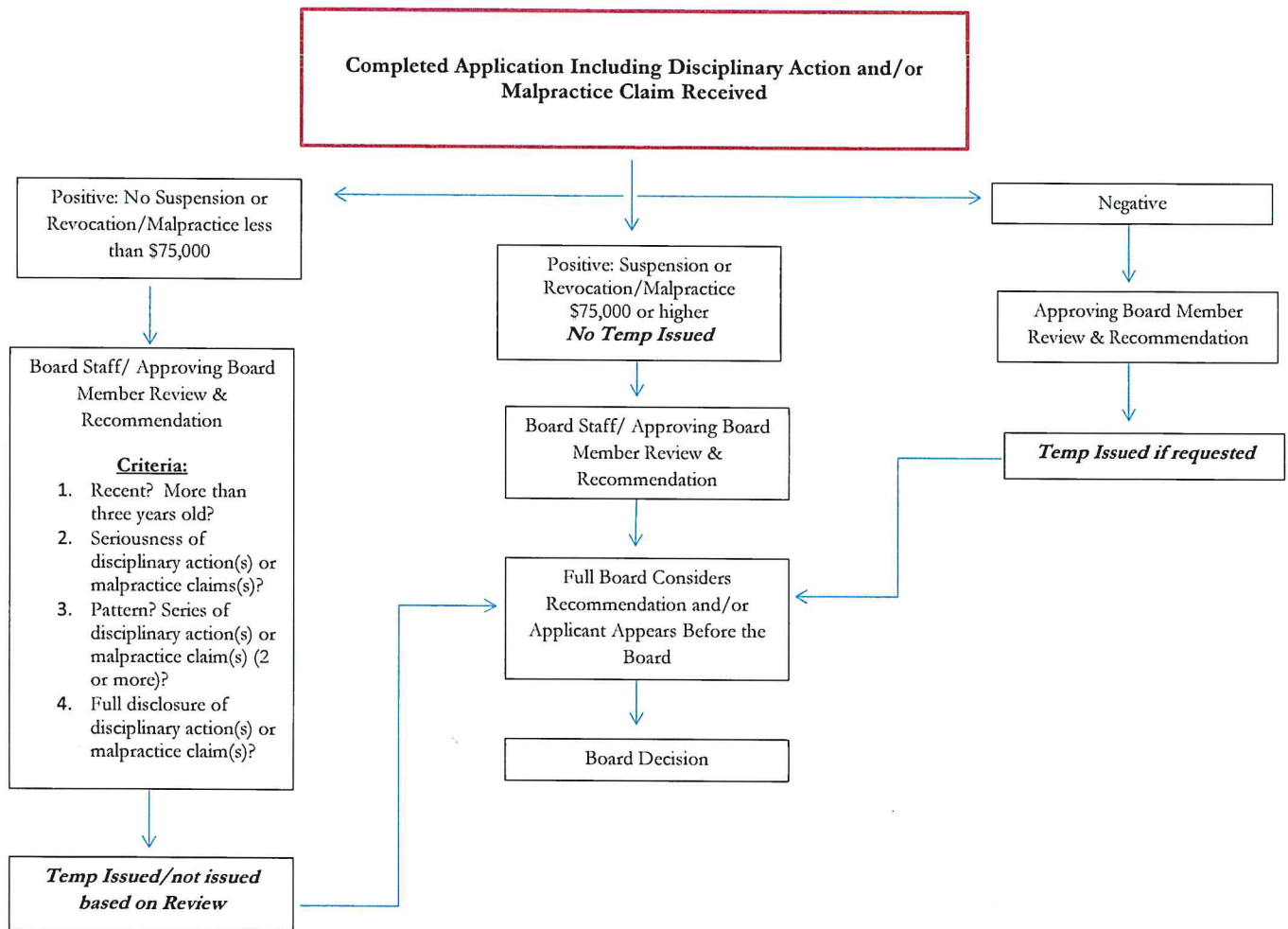
An applicant for a permit to administer Moderate Sedation or General Anesthesia and Deep Sedation that is not licensed and providing Moderate Sedation or General Anesthesia and Deep Sedation in a different state will be allowed up to twelve months between completion of education and date of application. If an applicant has more than twelve months between completion of education and date of application, the applicant will be required to successfully complete a new board-approved course or program and meet all other permit requirements before a permit will be issued.

An applicant for a permit to administer Moderate Sedation or General Anesthesia and Deep Sedation will be required to pass an inspection before being issued a temporary permit. This inspection will include all elements of the full on site anesthesia inspection except the sedation of a patient and completion of a dental procedure. If issued a temporary permit, the dentist will be required to pass the full on site anesthesia inspection before the expiration of the temporary permit. If issued a permit to administer Moderate Sedation or General Anesthesia and Deep Sedation, the dentist must pass the full on site anesthesia inspection as set forth in administrative rule.

