



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

MICHIGAN BOARD OF DENTISTRY RULES COMMITTEE WORK GROUP MEETING

MINUTES APRIL 16, 2024

The Michigan Board of Dentistry Rules Committee Work Group, met on April 16, 2024. The meeting was held via Zoom.

CALL TO ORDER

Mark Johnston, DDS, Chairperson, called the meeting to order at 8:02 a.m.

ATTENDANCE

Members Present: Mark Johnston, DDS, Chairperson
Cheryl Bentley, RDH
Jennifer Fuller, DDS
Martha Morgan, RDH (Departed at 9:45 a.m.)
Edward Sarkisian, DDS

Members Absent: Janet Kinney, RDH, MS
Kathleen Weber, CDA, RDA, BAS

Staff Present: Kimmy Catlin, Board Support Technician,
Boards and Committees Section
Jennifer Shaltry, Departmental Specialist,
Boards and Committees Section

Public Present: Craig Spangler, DDS – Self
Adam Braudmeier, American Association of Orthodontists
Gianna Nawrocki, American Association of Orthodontists

Manny Lentine
Misty Davis, Michigan Primary Care Association
Vincent Benivegna, Michigan Dental Association
John Monticello, GLAO
Erin Suddeth, Michigan Department of Health and Human Services

Dentistry – General Rules

R 338.11247 Limited licenses; issuance; requirements.

Shaltry provided the proposed language that includes Spangler's recommendations.

Spangler suggested that academic clinical limited licensed dentists be permitted to renew the limited license twice and, after three years, be required to take and pass the ADEX.

Spangler will submit proposed language to be considered at the next meeting.

R 338.11263 Relicensure requirements; dentists

Shaltry separated the implicit bias training requirement into its own category.

Committee and public agreed.

R. 338.11265 Relicensure requirements; dental therapists

Shaltry separated the implicit bias training requirement into its own category.

Committee and public agreed.

R 338.11267 Relicensure requirements; RDHs

Shaltry separated the implicit bias training requirement into its own category.

Committee and public agreed.

R 338.11269 RDA Relicensure requirements.

Shaltry separated the implicit bias training requirement into its own category.

Committee and public agreed.

Nawrocki expressed her appreciation of the Committee and their work.

R 338.11411 Delegated and assigned dental procedures for allied dental personnel.

(4) Table 1 – Delegated and Assigned Dental Procedures for Allied Dental Personnel

(vv)

Shaltry provided the updated language that allows the testing for blood sugar on a diabetic patient.

Morgan suggested changing the word sugar to glucose.

Spangler suggested adding that the glucometer be used according to the manufacturer's instructions.

Shaltry inquired if using a glucometer was part of required training.

Morgan stated that it was part of their educational competency.

Spangler suggested adding that the glucometer be used based on the patient's health history and medical status.

Morgan's and Spangler's suggestions were incorporated into the proposed rule. Committee and public agreed.

(jj)

Morgan stated that a UDA cannot administer nitrous oxide.

Shaltry stated she will separate lines for RDA and RDH as there are different requirements RDAs and RDHs under the statute.

Morgan stated that there are different requirements for an RDH to treat adult patients versus pediatric patients and adult patients that cannot consent.

Spangler asked what RDA programs were currently teaching and what continuing education is required for RDAs for pain management.

Johnston inquired if language should be added for emergency situations so UDAs can turn off the nitrous oxide and administer oxygen.

Committee and public agreed.

R 338.11415 Definitions

No changes. Committee and public agreed.

R 338.11417 Practice agreement; care or services.

No changes. Committee and public agreed.

R 338.11419 Health settings.

No changes. Committee and public agreed.

R 338.11501 Specialties; recognition by the board.

No changes. Committee and public agreed.

R 338.11502 Dental anesthesiology explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11504 Dental public health explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11506 Oral and maxillofacial radiology explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11508 Oral Medicine explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11510 Orofacial pain explained; licensure requirements; examination content.

No changes. Committee and public agreed.

Spangler inquired if someone without the specialty license can advertise/perform the specialty.

Shaltry provided the statute (MCL 333.16608) that allows the board to issue a specialty license to a dentist that has advanced training.

Spangler inquired if the code language can be added to the rule.

Benivegna would like to tighten the definition of a specialist to avoid pseudo-specialists, such as implantologist.

Shaltry will research this and discuss at the next meeting.

R 338.11512 Oral and maxillofacial pathology explained; licensure requirements.

No changes. Committee and public agreed.

