1.2 1.3	Adopted Permanent Rules Relating to License to Practice as a Limited General Dentist
1.4 1.5	3100.1130 LICENSE TO PRACTICE DENTISTRY AS A LIMITED GENERAL DENTIST.
1.6	Subpart 1. Initial requirements for limited licensure. A person who is a graduate
1.7	of a nonaccredited dental program and desires to obtain will be granted a limited license to
1.8	practice general dentistry within Minnesota shall comply upon successfully complying
1.9	with the requirements in items A to E.
1.10	A. The applicant must initially submit to a credential review by the board and
1.11	pay the nonrefundable fee in Minnesota Statutes, section 150A.091, subdivision 9a. The
1.12	applicant shall provide the following documentation such as:
1.13	(1) a completed board-approved evaluation of all international education;
1.14	(2) an original or notarized copy of passing board-approved language
1.15	testing within the previous two years if English is not the applicant's primary language;
1.16	(3) an original affidavit of licensure;
1.17	(4) a completed dental questionnaire;
1.18	(5) a personal letter/curriculum vitae/resume;
1.19	(6) an original or notarized copy of dental diploma and, if necessary,
1.20	professional translation;
1.21	(7) proof of clinical practice in dentistry;
1.22	(8) an original or notarized copy of other credentials in dentistry and, if
1.23	necessary, professional translation;
1.24	(9) completed board-approved infection control training; and

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(10) an original or notarized copy of National Board Dental Examinations

Report - Part I and Part II.

The applicant is allowed to submit to one credential review by the board.

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- B. Once a credential review has been completed by the board, the committee shall officially notify the applicant by letter as to whether permission to take the regional clinical examination has been denied or granted by the board. The board may also request that the applicant schedule an interview with the credential review committee, then notify the applicant by letter as to whether permission to take the regional clinical examination has been denied or granted by the committee. An applicant denied permission to take the regional clinical examination has the option to appeal the decision to the board within 60 days from the notification date.
- C. If the applicant is granted permission by the board to take the regional clinical examination, the applicant must take a board-approved regional clinical examination, successfully pass the regional clinical examination, and submit evidence of the results of the regional clinical examination within 18 months from the receipt date of the board's notification letter granting permission to take the regional clinical examination.
- D. When an applicant fails twice any part of a board-approved regional clinical examination, the applicant may not take it again until the applicant successfully completes additional education provided by an institution accredited by the Commission on Dental Accreditation. The education must cover all of the subject areas failed by the applicant in each of the two clinical examinations. The applicant may retake the examination only after the institution provides to the board information specifying the areas failed in the previous examinations and the instruction provided to address the areas failed, and certifies that the applicant has successfully completed the instruction. The applicant shall be allowed to retake the clinical examination one time following this additional educational instruction.

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If the applicant fails the clinical examination for a third time, the applicant is prohibited from retaking the clinical examination.

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- E. An applicant must complete and submit a limited license application for review by an appropriate committee of the board. The application must include:
- (1) the initial and annual application fees in Minnesota Statutes, section 150A.091, subdivision 9b;
- (2) evidence of having passed a board-approved regional clinical examination within five years preceding the limited license application;
- (3) evidence of having passed an examination designed to test knowledge of Minnesota laws relating to the practice of dentistry and the rules of the board within five years preceding the limited license application;
- (4) an acceptable written agreement between the applicant and a board-approved Minnesota licensed supervising dentist. The written agreement shall include all information requested by the board. The written agreement shall also include any practice limitations, and an acknowledgment that the applicant agrees to practice clinical dentistry at least 1,100 hours annually, for a period of three consecutive years after clinical practice in Minnesota begins;
 - (5) documentation of current CPR certification;
- (6) a statement from a licensed physician attesting to the applicant's physical and mental condition completed within 12 months preceding the limited license application; and
- (7) a statement from a licensed opthalmologist or optometrist attesting to the applicant's visual acuity completed within 12 months preceding the limited license application.

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Subp. 2. **Terms of limited licensure.** Throughout the three consecutive years while practicing general dentistry in Minnesota under the general supervision of a Minnesota licensed dentist, the limited license dentist must maintain and comply with the requirements in items A to F:

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A. submit annual payment of the renewal fee in Minnesota Statutes, section 150A.091, subdivision 9b;

- B. maintain a consecutive and current CPR certification as required to renew a limited license;
- C. submit written correspondence and agreement to the board requesting approval of a subsequent supervising dentist and written agreement, within 14 days prior to employment start date with subsequent supervising dentist. The written agreement shall include all information requested by the board. The written agreement shall also include any practice limitations, and an acknowledgment that the limited license dentist agrees to practice clinical dentistry at least 1,100 hours annually, for a period of three consecutive years or any remaining portion thereof;
- D. within seven business days of an unforeseen event, submit written correspondence for review by an appropriate committee of the board regarding the unforeseen circumstance that may interrupt the three consecutive years of supervision;
- E. maintain with the board a correct and current mailing address and electronic mail address and properly notify the board within 30 days of any changes as described in Minnesota Statutes, section 150A.09, subdivision 3; and
 - F. maintain a professional development portfolio containing:
- (1) acceptable documentation of required hours in professional development activities;

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(2) a minimum of two different core subjects as part of the fundamental activities;

- (3) one completed self-assessment examination; and
- (4) a consecutive and current CPR certification.