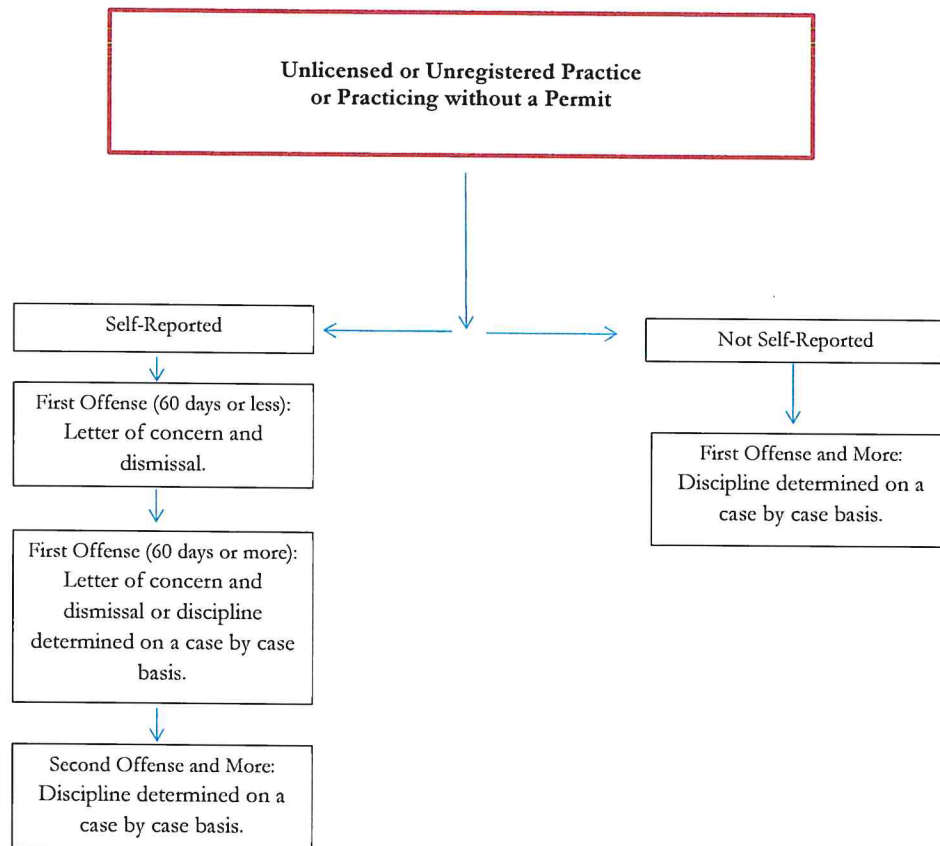
Criminal History Algorithm: It is the policy of the Board to use the Criminal History Algorithm as guidance when determining whether to issue a license, registration or permit.



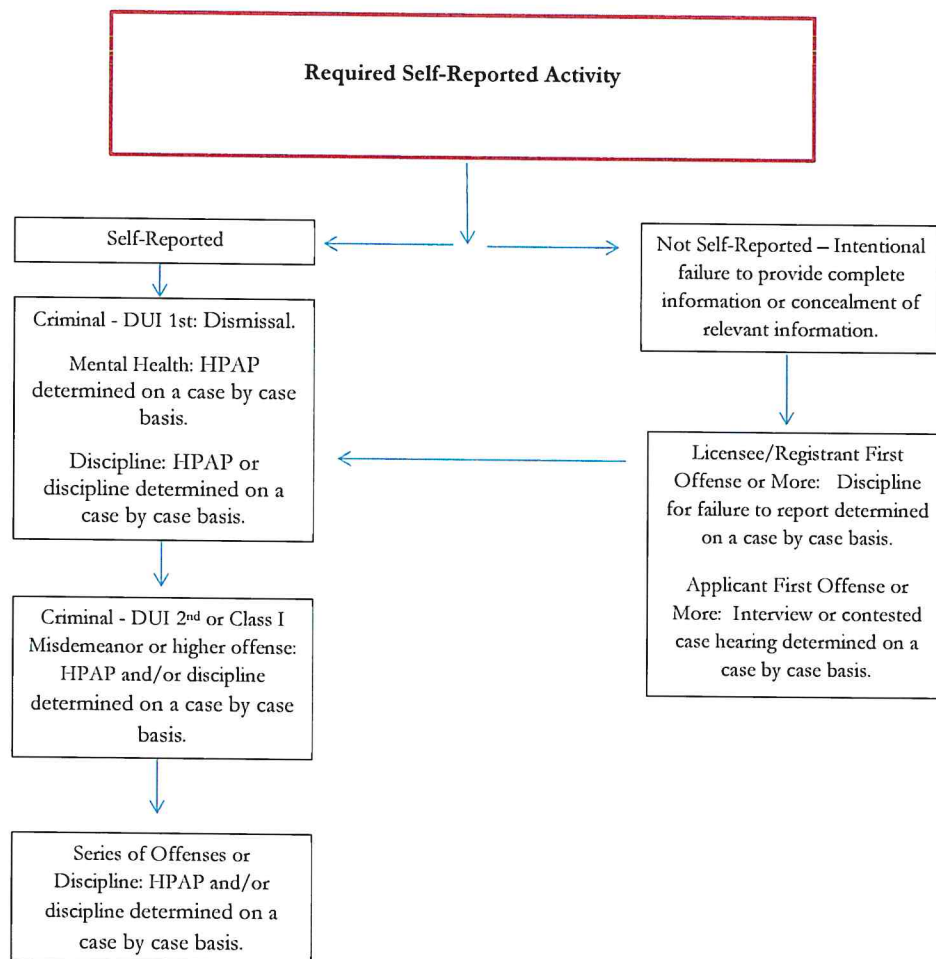
Disciplinary Action & Malpractice Claim Algorithm: It is the policy of the Board to use the Disciplinary Action & Malpractice Claims Algorithm as guidance when determining whether to issue a license, registration or permit.



Unlicensed, Unregistered or Practicing without a Permit Policy: It is the policy of the Board to use the Unlicensed, Unregistered or Practicing without a Permit Policy as guidance when reviewing complaints or other matters pertaining to individuals that qualify for a license, registration or permit.



Self-Reported Activity: It is the policy of the Board to use the Self-Reported Activity as guidance when reviewing information required to be reported to the Board.



Reinstatement Following Failure to Renew: It is the policy of the Board that it will grant a reasonable period of time following July 1st to a licensee, registrant or permit holder that has failed to renew to reinstate his or her respective license, registration, or permit(s) by fulfilling all renewal criteria and paying the applicable fee(s). Facts and circumstances surrounding a failure to renew will be considered on a case by case basis.

Continuing Education Audit Policy: It is the policy of the Board that a continuing education audit will be conducted annually and that it will utilize the Continuing Education Audit Policy as guidance when completing this audit.