R 338.11513 Oral and maxillofacial surgery explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11515 Orthodontics and dentofacial orthopedics explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11517 Prosthodontics explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11519 Periodontics explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11521 Pediatric dentistry explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11523 Endodontics explained; licensure requirements; examination content.

No changes. Committee and public agreed.

R 338.11525 Specialists; holding self out to public.

No changes. Committee and public agreed.

R 338.11527 Dental license suspension or revocation; automatic suspension or revocation of specialty licensure; American board discipline.

No changes. Committee and public agreed.

R 338.11601 General anesthesia, deep sedation; requirements.

No changes. Committee and public agreed.

R 338.11602 Moderate or minimal sedation; requirements.

Benivegna stated that moderate sedation was lumped in with minimal sedation. Those trying to provide minimal sedation could not do so as they did not have the credentials to provide moderate sedation. This has caused confusion.

Discussion was held.

No changes. Committee and public agreed.

R 338.11611 Definitions.

Shaltry stated that these definitions are directly from the statute.

Discussion was held.

Monticello stated that they hope to add language to have an in-person evaluation of the patient and current x-rays at least 12 months prior to tooth movement.

Nawrocki provided context as to the 12-month timeframe and will provide a more detailed letter.

Spangler stated that more information regarding an emergency needs to be added here.

Suddeth stated that it was addressed in the level of supervision.

Benivegna will submit a detailed letter regarding sedation.

Shaltry stated she will review the letters from Benivegna and Nawrocki and will bring to the next meeting.

Bentley stated that some dentists are using telehealth abilities to avoid contact with in-person patients and are instead reviewing photos taken during x-rays.

Shaltry stated that the patient must consent to telehealth so those situations should be reported.

R 338.11613 Consent; scope of practice; standard of care.

No changes. Committee and public agreed.

R 338.11615 Prescribing medications.

No changes. Committee and public agreed.

The next meeting will be May 17, 2024, from 8:00-9:30 a.m.

ADJOURNMENT

Shaltry adjourned the meeting at 10:00 a.m.

Prepared by:
Kimmy Catlin, Board Support Technician
Bureau of Professional Licensing

April 16, 2024

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

DIRECTOR'S OFFICE

DENTISTRY - GENERAL RULES

(By authority conferred on the director of the department of licensing and regulatory affairs by sections 16145, 16148, 16174, 16178, 16182, 16186, 16201, 16204, 16205, 16215, 16608, 16611, 16625, 16626, 16631, 16644, 16651, 16652, 16653, 16654, 16655, 16656, 16657, and 16658 of the public health code, 1978 PA 368, MCL 333.16145, 333.16148, 333.16174, 333.16178, 333.16182, 333.16186, 333.16201, 333.16204, 333.16205, 333.16215, 333.16608, 333.16611, 333.16625, 333.16626, 333.16631, 333.16644, 333.16651, 333.16652, 333.16653, 333.16654, 333.16655, 333.16656, 333.16657, and 333.16658, and Executive Reorganization Order Nos. 1991-9, 1996-2, 2003-1, and 2011-4, MCL 338.3501, 445.2001, 445.2011, and 445.2030)

PART 1. GENERAL PROVISIONS

R 338.11101 Definitions.

Rule 1101. (1) As used in these rules:

- (a) "AAOMS" means American Association of Oral and Maxillofacial Surgeons.
- (b) "AAP" means the American Academy of Pediatrics.
- (c) "AAPD" means the American Academy of Pediatric Dentistry.
- (d) "ACLS" means advanced cardiac life support.
- (e) "ADA" means the American Dental Association or a successor organization.
- (f) "ADA CERP" means the American Dental Association Continuing Education Recognition Program.
- (g) "ADEX" means the American Board of Dental Examiners, Inc. examination that is conducted by the CDCA-WREB-CITA.
- (h) "AGD" means the Academy of General Dentistry.
- (i) "AHA" means the American Heart Association.
- (j) "Allied dental personnel" means the supporting team that receives appropriate delegation from a dentist or dental therapist to participate in dental treatment.
- (k) "Analgesia" means the diminution or elimination of pain in the conscious patient as a result of the administration of an agent including, but not limited to, local anesthetic, nitrous oxide, and pharmacological and non-pharmacological methods.
- (l) "Approved course" means a course offered by either a dental, dental therapy, dental hygiene, or dental assistant program accredited by the Commission on Dental Accreditation of the American Dental Association that meets the requirements in section 16611 of the code, MCL 333.16611.
- (m) "ASA" means the American Society of Anesthesiologists.
- (n) "BLS" means basic cardiac life support.
- (o) "Board" means the Michigan Board of Dentistry.
- (p) "CDAC" means the Commission on Dental Accreditation of Canada.