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The total required hours of professional development activities is 75 hours with a minimum of 45 hours in fundamental activities and a maximum of 30 hours in elective activities. Completing at least 25 hours each year towards the total of 75 hours is required for compliance.

- Subp. 3. **Terms of supervising dentist.** A supervising dentist must be licensed in Minnesota and provide general supervision to a limited license dentist. The supervising dentist is not required to be present in the office or on the premises when supervising the limited license dentist, but does require the supervising dentist to have knowledge and authorize the procedures being performed by the limited license dentist. For the three consecutive years or any portion thereof, the supervising dentist must be eligible to participate and comply with the requirements in items A to I.
- A. A supervising dentist must be a board-approved Minnesota licensed dentist for at least five consecutive years.
- B. A supervising dentist's license shall not be subject to, or pending, corrective or disciplinary action within the previous five years according to Minnesota Statutes, sections 214.10 and 214.103.
- C. A supervising dentist must have an acceptable written agreement between the limited license dentist and the supervising dentist, and the supervising dentist may only supervise one limited license dentist for the duration of the agreement. The written agreement shall include all information requested by the board. The written agreement shall also include any practice limitations, and an acknowledgment that the limited license

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dentist agrees to practice clinical dentistry at least 1,100 hours annually, for a period of three consecutive years.

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- D. No more than two limited license dentists are allowed to practice general dentistry under general supervision in one dental facility.
- E. Any subsequent modifications to a written agreement must be submitted in writing to the board by the supervising dentist within seven business days of the modification.
- F. A supervising dentist must inform the board in writing about the termination of a written agreement with a limited license dentist within seven business days of the termination.
- G. A supervising dentist must inform the board in writing about any known disciplinary or malpractice proceedings involving the limited license dentist within seven business days of the proceeding.
- H. The supervising dentist must submit to the board a written performance evaluation of the limited license dentist in regards to employment including practicing clinical dentistry at least 1,100 hours annually, patient care, allied dental personnel, professionalism, billing practices, and make a general recommendation within 90 days preceding to seven business days after completing the three consecutive years or any portion thereof. The supervising dentist's evaluation must be submitted to the board no earlier than 90 days before completion of the limited license dentist's practice period and no later than seven business days following completion of the limited license dentist's practice period.
- I. A supervising dentist who fails to comply with this subpart is subject to disciplinary proceedings on grounds specified in parts 3100.6100 and 3100.6200, and Minnesota Statutes, section 150A.08, subdivision 1.

Subp. 4. Requirements for licensure.

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A. Upon completion of the three consecutive years, a dentist with a limited license to practice general dentistry in Minnesota shall be prohibited from practicing general dentistry in Minnesota due to expiration of the limited license. A dentist who has an expired or nearly expired limited license may apply for a dental license to practice general dentistry in Minnesota by presenting a license application to the board and meeting the following requirements in subitems (1) to (6). An applicant:

- (1) must submit a completed application for a dental license in Minnesota no sooner than 90 days preceding the expiration date of the applicant's limited license or no later than one year after the expiration date of the applicant's limited license;
- (2) must submit with the application the nonrefundable fees in Minnesota Statutes, section 150A.091, subdivisions 2 and 3;
- (3) must submit required documentation of a consecutive and current CPR certification;
- (4) shall provide a professional development portfolio for the three consecutive years preceding the license application date as described in subpart 2, item F;
- (5) must submit a written performance evaluation from each supervising dentist regarding the applicant while practicing as a limited license dentist; and
- (6) must not have been subject to corrective or disciplinary action by the board while holding a limited license during the three consecutive years.
- B. An applicant whose license application has been denied may appeal the denial by initiating a contested case hearing pursuant to Minnesota Statutes, chapter 14.

3100.1700 TERMS AND RENEWAL OF LICENSE OR PERMIT; GENERAL.

[For text of subps 1 to 1b, see M.R.]