It is important that licensees and registrants maintain a file of all the continuing education courses attended during the applicable continuing education cycle. The Board will randomly audit continuing education records and licensees and registrants selected for an audit will be required to provide verification of attendance for all continuing education courses claimed during the applicable continuing education cycle. Verification should include proof of attendance or a certificate of completion. A proof of attendance or a certificate of completion should include the continuing education activity, name of the course, name of the presenter, sponsor of the program, city the course was held in and the number of hours awarded. A certificate of completion must also indicate that the licensee or registrant passed a post-test with a satisfactory score or successfully completed the course.

AUDIT PROCEDURE

1. A percentage of licensees and registrants required to maintain continuing education hours will be selected for audit. The percentage and other selection criteria will be determined by the Board.
2. Licensees and registrants selected will be notified by the Board. They will be provided a timeframe within which to provide verification of attendance for each continuing education course claimed on his or her continuing education report.
3. If satisfactory verification of attendance cannot be produced, the continuing education course will not be approved and the licensee or registrant will not be given credit for that continuing education course.
4. If a licensee or registrant has no continuing education courses entered or a minimal number of continuing education courses entered in his or her continuing education record and is selected for an audit, that individual will be audited the following year.
5. The Board will consider each audit individually and take action as it deems necessary.

Honorarium Request Policy: It is the policy of the Board to allocate resources, when available, to fund continuing education courses that further the mission of the Board. The Board will utilize the Honorarium Request Procedure as guidance:

HONORARIUM REQUEST PROCEDURE

- The Board will determine the following:
 - Fund allocation amount;
 - Information required for submission;
 - Eligibility criteria, which shall include all applicable state contractor requirements;
 - Deadline for submission of applications; and
 - Timeframe for review of applications.
- The Board will release an application at least 30 days prior to the deadline for submission.
- Any application received after the deadline for submission will not be considered unless extenuating circumstances warrant review.

Code of Conduct and Conflict of Interest Policy for Use By State Authority, Board, Commission, and Committee Members

Purpose

The purpose of this code of conduct and conflict of interest policy ("Code") is to establish a set of ethical principles and guidelines for members of state authorities, boards, commissions, or committees when acting within their official public service capacity. This Code applies to all appointed and elected members of state authorities, boards, commissions, and committees (hereinafter "Boards" and "Board member(s)").

Conflict of Interest for Board Members

Board members may be subject to statutory restrictions specific to their Boards found in state and federal laws, rules and regulations. Those restrictions are beyond the scope of this Code. Board members should contact their appointing authority or the attorney for the Board for information regarding restrictions specific to their Board.

General Restrictions on Participation in Board Actions

A conflict of interest exists when a Board member has an interest in a matter that is different from the interest of members of the general public. Examples of circumstances which may create a conflict of interest include a personal or pecuniary interest in the matter or an existing or potential employment relationship with a party involved in the proceeding.

Whether or not a conflict of interest requires a Board member to abstain from participation in an official action of the Board depends upon the type of action involved. A Board's official actions are either quasi-judicial or quasi-legislative. A quasi-judicial official action is particular and immediate in effect, such as a review of an application for a license or permit. In order to participate in a quasi-judicial official action of the Board, a Board member must be disinterested and free from actual bias or an unacceptable risk of actual bias. A Board member must abstain from participation in the discussion and vote on a quasi-judicial official action of the Board if a reasonably-minded person could conclude that there is an unacceptable risk that the Board member has prejudged the matter or that the Board member's interest or relationship creates a potential to influence the member's impartiality.

A quasi-legislative official action, also referred to as a regulatory action, is general and future in effect. An example is rule-making. If the official action involved is quasi-legislative in nature, the Board member is not required to abstain from participation in the discussion and vote on the action

unless it is clear that the member has an unalterably closed mind on matters critical to the disposition of the action.

“Official action” means a decision, recommendation, approval, disapproval or other action which involves discretionary authority. A Board member who violates any of these restrictions may be subject to removal from the Board to which the member is appointed.

Contract Restrictions

There are federal and state laws, rules and regulations that address conflict of interest for elected and appointed Board members in the area of contracts. As an initial matter, a Board member may not solicit or accept any gift, favor, reward, or promise of reward, including any promise of future employment, in exchange for recommending, influencing or attempting to influence the award of or the terms of a state contract. This prohibition is absolute and cannot be waived.

Members of certain Boards are required to comply with additional conflict of interest provisions found in SDCL Chapter 3-23 and are required to make an annual disclosure of any contract in which they have or may have an interest or from which they derive a direct benefit. The restrictions apply for one year following the end of the Board member’s term. The Boards impacted by these laws are enumerated within SDCL 3-23-10. For more information on these provisions, see the State Authorities/Boards/Commissions page in the Legal Resources section of the Attorney General’s website at: <http://atg.sd.gov/legal/opengovernment/authorityboardcommission.aspx>.

Absent a waiver, certain Board members are further prohibited from deriving a direct benefit from a contract with an outside entity if the Board member had substantial involvement in recommending, awarding, or administering the contract or if the Board member supervised another state officer or employee who approved, awarded or administered the contract. With the exception of employment contracts, the foregoing prohibition applies for one year following the end of the Board member’s term. However, the foregoing prohibition does not apply to Board members who serve without compensation or who are only paid a per diem. See SDCL 5-18A-17 to 5-18A-17.6. For more information on these restrictions see the Conflict of Interest Waiver Instructions and Form on the South Dakota Bureau of Human Resources website at: <http://bhr.sd.gov/forms/>.

Other federal and state laws, rules and regulations may apply to specific Boards. For general questions regarding the applicability of SDCL Chapter 3-23 or other laws, a Board member may contact the attorney for the Board. However, because the attorney for the Board does not represent the Board member in his or her individual capacity, a Board member should contact a private attorney if the member has questions as to how the conflict of interest laws apply to the Board member’s own interests and contracts.