(q) “CDC infection control guidelines” means the Centers for Disease Control and Prevention infection control guidelines established by the CDC in effect on the effective date of the rules and any amendments adopted by the CDC.

(r) “CDCA-WREB-CITA” means the Commission on Dental Competency Assessments Western Regional Examining Board Council of Interstate Testing Agencies or a successor organization.

(s) “CODA” means the Commission on Dental Accreditation or a successor organization.

(t) “Code” means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.

(u) “Conscious sedation” means a minimally depressed level of consciousness that retains a patient’s ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and that is produced by a pharmacological or a non-pharmacological method or a combination of both.

(v) “DDS” means doctor of dental surgery degree.

(w) “Dental therapist” means a person licensed under part 166 of the code, MCL 333.16601 to 333.16659, to provide the care and services and perform any of the duties described in section 16656 of the code, MCL 333.16656.

(x) “Dentist” means, except as otherwise provided in R 338.11801 and R 338.11218, a person licensed by the board under the code and these rules to engage in the practice of dentistry.

(y) “Department” means the department of licensing and regulatory affairs.

(z) “DMD” means doctor of dental medicine degree.

(aa) “General anesthesia” means the elimination of all sensations accompanied by a state of unconsciousness and loss of reflexes necessary to maintain a patent airway.

(bb) “INBDE” means the Integrated National Board Dental Examination.

(cc) “JCNDE” means the Joint Commission on National Dental Examinations.

(dd) “Licensed” means the possession of a full license to practice, unless otherwise stated by the code or these rules.

(ee) “Local anesthesia” means the elimination of sensation, especially pain, in 1 part of the body by the topical application or regional injection of a drug.

(ff) “NBDE” means the National Board Dental Examination.

(gg) “NBDHE” means the National Board Dental Hygiene Examination.

(hh) “NDEB” means the National Dental Examining Board of Canada.

(ii) “Office” means the building or suite in which dental treatment is performed.

(jj) “PALS” means pediatric advanced life support.

(kk) “RDA” means a person licensed as a registered dental assistant by the board under the code and these rules who performs dental procedures as specified in R 338.11411, Table 1. A RDH may perform the functions of a RDA if the RDH is licensed by the board as a RDA.

(ll) “RDH” means an individual licensed as a registered dental hygienist by the board under the code and these rules, who performs basic supportive dental procedures as specified in R 338.11411, Table 1.

(mm) “Second pair of hands” means acts, tasks, functions, and procedures performed by a UDA, RDA, or RDH at the direction of a dentist, dental therapist, or RDH who is in the process of rendering dental services and treatment to a patient. The acts, tasks, functions, and procedures performed by a UDA, RDA, or RDH are ancillary to the

procedures performed by the dentist, dental therapist, or RDH and intended to provide help and assistance when the procedures are performed. This definition does not expand the duties of a UDA, RDA, or RDH as provided by the code and rules promulgated by the board.

(nn) “Sedation” means the calming of a nervous, apprehensive individual, without inducing loss of consciousness, through the use of systemic drugs. Agents may be given orally, parenterally, or by inhalation.

(oo) “UDA” means an unregistered dental auxiliary, who is unlicensed and performs basic supportive dental procedures as specific in R 338.11411, Table 1.

(2) Unless otherwise defined in these rules, the terms defined in the code have the same meaning as used in these rules.

History: 1984 AACS; 1989 AACS; 2006 AACS; 2011 AACS; 2014 AACS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11103 Identification, written consent.

Rule 1103. At the inception of care for a patient, both of the following must occur:

(a) Each dentist, dental therapist, UDA, RDA, and RDH shall identify themselves to the patient as a dentist, dental therapist, UDA, RDA, or RDH.

(b) The patient is provided with a written consent for treatment.

History: 1984 AACS; 2021 AACS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11105 Rescinded.

History: 1984 AACS; 1997 AACS.

R 338.11107 Rescinded.

History: 1984 AACS.

R 338.11109 Rescinded.

History: 1984 AACS; 2014 AACS; 2015 AACS.

R 338.11115 Rescinded.

History: 1989 AACS; 2014 AACS; 2015 AACS.

R 338.11117 Rescinded.

History: 1984 AACS.

R 338.11199 Rescission.