Subp. 2. **Biennial renewal applications.** A dentist, dental hygienist, licensed dental assistant, or dental assistant with a permit under part 3100.8500, subpart 3, shall submit

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an application for biennial renewal of a license or permit together with the necessary fee no later than the last day of the licensee's birth month which is the application deadline. An application for renewal is deemed timely if received by the board or postmarked no later than the last day of the licensee's birth month. The application form must provide a place for the renewal applicant's signature certifying compliance with the applicable professional development requirements including maintaining a consecutive and current CPR certification and information including the applicant's office address or addresses, the license number, whether the licensee has been engaged in the active practice of dentistry during the two years preceding the period for which renewal is sought as a licensee, and if so, whether within or without the state, and any other information that may be reasonably requested by the board.

[For text of subps 3 to 5, see M.R.]

3100.1750 TERMS AND RENEWAL OF LICENSURE; LIMITED FACULTY AND RESIDENT DENTISTS.

[For text of subps 1 to 3, see M.R.]

- Subp. 4. **Application fees.** Each applicant for initial licensure as a limited faculty or resident dentist shall submit with a license application the fee in Minnesota Statutes, section 150A.091, subdivision 2.
- Subp. 5. **Annual license fees.** Each limited faculty or resident dentist shall submit with an annual license renewal application the fee in Minnesota Statutes, section 150A.091, subdivision 4.

[For text of subp 6, see M.R.]

3100.1850 REINSTATEMENT OF LICENSE.

[For text of subps 1 to 2a, see M.R.]

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9.1	Subp. 3. Expiration or voluntary termination of 24 months or more. An applicant
9.2	whose license has expired according to part 3100.1700, subpart 3, or who voluntarily
9.3	terminated the license 24 months or more previous to the application for reinstatement must:
9.4	A. comply with subpart 2a;
9.5	B. submit either:
9.6	[For text of subitem (1), see M.R.]
9.7	(2) evidence of having successfully completed applicable board-approved
9.8	coursework with minimal hour requirements directly relating to the practice of dentistry,
9.9	dental hygiene, or dental assisting as indicated in the reinstatement application. The
9.10	board-approved coursework must have been completed within 24 months prior to the
9.11	board's receipt of the application. The coursework completed under this subpart may
9.12	not be used to fulfill any of the applicable professional development requirements in
9.13	part 3100.5100; and
9.14	C. be available for an interview with the appropriate board committee to
9.15	determine the applicant's knowledge of dental subjects and ability to practice dentistry,
9.16	dental therapy, dental hygiene, or dental assisting under this subpart.
9.17	[For text of subps 4 and 5, see M.R.]
9.18	3100.3600 ADMINISTRATION OF GENERAL ANESTHESIA, DEEP SEDATION,
9.19	MODERATE SEDATION, MINIMAL SEDATION, AND NITROUS OXIDE
9.20	INHALATION ANALGESIA.
9.21	[For text of subps 1 to 7, see M.R.]
9.22	Subp. 8. Reporting of incidents required. A dentist, dental hygienist, or licensed
9.23	dental assistant must report to the board any incident that arises from the administration of
9.24	nitrous oxide inhalation analgesia, general anesthesia, deep sedation, moderate sedation,
9.25	local anesthesia, analgesia, or minimal sedation that results in:

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A. a serious or unusual outcome that produces a temporary or permanent physiological injury, harm, or other detrimental effect to one or more of a patient's body systems; or

B. minimal sedation unintentionally becoming moderate sedation, deep sedation, or general anesthesia when the licensee does not have a certificate for administering general anesthesia or moderate sedation described in subparts 9 and 9b.

The report must be submitted to the board on forms provided by the board within ten business days of the incident by the dentist, dental hygienist, or licensed dental assistant, even when another licensed health care professional who, under contract or employment with the dentist, was the actual person administering the analgesia or pharmacological or nonpharmacological method. A licensee who fails to comply with reporting of incidents is subject to disciplinary proceedings on grounds specified in parts 3100.6100 and 3100.6200 and Minnesota Statutes, section 150A.08, subdivision 1.

[For text of subps 9 to 11, see M.R.]

3100.5100 PROFESSIONAL DEVELOPMENT.

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[For text of subps 1 and 2, see M.R.]

- Subp. 3. **Professional development activities.** Professional development activities include, but are not limited to, continuing education, community services, publications, and career accomplishments throughout a professional's life. Professional development activities are categorized as fundamental or elective activities as described in items A and B.
- A. Fundamental activities include, but are not limited to, clinical subjects, core subjects, CPR training, and the self-assessment examination. Examples of fundamental activities for an initial or biennial cycle are described in subitems (1) to (5).

[For text of subitems (1) and (2), see M.R.]