Consequences of Violations of Conflict of Interest Laws

A contract entered into in violation of conflict of interest laws is voidable and any benefit received by the Board member is subject to disgorgement. In addition, a Board member who violates conflict of interest laws may be removed from the Board and may be subject to criminal prosecution. For example, a Board member may be prosecuted for theft if the member knowingly

uses funds or property entrusted to the member in violation of public trust and the use resulted in a direct financial benefit to the member. See SDCL 3-16-7, 5-18A-17.4, and 22-30-46.

Retaliation for Reporting

A Board cannot dismiss, suspend, demote, decrease the compensation of, or take any other retaliatory action against an employee because the employee reports, in good faith, a violation or suspected violation of a law or rule, an abuse of funds or abuse of authority, a substantial and specific danger to public health or safety, or a direct criminal conflict of interest, unless the report is specifically prohibited by law. SDCL 3-16-9 & 3-16-10.

Board members will not engage in retaliatory treatment of an individual because the individual reports harassment, opposes discrimination, participates in the complaint process, or provides information related to a complaint. See SDCL 20-13-26.

Anti-Harassment/Discrimination Policy

While acting within their official capacity, Board members will not engage in harassment or discriminatory or offensive behavior based on race, color, creed, religion, national origin, sex, pregnancy, age, ancestry, genetic information, disability or any other legally protected status or characteristic.

Harassment includes conduct that creates a hostile work environment for an employee or another Board member. This prohibition against harassment and discrimination also encompasses sexual harassment. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexually harassing nature, when: (1) submission to or rejection of the harassment is made either explicitly or implicitly the basis of or a condition of employment, appointment, or a favorable or unfavorable action by the Board member; or (2) the harassment has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Harassment or discriminatory or offensive behavior may take different forms and may be verbal, nonverbal, or physical in nature. To aid Board members in identifying inappropriate conduct, the following examples of harassment or discriminatory or offensive behavior are provided:

- Unwelcome physical contact such as kissing, fondling, hugging, or touching;
- Demands for sexual favors; sexual innuendoes, suggestive comments, jokes of a sexual nature, sexist put-downs, or sexual remarks about a person's body; sexual propositions, or persistent unwanted courting;
- Swearing, offensive gestures, or graphic language made because of a person's race, color, religion, national origin, sex, age or disability;
- Slurs, jokes, or derogatory remarks, email, or other communications relating to race, color, religion, national origin, sex, age, or disability; or
- Calendars, posters, pictures, drawings, displays, cartoons, images, lists, e-mails, or computer activity that reflects disparagingly upon race, color, religion, national origin, sex, age or disability.

The above cited examples are not intended to be all-inclusive.

A Board member who is in violation of this policy may be subject to removal from the Board.

Confidential Information

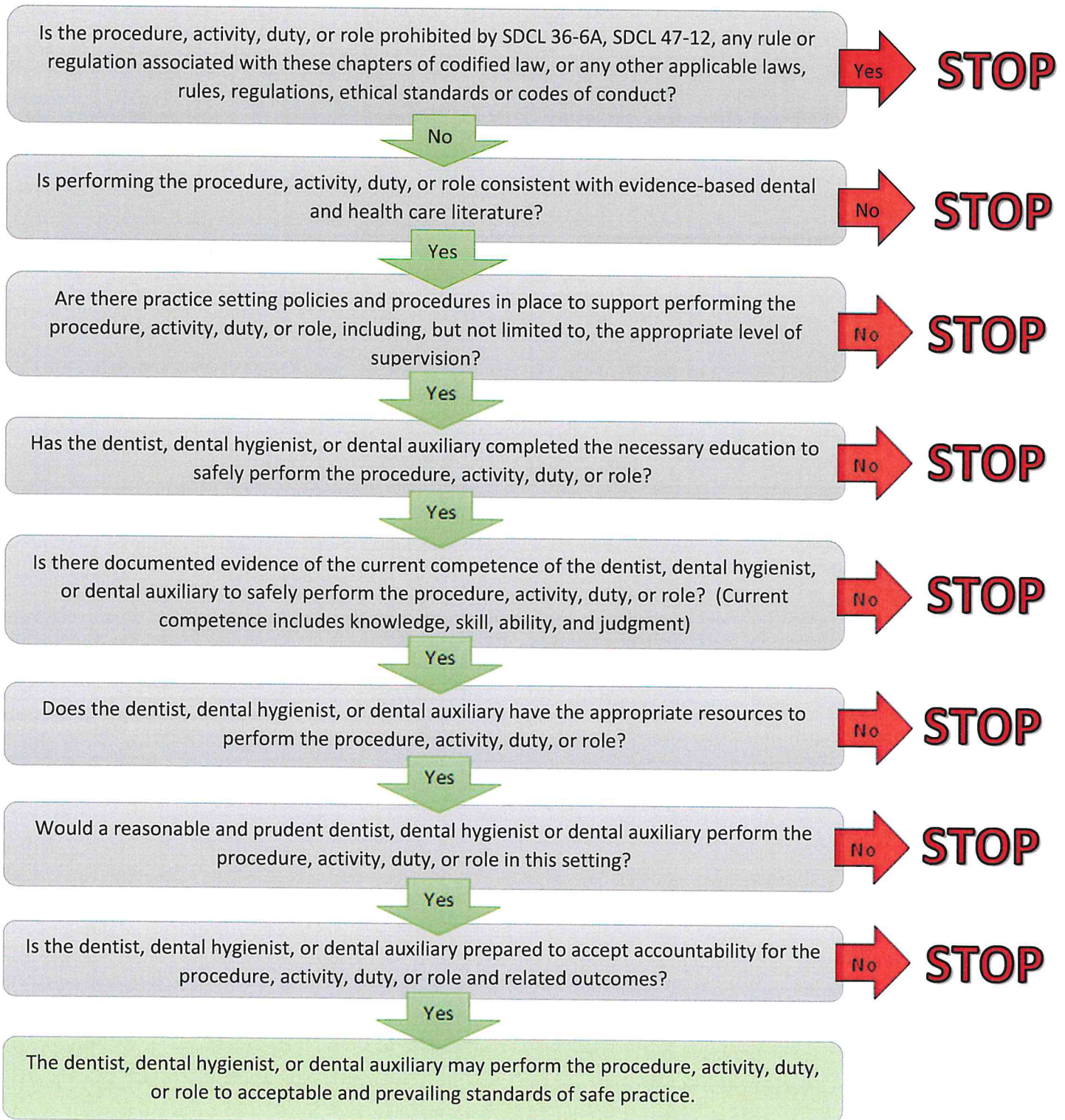
Except as otherwise required by law, Board members shall not disclose confidential information acquired during the course of their official duties. In addition, members are prohibited from the use of confidential information for personal gain.