Rule 1199. R 338.4101 to R 338.4555 of the Michigan Administrative Code, appearing on pages 2672 to 2693 of the 1979 Michigan Administrative Code, are rescinded.

History: 1984 AACCS.

R 338.11120 Dental treatment records; requirements.

Rule 1120. (1) A dentist or dental therapist shall make and maintain a dental treatment record of each patient.

(2) A dental treatment record must include all of the following information:

(a) Medical and dental history.

(b) The patient's existing oral healthcare status and the results of any diagnostic aids used.

(c) The patient's current health status as classified by the American Society of Anesthesiologists physical status classification system.

(d) Diagnosis and treatment plan.

(e) Dental procedures performed upon the patient, including both of the following:

(i) The date the procedure was performed.

(ii) The identity of the dentist, dental therapist, or allied dental personnel performing each procedure.

(f) Progress notes that include a chronology of the patient's progress throughout the course of all treatment.

(g) The date, dosage, and amount of any drug prescribed, dispensed, or administered to the patient.

(h) Radiographic and photographic images taken in the course of treatment. If radiographic or photographic images are transferred to another dentist, the name and address of that dentist must be entered in the treatment record.

(3) All dental treatment records must be maintained for not less than 10 years after the date of the last treatment.

History: 1989 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11121 Scheduled controlled substances; inventory record requirements.

Rule 1121. (1) If a controlled substance, as described in article 7 of the code, MCL 333.7101 to 333.7545, is stocked in a dental office for dispensing or administering to a patient, the dentist shall maintain an accurate inventory record of the drug that includes all of the following information:

(a) The date and quantity of the drug purchased.

(b) The amount of the drug, dosage of the drug, and the date the drug was dispensed or administered.

(c) The name of the patient to whom the drug was dispensed or administered. (2) The inventory record must be available for inspection for not less than 10 years.

(3) The dentist shall keep an inventory record in addition to the dental treatment records required by R 338.11120.

History: 1989 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11123 Rescinded.

History: 2017 AACCS; 2021 AACCS.

PART 2. LICENSURE

R 338.11201 Licensure by examination to practice dentistry; graduates of programs in compliance with board standards.

Rule 1201. In addition to meeting the requirements of R 338.7001 to R 338.7005; any other rules promulgated under the code; and section 16174 of the code, MCL 333.16174, an applicant for dentist licensure by examination shall submit a completed application, on a form provided by the department, together with the requisite fee and meet all of the following requirements:

(a) Graduate from a dental educational program that complies with the standards in R 338.11301, in which the applicant has obtained a DDS degree or DMD degree.

(b) Pass all parts of the NBDE, or the INBDE if the INBDE replaces the NBDE, that is conducted and scored by the JCNDE, to qualify for the licensing examination in subdivision (c) of this rule.

(c) Pass all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, or by another regional testing agency.

(d) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license, beginning 6 months after the effective date of this rule.

History: 1984 AACCS; 1989 AACCS; 1997 AACCS; 2006 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11202 Licensure to practice dentistry; graduates of programs not meeting board standards; requirements.

Rule 1202. An applicant for dentist licensure by examination who graduated from a dental educational program that does not comply with the standards provided in R 338.11301 shall submit a completed application, on a form provided by the department, together with the requisite fee, meet the requirements of the code, R 338.7001 to R 338.7005, and any other rules promulgated under the code, and meet all of the following requirements:

(a) Comply with section 16174 of the code, MCL 333.16174.

(b) Submit to the department a final, official transcript establishing graduation from a program in which the applicant has obtained a dental degree. If the transcript is issued in a language other than English, an original, official translation must also be submitted.

(c) An applicant for dentist licensure by examination shall meet 1 of the following requirements:

(i) Graduate from a program in dentistry that complies with the standards in R 338.11301, in which the applicant has obtained a DDS degree or DMD degree. The completion of the program must be confirmed by official transcripts from the school.

(ii) Graduate from a minimum 2-year master's degree or certificate program in dentistry that complies with the standards in R 338.11301, in which the applicant has obtained a degree or certificate in a specialty branch of dentistry recognized in R 338.11501, with proof as required in part 5 of these rules.

(iii) Graduate from a minimum 2-year master's degree or certificate program in dentistry that complies with the standards in R 338.11301, in which the applicant has obtained a degree or certificate in a specialty branch of dentistry that has not been recognized in R 338.11501 but is approved by the board by request.

(d) Pass all parts of the NBDE or INBDE if the INBDE replaces the NBDE that is conducted and scored by the JCNDE.