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(3) A CPR certification course is mandatory for each licensee to maintain licensure. The CPR course must be equivalent to the American Heart Association healthcare provider course or the American Red Cross professional rescuer course. The licensee must maintain a consecutive and current CPR certificate when renewing a license or permit each biennial term.

[For text of subitems (4) and (5), see M.R.]

B. Elective activities for an initial or biennial cycle include, but are not limited to, the examples described in subitems (1) to (7):

[For text of subitems (1) to (4), see M.R.]

- (5) dental practice management courses include, but are not limited to, computer, insurance claims or billing, and Health Insurance Portability and Accountability Act (HIPAA) training;
- (6) leadership or committee involvement with the board or a dental professional association for a maximum of three credit hours; or
- (7) the board shall approve other additional elective activities if the board finds the contents of the activity to be directly related to, or supportive of, the practice of dentistry, dental hygiene, or dental assisting.

[For text of subps 4 and 5, see M.R.]

3100.5300 AUDIT PROCESS OF PORTFOLIO.

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[For text of subps 1 to 5, see M.R.]

Subp. 6. **Audit fee.** The licensee shall submit to the board the nonrefundable fee in Minnesota Statutes, section 150A.091, subdivision 16, after failing two consecutive professional development portfolio audits and thereafter for each failed professional development portfolio audit.

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12.2	Subpart 1. Specialty areas. The following special areas of dentistry are recognized
12.3	as suitable for the announcement of specialty dental practices:
12.4	A. endodontics (endodontist);
12.5	B. oral and maxillofacial radiology (oral and maxillofacial radiologist);
12.6	C. oral and maxillofacial surgery (oral surgeon/oral maxillofacial surgeon);
12.7	D. oral pathology (oral pathologist);
12.8	E. orthodontics (orthodontist);
12.9	F. pediatric dentistry (pediatric dentist);
12.10	G. periodontics (periodontist);
12.11	H. prosthodontics (prosthodontist); and
12.12	I. public health.
12.13	[For text of subps 2 and 3, see M.R.]
12.14	3100.8400 ASSISTANTS WITHOUT A LICENSE OR PERMIT.
12.15	Subpart 1. Permissible duties. Assistants under this subpart may:
12.16	[For text of items A to D, see M.R.]
12.17	E. provide any assistance, including the placement of articles and topical
12.18	medication in a patient's oral cavity, in response to a specific direction by a licensed dentis
12.19	who is physically engaged in performing a dental operation as defined in the act and who

3100.8400 12

duties as defined in parts 3100.8500 and 3100.8700; and

is physically in a position to give personal supervision to the assistant;

F. aid dental hygienists and licensed dental assistants in the performance of their

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G. apply fluoride varnish in a community setting under the authorization and 13.1 direction of a licensed practitioner with prescribing authority such as a dentist or physician, 13.2 as long as the licensed practitioner authorizing the service or the facility at which the 13.3 fluoride varnish is administered maintains appropriate patient records of the treatment. 13.4 13.5 [For text of subps 1a to 3, see M.R.] 3100.8500 LICENSED DENTAL ASSISTANTS. 13.6 Subpart 1. **Duties under general supervision.** A licensed dental assistant may 13.7 perform the following procedures without the dentist being present in the dental office or 13.8 on the premises if the procedures being performed are with prior knowledge and consent 13.9 of the dentist: 13.10 [For text of items A to G, see M.R.] 13.11 H. deliver vacuum-formed orthodontic retainers; 13.12 I. place and remove elastic orthodontic separators; 13.13 J. complete preliminary charting of the oral cavity and surrounding structures 13.14 with the exception of periodontal probing and assessment of the periodontal structure; 13.15 K. take photographs extraorally or intraorally; and 13.16 L. take vital signs such as pulse rate and blood pressure as directed by a dentist. 13.17 [For text of subps 1a to 3, see M.R.] 13.18 3100.9600 RECORD KEEPING. 13.19 [For text of subps 1 to 9, see M.R.] 13.20 Subp. 10. **Progress notes.** Dental records must be legible and include a chronology 13.21 of the patient's progress throughout the course of all treatment and postoperative visits. 13.22

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A. all treatment provided;

The chronology must include:

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B. all medications used and materials placed;

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- C. the treatment provider by license number, name, or initials; and
- D. when applicable, the identity of the collaborating dentist authorizing treatment by license number.

[For text of subps 11 and 12, see M.R.]

Subp. 13. **Transfer of records.** A patient's dental records must be transferred according to Minnesota Statutes, sections 144.291 to 144.298, irrespective of the status of the patient's account. Digital radiographs shall be transferred by compact or optical disc, electronic communication, or printing on high-quality photographic paper. All transferred film or digital radiographs must reveal images of diagnostic quality using proper exposure settings and processing procedures.

[For text of subp 14, see M.R.]

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