Reporting of Violations

Any violation of this Code should be reported to the appointing authority for the Board member who is alleged to have violated the Code.

Scope of Practice Decision-making Framework

Identify, describe, or clarify the procedure, activity, or role under consideration.



These decision-making framework guidelines are for educational purposes only. The guidelines do not purport to establish a standard of care or advise a course of action for patient care in any particular situation.

Framework adopted by the South Dakota State Board of Dentistry on January 11, 2019.



South Dakota State Board of Dentistry Continuing Education Requirements

Dentists

Dentists must earn 100 hours of continuing education in every 5-year CE cycle. Fifty (50) of those hours must be academic. Dentists must maintain a current cardiopulmonary resuscitation (CPR) card. The Board of Dentistry will only accept the American Heart Association for the Basic Life Support (BLS) Provider (*formerly known as the Healthcare Provider*), the American Red Cross for the Professional Rescuer or the American Red Cross for the Healthcare Provider cards. A Dentist holding a general anesthesia and deep sedation or moderate sedation permit must have a current Advanced Cardiac Life Support (ACLS) or Pediatric Advanced Life Support (PALS) card from the American Heart Association. *See the CPR requirements in the CE guidelines below.* A Dentist holding a general anesthesia and deep sedation or moderate sedation permit must complete an additional 25 hours of continuing education in anesthesia related topics for each five-year licensure cycle.

Dental Hygienists

Dental Hygienists must earn 75 hours of continuing education in every 5-year CE cycle. A Dental Hygienist must have documented at least five hours of continuing education in dental radiography in a five-year period. Dental Hygienists must maintain a current cardiopulmonary resuscitation (CPR) card. The Board of Dentistry will only accept the American Heart Association for the Basic Life Support (BLS) Provider (*formerly known as the Healthcare Provider*), the American Red Cross for the Professional Rescuer or the American Red Cross for the Healthcare Providers cards. *See the CPR requirements in the CE guidelines below.*

Registered Dental Assistants (Expanded Functions)

Registered Dental Assistants must earn 60 hours of continuing education in every 5-year CE cycle. A person who is certified in dental radiography must have documented at least five hours of continuing education in dental radiography in a five-year period. Registered Dental Assistants must maintain a current cardiopulmonary resuscitation (CPR) card. The Board of Dentistry will only accept the American Heart Association for the Basic Life Support (BLS) Provider (*formerly known as the Healthcare Provider*), the American Red Cross for the Professional Rescuer or the American Red Cross for the Healthcare Providers cards. *See the CPR requirements in the CE guidelines below.*

Dental Radiographers

Dental Radiographers are required to earn 5 hours of continuing education in dental radiography in every 5-year CE cycle.

Continuing Education Categories

Academic: Dentists must complete a minimum of 50 hours in a 5-year CE cycle

Dentists are the only practitioners required to obtain academic hours. Dental hygienists and registered dental assistants who attend academic continuing education should submit those courses in the clinical category.

Academic hours must directly relate to the provision of clinical dental services and meet one of the following criteria: The course must be taken physically at a dental school accredited by the American Dental Association Commission on Dental Accreditation (CODA), the course presenter must be affiliated with a dental school accredited by the American Dental Association Commission on Dental Accreditation (CODA), the provider organization must be approved by the American Dental Association Continuing Education Recognition Program (CERP), or the provider organization must be approved by the Academy of General Dentistry Program Approval For Continuing Education (PACE).

Home Study: Limited to 30 hours maximum in a 5-year CE cycle

Online continuing education courses or webinars that include an interactive component are not considered home study and should be categorized based on course content.

Home study continuing education may include online courses or courses presented via CD that do not have an interactive component. Home study courses require that you demonstrate your participation in the course or lecture through a certificate of completion from the continuing education provider. You cannot receive credit for the same home study course more than one time during your 5-year CE cycle.

CPR: Limited to 15 hours maximum in a 5-year CE cycle

Being certified in cardiopulmonary resuscitation (CPR) is a requirement for all dentists, dental hygienists, and registered dental assistants. All such licensees/registrants must maintain a current CPR card. The Board of Dentistry will only accept the American Heart Association for the Basic Life Support (BLS) Provider (*formerly known as the Healthcare Provider*), the American Red Cross for the Professional Rescuer or the American Red Cross for the Healthcare Providers cards. You do not have to take a refresher course every year; just keep your certification current. Credit for CPR courses is hour for hour. Dentists holding a general anesthesia and deep sedation or moderate sedation permit may submit an Advanced Cardiac Life Support (ACLS) or Pediatric Advanced Life Support (PALS) card from the American Heart Association to satisfy the CPR requirement. The Board of Dentistry will recognize hours taken for a certified paramedic, certified emergency medical technician and advanced certified life support in the CPR category with the applied 15 hour limit.

Practice Management: Limited to 10 hours maximum in a 5-year CE cycle

Practice management courses or lectures are taken to benefit oneself for personal or professional gain or enhancing the business aspects of dentistry. Courses and lectures include, but are not limited to, practice management, dental ethics, risk management, stress management, communication skills, office ergonomics, HIPAA, domestic violence, etc. Completion of a college business or college computer-business class will be accepted for 10 hours of practice management if the class included at least 10 hours of lecture or class time.