(e) Pass all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency.

(f) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

History: 1989 AACCS; 1997 AACCS; 2006 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11203 Dental examinations; required passing scores.

Rule 1203. (1) The board approves and adopts the examinations developed and scored by the JCNDE. An applicant shall provide evidence to the department of passing each component of the examination with a converted score of not less than 75.

(2) The board approves and adopts all parts of the ADEX examination. A passing score on the examination is the score recommended by the CDCA-WREB-CITA or its successor organization. An applicant shall provide evidence to the department of a converted score of 75 or higher on each part of the examination.

(3) The required parts of the ADEX examination include all of the following:

(a) Computer-based diagnostic skills examination objective structured clinical examination.

(e) Endodontic clinical examination.

(f) Fixed prosthodontic clinical examination.

(g) Periodontal/scaling patient or manikin clinical examination

(h) Restorative clinical patient or manikin examination.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11205 Rescinded.

History: 1984 AACCS; 1997 AACCS.

R 338.11207 Rescinded.

History: 1984 AACCS; 1997 AACCS.

R 338.11209 Licensure by examination to practice dental therapy.

Rule 1209. In addition to meeting the requirements of R 338.7001 to R 338.7005, any other rules promulgated under the code, and section 16174 of the code, MCL 333.16174, an applicant for dental therapist licensure by examination shall submit a completed application, on a form provided by the department, together with the requisite fee and meet all of the following requirements:

(a) Graduate from a dental therapy educational program that meets the standards in R 338.11302.

(b) Pass all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency, or an examination that is substantially equivalent to the ADEX examination as determined by the board pursuant to R 338.11257(5) and (6), with a passing converted score of not less than 75 on each component of the examination.

(c) Complete not less than 500 hours of clinical practice as required under R 338.11218.

(d) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11211 Rescinded.

History: 1984 AACCS; 1997 AACCS.

R 338.11213 Dental therapy examinations; required passing scores.

Rule 1213. (1) The board approves and adopts all parts of the ADEX examination, conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency. An applicant shall provide evidence to the department of passing each component of the examination with a converted score of not less than 75.

- (2) The required parts of the examination include both of the following:
 - (a) Computer-based dental therapy objective structured clinical examination.
 - (b) Clinical examinations on a manikin or patient.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11215 Rescinded.

History: 1984 AACCS; 1989 AACCS; 1997 AACCS.

R 338.11217 Rescinded.

History: 1984 AACCS; 1989 AACCS; 1997 AACCS.

R 338.11218 Dental therapy clinical practice in board approved program; requirements.

Rule 1218. (1) The dental therapy clinical practice required for licensure must comply with all of the following:

(a) The clinical practice must be included in a dental therapy education program that meets the standards in R 338.11302.

(b) A dental therapy student shall complete not less than 500 clinical practice hours within the educational program, including practice hours in extractions and restorations as determined by the educational program.

(c) A dental therapy student shall be under the direct supervision of a dentist.

(2) A dentist under disciplinary action or who has been under disciplinary action in the past 5 years shall not provide direct supervision of a dental therapy student in a clinical practice. If a dentist is notified by the department that the dentist is under disciplinary review or action by any state, within 7 days after notification, the dentist shall notify the dental therapist program and discontinue directly supervising the dental therapy student in the student's clinical practice.

(3) As used in this rule:

(a) "Dentist" means a dentist licensed in this state or an individual authorized under the laws of another state to engage in the practice of dentistry.

(b) "Direct supervision" means that the supervising dentist complies with all of the following:

(i) Designates a patient of record upon whom the procedures are to be performed by the dental therapy student.

(ii) Describes the procedures to be performed to the dental therapy student.

(iii) Examines the patient before prescribing the procedures to be performed by the dental therapy student.

(iv) Examines the patient upon completion of the procedures that were performed by the dental therapy student.

(v) Is physically present in the office when the procedures are being performed by the dental therapy student.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11219 Rescinded.

History: 1984 AACCS; 1989 AACCS; 1997 AACCS.

R 338.11221 Licensure by examination to practice dental hygiene.

Rule 1221. In addition to meeting the requirements of R 338.7001 to R 338.7005, any other rules promulgated under the code, and section 16174 of the code, MCL 333.16174, an applicant for dental hygienist licensure by examination shall submit a completed application, on a form provided by the department, together with the requisite fee, and meet all of the following requirements:

(a) Graduate from a dental hygiene educational program in compliance with the standards in R 338.11303.