Nutrition: Limited to 15 hours maximum in a 5-year CE cycle

Nutrition courses or lectures include topics of dental nutrition. These topics included, but are not limited to, diet, exercise, dental nutrition, and health issues affecting dental health (ex. Anorexia nervosa, bulimia, etc.)

Clinical: Unlimited

Clinical courses or lectures are presented by an instructor who is not affiliated with a CODA accredited university or do not meet the criteria for Academic continuing education. These courses or lectures emphasize practitioner to patient contact. Examples include, but are not limited to latest techniques in dentistry, clinical courses, specialties, OSHA/infection control, etc. Courses presented by colleagues or other presenters providing an in-office presentation should obtain prior course approval from the Board.

Radiography: Dental Hygienist and Radiographers must have a minimum of 5 hours of radiography courses in a 5-year CE cycle. Limited to 20 hours maximum in a 5-year CE cycle.

Radiography topics can include radiation safety, equipment operation, film processing, emergency procedures, anatomy and positioning of relevant procedures, radiographic quality assurance, correcting and identifying technique and processing errors, and recognition and identification of radiographic information, such as procedures for enhancing interpretation of radiographic information including disease. Home study radiography courses are allowed. However, if you take the same home study course more than one time during your 5-year CE cycle, you will only receive credit for one course. You cannot receive credit for the same home study course more than one time during your 5-year CE cycle.

Anesthesia/Sedation: Dentists holding a general anesthesia and deep sedation or moderate sedation permit must complete an additional 25 hours of continuing education in anesthesia related topics for each five-year licensure cycle.

A Board approved anesthesia inspector is eligible for two hours of anesthesia related continuing education for each anesthesia inspection completed with a maximum of ten hours per continuing education cycle.

Dentists holding a general anesthesia and deep sedation or moderate sedation permit may claim 4 hours of anesthesia related continuing education for each ACLS or PALS certification completed and may claim a maximum of 8 hours per continuing education cycle (i.e. 2 ACLS certification courses).

Other Continuing Education Guidelines

Clinical – Exhibits (State, Regional or National Meetings/Conventions):

Hour for hour up to five (5) hours of Clinical-Exhibits CE may be earned for attendance at the exhibits and meetings at a state, regional or national meeting/convention up to twenty-five (25) hours per 5 year CE cycle.

Clinical – Course (table clinics of a state, regional or national meetings/conventions)

One (1) hour Clinical-Course CE may be earned for each attendance at the table clinics of a state, regional or national meeting/convention.

Examiners:

CRDTS and other Regional Board Examiners are allowed five (5) hours Academic CE per year in the area of the exam for which he/she calibrates. If a CRDTS examiner calibrates in all three different areas (restorative, periodontal, and clinic floor) of the exam, he/she may earn the five (5) hours for each area and therefore up to fifteen (15) hours per year.

Investigators:

The Board will approve up to 50 hours of clinical continuing education per five year CE cycle for investigative services provided by Board investigators.

Clinical - Volunteer Services:

Up to thirty (30) hours of Clinical-Volunteer CE may be earned per 5 year CE cycle for volunteer service with:

- Delta Dental Mobile Program
- Donated Dental Services (DDS) programs
- Sanford Children's Hospital: Cleft Lip & Palate Clinic
- Christina's Smile Care Mobile
- Examinations for troops before deployment
- St. Francis Mission Dental Clinic
- Sioux Empire Smiles

Clinical-Volunteer CE may be earned for other volunteer activities that involve direct patient care with approval from the Board.

The Board will not approve oral health or oral health career presentations given to elementary and secondary students for continuing education credit. These types of presentations are considered community service.

Teleconference or Live Webcast Courses:

Teleconference or live webcast courses may fall under the categories of Clinical, Academic, Practice Management, or Radiography depending on the instructor's credentials and the content of the course.

Class Instruction/Attendance:

Dentists, dental hygienists and registered dental assistants teaching seminar classes may have their seminar teaching hours allowed as Clinical CE after completing the CE Course Approval Form and providing a course outline and biography for Board approval. Hour for hour credit will be allowed for instruction of the course as a one-time credit per course during the 5-year cycle. An in-office presentation to dental hygienists and registered dental assistants by another dental professional may be allowed as Clinical CE. You must submit the CE Course Approval Form and provide a course outline and biography of the presenter for Board approval.

Class instruction and/or class attendance at a CODA accredited dental school may be allowed as Academic CE. You must provide an outline of teaching content and obtain Board approval. Hour for hour credit may be given for class instruction and /or class attendance up to one half of the required hours during the 5-year cycle. For example, a maximum of 50 hours for dentists, 38 hours for hygienists, and 30 hours for registered dental assistants is allowed.

Upon request, if a licensed practitioner attends an accredited dental or dental hygiene school full time or is completing a specialty or general practice residency while licensed with the Board, the required continuing education credits may be waived for the time period that the licensee is attending the accredited dental or dental hygiene school or completing a specialty or general practice residency.

In Office Instruction:

In office classes presented to staff by the in office Dentist are allowed. The Board requires prior approval by submitting the CE Course Approval Form.

Digital Software Courses: In office instruction and training of hygienists and registered dental assistants in digital x-rays by digital software professional trainers may be allowed partly as Radiography CE and partly as Practice Management CE. You must complete the CE Course Approval Form and provide a course outline and the Board will determine the number of hours to be applied in each category.

Practice Management Software Courses: In office instruction and training of dental hygienists and registered dental assistants in practice management software by the professional trainers may be allowed as Practice Management CE. You must complete the CE Course Approval Form and provide a course outline and the Board will determine the number of hours to be applied in each category.

Specialty Dental Practice/Laboratory: Instruction of a dental hygienist or registered dental assistant at another specialty dental practice or dental laboratory in order to perform new procedures and tasks, not previously performed, may be allowed as Clinical CE. You must complete the CE Course Approval Form and provide a course outline and the Board will determine the number of hours to be applied in each category. The Board recommends the specialty dental practice submit the CE Course Approval Form and course outline for prior approval.

Miscellaneous:

The Board will not approve continuing education classes on the subject of animal dentistry, as the Board issues licenses to dentists performing dental services on humans per SDCL 36-6A-32.

The Board generally recognizes continuing education providers certified through the American Dental Association Continuing Education Recognition Program (ADA CERP), the Academy of General Dentistry Program Approval for Continuing Education (AGD PACE) and the American Academy of Dental Hygiene as valid continuing education providers.

Courses that have been approved are listed on the Approved CE Calendar, which you can access in your account by logging in to your account through the Board of Dentistry web site.

The Board determines whether a continuing education course will be approved and the category each course will fall under. If you are uncertain about approval and/or what category a continuing education course will fall under, please contact the South Dakota State Board of Dentistry office.

Anesthesia Credentials Committee (ARSD 20:43:09:16)

Information about the ACC can be found at ARSD 20:43:09:16.

ACC members are appointed by the Board. To be considered for an appointment to the ACC, please submit an application to contactus@sdboardofdentistry.com by May 1st. Applications can be found on the Board's website.

Member Position	Open/Filled	Appointment Opportunities (June)
Board Member/ Chair	Filled	Board Member/Chair
General Anesthesia & Deep Sedation Permit (Completion of CODA accredited advanced dental education residency program)	Open – Accepting Applications	Appoint in 2022 <i>Term 2022-2027</i>
Moderate Sedation Permit (Completion of CODA accredited advanced dental education residency program)	Open – Accepting Applications	Appoint in 2022 <i>Term 2022-2027</i>
Host Permit	Open – Accepting Applications	Appoint in 2022 <i>Term 2022-2025</i>
General Anesthesia & Deep Sedation Permit (OMFS)	Filled	Appoint in 2023 <i>Term 2023 – 2029</i>
Moderate Sedation Permit (General Dentist)	Filled	Appoint in 2023 <i>Term 2023 – 2029</i>
General Anesthesia & Deep Sedation Permit OR Moderate Sedation Permit Rotates depending on Board Member/Chair (<i>Opposite permit of Chair to maintain 3 GA/Deep and 3 Moderate permits</i>)	Filled	Appoint in 2025 <i>Term 2025 - 2031</i>



South Dakota State Board of Dentistry

P.O. Box 1079, 1351 N. Harrison Ave. Pierre, SD 57501-1079

Ph: 605-224-1282

Fax: 1-888-425-3032

E-mail: contactus@sdboardofdentistry.com

www.sdboardofdentistry.org

ANESTHESIA CREDENTIALS COMMITTEE (ACC) APPLICATION

Information about the ACC can be found at ARSD 20:43:09:16*.

To be considered for appointment, please submit this application to contactus@sdboardofdentistry.com by May 1st.

Name: Luke Nicholson License #: D1331
Phone: 740-275-1322 City: Dakota Dunes
Email: nicholsonlm7@gmail.com

1. I am a licensed dentist and currently hold the following permit:



General Anesthesia & Deep Sedation Permit



Moderate Sedation Permit



Host Permit

2. Please provide a brief statement outlining why you would like to serve on the ACC:

Being that I provided office-based general anesthesia on a daily basis, I can bring a different perspective to the anesthesia committee. I am familiar with different state laws and regulations revolving around anesthesia/sedation in the dental setting. I believe I can provide the committee with a vast array of knowledge that can be incorporated into daily practice.

3. Please provide a summary of your education and experience relative to dental sedation and anesthesia:

-1 of 2 Board Certified Dentist Anesthesiologist in the State of South Dakota and Nebraska

-Founding Partner of Nebraska Dental Anesthesia

-Dentist Anesthesiologist at San Carlos Apache Hospital

-BCLS/ACLS/PALS certified

Since I completed my 36 month residency in dental anesthesiology, I have provided care for over 3,000 patients ranging in services from moderate sedation to general anesthesia.

I understand that the central mission of the Board, and its committees, is to protect the public. If appointed, I will abide by the legal and ethical responsibilities associated with being a member of the ACC and will conduct myself accordingly.

Signature: _____

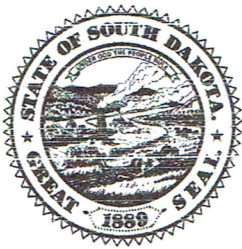
Date: _____

04/18/2022

***20:43:09:16. Anesthesia credentials committee.** The anesthesia credentials committee is a peer review committee appointed by the board to assist the board in the administration of this chapter. The committee shall include at least one member of the board, up to five additional dentists that hold a general anesthesia and deep sedation or moderate sedation permit, and up to one additional dentist that does not hold a general anesthesia and deep sedation or moderate sedation permit. The board shall appoint the chair.

The anesthesia credentials committee chair, or its members, shall perform the following duties at the request of the board:

- (1) Review permit applications and approve an application if the requirements of the chapter have been met;
- (2) Review educational courses or residency programs and make recommendations to the board;
- (3) Review inspector candidates and make recommendations to the board; and
- (4) Other duties as delegated by the board or board president.



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ANESTHESIA CREDENTIALS COMMITTEE (ACC) APPLICATION

Information about the ACC can be found at ARSD 20:43:09:16*.

To be considered for appointment, please submit this application to contactus@sdboardofdentistry.com by May 1st.

Name: Jesse Fast License #: D0806
Phone: 605-352-6999 City: Huron
Email: dr.fast@dakotafamilydentistry.org

1. I am a licensed dentist and currently hold the following permit:

☐

General Anesthesia & Deep Sedation Permit

☐

Moderate Sedation Permit

☒

Host Permit

2. Please provide a brief statement outlining why you would like to serve on the ACC:

As a host permit holder I feel I could bring value to the committee.

3. Please provide a summary of your education and experience relative to dental sedation and anesthesia:

*I have been treating patients at our local hospital under general anesthesia for 13 years, utilizing CRNAs.
I am familiar and comfortable with dental sedation as my partner has practiced moderate sedation. I have completed the required coursework for a temporary host permit.*

I understand that the central mission of the Board, and its committees, is to protect the public. If appointed, I will abide by the legal and ethical responsibilities associated with being a member of the ACC and will conduct myself accordingly.