(b) Pass all parts of the NBDHE that is conducted and scored by the JCNDE to qualify for the licensing examination provided for in subdivision (c) of this rule. The requirement does not apply to an applicant who graduated from a dental hygiene program before 1962.

(c) Pass all parts written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency.

(d) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11222 Rescinded.

History: 1989 AACCS; 1997 AACCS; 2006 AACCS; 2021 AACCS.

R 338.11223 RDH examinations; passing scores.

Rule 1223. (1) The board approves and adopts the dental hygiene examination developed and scored by the JCNDE. An applicant shall provide evidence to the department of passing each component of the examination with a converted score of not less than 75.

(2) The board approves and adopts all parts of the ADEX examination. A passing score on the clinical examination is the score recommended by the CDCA-WREB-CITA or its successor organization. An applicant shall provide evidence to the department of a converted score of 75 or greater on each component of the examination.

- (3) The required parts of the ADEX examination include the following:
- (a) Computer simulated clinical examination.
 - (b) Patient or manikin treatment clinical examination.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11225 Rescinded.

History: 1984 AACCS; 1997 AACCS.

R 338.11227 Rescinded.

History: 1984 AACCS; 1997 AACCS.

R 338.11233 Registered dental hygienist; use of letters "R.D.H."; registered dental assistant; use of letters "R.D.A."

Rule 1233. (1) Under section 16264 of the code, MCL 333.16264, a RDH who has received a bona fide degree or certificate of dental hygiene from a CODA-approved program of dental hygiene and who has completed all requirements for licensure may use the letters "R.D.H." after their name in connection with the practice of dental hygiene.

(2) Under section 16264 of the code, MCL 333.16264, a RDA who has received a bona fide degree or certificate of dental assisting from a CODA-approved program of dental assisting and who has completed all requirements for licensure may use the letters "R.D.A." after their name in connection with the practice of dental assisting.

History: 1984 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11235 Licensure to practice as a RDA; requirements.

Rule 1235. In addition to meeting the requirements of R 338.7001 to R 338.7005, any other rules promulgated under the code, and section 16174 of the code, MCL 333.16174, an applicant for RDA licensure by examination shall submit a completed application, on a form provided by the department, together with the requisite fee and meet all of the following requirements:

(a) Graduate or receive a certificate from an educational program that meets the standards in R 338.11307.

(b) Provide evidence to the department of passing both a board-approved written examination and board-approved clinical examination that meets the requirements in R 338.11239, with a score of not less than 75, on all sections of both examinations.

(c) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

R 338.11239 RDA examination; content; time; place; passing score.

Rule 1239. (1) Upon a written request, the board shall review a written and clinical examination for compliance with the criteria in subrule (2) of this rule.

(2) An examination for licensure as a RDA must be both written and clinical and include all of the following:

- (a) Oral anatomy.
- (b) Law and rules governing allied dental personnel.
- (c) Instrumentation and use of dental materials.
- (d) Mouth mirror inspection.
- (e) Dental dam application.
- (f) Application of anticariogenics, which includes sealants, fluoride varnish, and fluoride applications.
- (g) Placement and removal of temporary crowns and bands.
- (h) Radiography.
- (i) Application and removal of post extraction and periodontal dressings.
- (j) Removal of sutures.
- (k) Fabrication of temporary crowns.
- (l) Placing, condensing, and carving amalgam restorations.
- (d) Taking final impressions for indirect restorations.
- (m) Assisting and monitoring the administration of nitrous oxide analgesia.
- (n) Placing, condensing, and carving intracoronal temporaries.
- (o) Infection control, safety, and occupational safety and health administration.
- (p) Orthodontic procedures.
- (q) Placing resin bonded restorations, occlusal adjustment, and finishing and polishing with a non-tissue cutting slow-speed handpiece.
- (r) Selective coronal polishing before orthodontic or restorative procedures only.
- (s) Charting the oral cavity.
- (t) Classifying occlusion.
- (u) Nutritional counseling.
- (v) Medical emergency procedures.
- (w) Pulp vitality testing.
- (x) Placement and removal of gingival retraction materials or agents.
- (y) Drying endodontic canals.
- (aa) Taking impressions for study and opposing models.
- (bb) Instructing in the use and care of dental appliances.
- (cc) Applying topical anesthetic solution.
- (dd) Etching, placing, contouring, and polishing of sealants with a slow-speed rotary handpiece for occlusal adjustment.
- (ee) Placing and removing matrices and wedges.
- (ff) Applying cavity liners and bases.
- (gg) Applying and dispensing in-office bleaching products.
- (hh) Adjusting and polishing contacts and occlusion of indirect restorations.
- (ii) Digital scans.

- (jj) Impressions for bite registration.
- (kk) Applying desensitizing agents.
- (ll) Cement removal.
- (3) The passing score for an examination is a converted score of 75 on each section.

History: 1984 AACCS; 1989 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11240 Registered dental assisting licensure applicant who fails the Michigan examination.

Rule 1240. (1) The applicant shall pass both the clinical and written portions of this state's examination within 18 months after the date the applicant takes either examination.

(2) If the applicant fails either the clinical or written portion of the examination 3 successive times, the applicant shall retake both the written and clinical portions of the examination.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11241 Rescinded.

History: 1984 AACCS; 2021 AACCS.

R 338.11245 Rescinded.

History: 1984 AACCS; 2021 AACCS.

R 338.11247 Limited licenses; issuance; requirements.

Rule 1247. (1) The board may issue an educational limited license for postgraduate education, under section 16182(2)(a) of the code, MCL 333.16182, to an applicant who is a graduate of a dental, dental therapy, dental hygiene, or dental assistant program, and who is engaged in a CODA-accredited postgraduate dental education program. An educational limited license must be renewed annually at the discretion of the department, and except for a 1-time extension that may be granted by the board, it is renewable only 7 times. An applicant for an educational limited license shall comply with all of the following:

(a) Submit the required fee and a completed application on a form provided by the department.

(b) Meet the requirements of R 338.7001 to R 338.7005, any other rules promulgated under the code, and the requirements of section 16174 of the code, MCL 333.16174.

(c) Submit proof of graduation from a dental, dental therapy, dental hygiene, or dental assistant program in the form of a certified copy of a diploma and transcript. If the

transcript is issued in a language other than English, an applicant shall submit an original, official translation.

(d) Submit documentation verifying that the applicant has been accepted into a CODA-accredited postgraduate dental education program.

(e) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(f) Beginning 6 months after the effective date of this subdivision, submit proof of having attended training of at least 1 hour in infection control that includes sterilization of hand pieces, personal protective equipment, and the CDC infection control guidelines.

(g) An educational limited license holder shall not hold themselves out to the public as being engaged in the practice of dentistry, dental therapy, dental hygiene, or as a dental assistant, or provide dental services outside the licensee's postgraduate dental education program.

(h) An educational limited licensed dentist, dental therapist, or dental hygienist may perform dental procedures on patients as directed by the licensee's postgraduate dental education program if the procedures are performed under the general supervision, as that term is defined in R 338.11401(d), of a fully licensed dentist.

(i) An educational limited licensed dental assistant may perform dental procedures on patients as directed by the licensee's postgraduate dental education program if the applicant complies with all of the following:

(i) The procedures are performed under the direct supervision, as that term is defined in R 338.11401(c), of a fully licensed dentist.

(ii) The limited licensed dental assistant has satisfied the 35 hours of additional education in an approved course as required under sections 16611(7) and (11) to (13) of the code, MCL 333.16611.

(iii) The limited licensed dental assistant has successfully completed a course in dental radiography that is substantially equivalent to a course taught in a program approved by the board under R 338.11302, R 338.11303, or R 338.11307.

(2) The board may issue a limited license, under section 16182(2)(b) of the code, MCL 333.16182, for nonclinical services, to an applicant of a dental, dental therapy, dental hygiene, or dental assistant program who functions only in a nonclinical academic research or administrative setting. An applicant for a nonclinical limited license shall comply with all of the following:

(a) Submit the required fee and a completed application on a form provided by the department.

(b) Meet the requirements of R 338.7001 to R 338.7005, any other administrative rules promulgated under the code, and the requirements of section 16174 of the code, MCL 333.16174.

(c) Submit proof of graduation from a dental, dental therapy, dental hygiene, or dental assistant program in the form of a certified copy of a diploma and transcript. If the transcript is issued in a language other than English, the applicant shall submit an original, official translation.

(d) Submit documentation verifying that the applicant has been placed in a nonclinical academic, research, or administrative setting.

(e) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(f) Beginning 6 months after the effective date of this subdivision submit proof of having attended training of at least 1 hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines.

(g) A nonclinical license holder shall not hold themselves out to the public as being engaged in the practice of dentistry, dental therapy, dental hygiene, or as a dental assistant other than in their nonclinical academic, research, or administrative setting, or provide dental services outside of the licensee's nonclinical academic, research, or administrative setting.