Signature: Jesse Fast

Date: 4-11-22

***20:43:09:16. Anesthesia credentials committee.** The anesthesia credentials committee is a peer review committee appointed by the board to assist the board in the administration of this chapter. The committee shall include at least one member of the board, up to five additional dentists that hold a general anesthesia and deep sedation or moderate sedation permit, and up to one additional dentist that does not hold a general anesthesia and deep sedation or moderate sedation permit. The board shall appoint the chair.

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ANESTHESIA CREDENTIALS COMMITTEE (ACC) APPLICATION

Information about the ACC can be found at ARSD 20:43:09:16*.

To be considered for appointment, please submit this application to contactus@sdboardofdentistry.com by May 1st.

Name: Chris Diaz-Freed License #: D1004
Phone: 605-261-4697 City: Sioux Falls
Email: drdiazfreed@gmail.com

1. I am a licensed dentist and currently hold the following permit:

☐

General Anesthesia & Deep Sedation Permit

☒

Moderate Sedation Permit

☐

Host Permit

2. Please provide a brief statement outlining why you would like to serve on the ACC:

I am currently applying for moderate sedation specialist ACC position since the GP moderate sedation spot is taken. I have been a moderate sedation dentist for 5 years. I work in a facility that does quite a bit of sedation cases. I currently use a LAP. I serve a rural community. I am applying for the moderate sedation specialist position because I feel the board is still not filling the positions representative of the sedation providers in the state. The ACC also needs to an equally voiced opinion compared to the past ACC committee make up.

3. Please provide a summary of your education and experience relative to dental sedation and anesthesia:

GRU sedation course

Puerto Rico Maxicourse (sedation course)

I am very familiar with sedation laws in other states and potential laws that can be considered anti-trust and/or anti-competitive. It is imperative that non-stakeholder dentists have access to implement sedation dentistry in their offices (on par with most states) and decrease the cost of care to South Dakotans without the liability (on par with most states).

I understand that the central mission of the Board, and its committees, is to protect the public. If appointed, I will abide by the legal and ethical responsibilities associated with being a member of the ACC and will conduct myself accordingly.

Signature: _____

Date: _____

4-7-22

***20:43:09:16. Anesthesia credentials committee.** The anesthesia credentials committee is a peer review committee appointed by the board to assist the board in the administration of this chapter. The committee shall include at least one member of the board, up to five additional dentists that hold a general anesthesia and deep sedation or moderate sedation permit, and up to one additional dentist that does not hold a general anesthesia and deep sedation or moderate sedation permit. The board shall appoint the chair.

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ANESTHESIA CREDENTIALS COMMITTEE (ACC) APPLICATION

Information about the ACC can be found at ARSD 20:43:09:16*.

To be considered for appointment, please submit this application to contactus@sdboardofdentistry.com by May 1st.

Name: Megan Diaz-Freed License #: D1000
Phone: 605-332-1500 City: Sioux Falls
Email: megdiazfreed@gmail.com

1. I am a licensed dentist and currently hold the following permit:

☐

General Anesthesia & Deep Sedation Permit

☒

Moderate Sedation Permit

☐

Host Permit

2. Please provide a brief statement outlining why you would like to serve on the ACC:

I am in process for moderate sedation licensure. I started the main emergency dental clinic in Sioux Falls 5 years ago and serve a dental population in need of lesser cost sedation services. I will be using a LAP and have working relationships with other moderate sedation dentists in the area and we'd like a voice in the anesthesia process going forward. I am also building a new facility that will be offering specialty sedation services in the future. All providers will be welcomed to provide services after privilege acceptance. Thank you for your consideration.

3. Please provide a summary of your education and experience relative to dental sedation and anesthesia:

GRU sedation course

Puerto Rico Maxicourse (sedation course)

I understand that the central mission of the Board, and its committees, is to protect the public. If appointed, I will abide by the legal and ethical responsibilities associated with being a member of the ACC and will conduct myself accordingly.

Signature: _____

Date: _____

4-2-22

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ANESTHESIA CREDENTIALS COMMITTEE (ACC) APPLICATION

Information about the ACC can be found at ARSD 20:43:09:16*.

To be considered for appointment, please submit this application to contactus@sdboardofdentistry.com by May 1st.

Name: Mark Terry License #: D1014
Phone: (605) 348-2556 City: Rapid City
Email: mark@dakotaperio.com

1. I am a licensed dentist and currently hold the following permit:

☐

General Anesthesia & Deep Sedation Permit

☒

Moderate Sedation Permit

☐

Host Permit

2. Please provide a brief statement outlining why you would like to serve on the ACC:

I'm interested in working together with colleagues to best serve South Dakota dentists who would like to provide anesthesia by helping ensure a thorough, fair process while safeguarding patients.

3. Please provide a summary of your education and experience relative to dental sedation and anesthesia:

- Three year post graduate periodontal residency, 2010-2013 with IV Sedation Training
- Diplomate, American Board of Periodontology since 2014
- Maintained South Dakota moderate sedation license since 2014 with requisite continuing education, ACLS ceretification
- Provide approximately 3 IV sedation cases weekly

I understand that the central mission of the Board, and its committees, is to protect the public. If appointed, I will abide by the legal and ethical responsibilities associated with being a member of the ACC and will conduct myself accordingly.

Signature: _____

Date: _____

04/19/2022

***20:43:09:16. Anesthesia credentials committee.** The anesthesia credentials committee is a peer review committee appointed by the board to assist the board in the administration of this chapter. The committee shall include at least one member of the board, up to five additional dentists that hold a general anesthesia and deep sedation or moderate sedation permit, and up to one additional dentist that does not hold a general anesthesia and deep sedation or moderate sedation permit. The board shall appoint the chair.

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