(3) The board may issue a limited license, under section 16182(2)(c) of the code, MCL 333.16182, for clinical academic services, to an applicant who is a graduate of a dental, dental therapy, dental hygiene, or dental assistant program, who practices the health profession only in connection with the applicant's employment or other contractual relationship with that academic institution. An applicant for a clinical limited license shall comply with all of the following:

(a) Submit the required fee and a completed application on a form provided by the department.

(b) Meet the requirements of R 338.7001 to R 338.7005, any other rules promulgated under the code, and the requirements of section 16174 of the code, MCL 333.16174.

(c) Submit proof of graduation from a dental, dental therapy, dental hygiene, or dental assistant program in the form of a certified copy of a diploma and transcript. If the transcript is issued in a language other than English, the applicant shall submit an original, official translation.

(d) Submit documentation verifying that the applicant has been offered and accepted employment in an academic institution.

(e) Beginning 6 months after the effective date of this subdivision, submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(f) Beginning 6 months after the effective date of this subdivision, submit proof of having attended training of at least 1 hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines.

(g) A clinical limited license holder shall not hold themselves out to the public as being engaged in the practice of dentistry, dental therapy, dental hygiene, or as a dental assistant other than in connection with the licensee's employment or other contractual

relationship with an academic institution, or provide dental services outside the licensee's employment or other contractual relationship with an academic institution.

(h) A clinical academic limited licensed dentist, dental therapist, or dental hygienist may perform dental procedures on patients in connection with the licensee's employment or contractual relationship with an academic institution if the procedures are performed under the general supervision, as that term is defined in R 338.11401(d), of a fully licensed dentist.

(i) A clinical academic limited licensed dental assistant may perform dental procedures on patients in connection with the licensee's employment or contractual relationship with an academic institution if the applicant complies with all of the following:

(i) The procedures are performed under the direct supervision, as that term is defined in R 338.11401(c), of a fully licensed dentist.

(ii) The limited licensed dental assistant has satisfied the 35 hours of additional education in an approved course as required under section 16611(7), and (11) to (13) of the code, MCL 333.16611.

(iii) The limited licensed dental assistant has successfully completed a course in dental radiography that is substantially equivalent to a course taught in a program approved by the board pursuant to R 338.11303 or R 338.11307.

(4) ~~Limited licenses must be renewed annually and are issued at the discretion of the department.~~ The limited licensed dental assistant, limited licensed dental therapist, limited licensed dental hygienist, and limited licensed dentist for non-clinical services must renew annually and the license is issued at the discretion of the board.

(5) The clinical limited license is restricted to two renewals. After two renewals, in order to practice clinical dentistry, the clinical academic limited licensed dentist shall apply for licensure as a dentist under R 338.11201.

(6) An applicant for renewal of an academic clinical limited license who has been licensed for twelve months immediately preceding the expiration date of the license shall complete not less than 20 hours of continuing education for a dentist, 18 hours of continuing education for a dental therapist, and 12 hours of continuing education for a dental hygienist or dental assistant, which is approved by the board under R 338.11704a and incurred during the 12 months before the end of the license cycle. The continuing education shall comply with the following:

(a) Complete not less than 1 hour of the required continuing education hours in pain and symptom management. Continuing education hours in pain and symptom management may include, but are not limited to, courses in behavior management, psychology of pain, pharmacology, behavior modification, stress management, clinical applications, and drug interactions. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for pain and symptom management.

(b) Complete at least 1 hour of the required continuing education hours in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel.

(c) Complete a minimum of 6 hours, 4 hours for a dental hygienist and dental assistant, of the required continuing education hours in programs directly related to clinical issues including delivery of care, materials used in delivery of care, and pharmacology. Hours earned through volunteer patient or supportive dental services

provided for in R 338.11704a(1)(m) do not count toward the required hours for clinical issues.

(d) Complete at least 1 hour of the required continuing education hours in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for infection control.

(e) Complete a minimum of 6 hours, 4 hours for a dental hygienist and dental assistant, of the required continuing education hours by attending synchronous, live courses or programs, in-person or virtual, that provide for the opportunity of direct interaction between faculty and participants including, but not limited to, lectures, symposia, live teleconferences, workshops, and participation in volunteer patient or supportive dental services provided for in R 338.11704a(1)(m). These courses, with the exception of the volunteer services in R 338.11704a(1)(m), may be counted toward the required courses in clinical issues, including delivery of care, materials used in delivery of care, and pharmacology.

(f) Complete no more than 1/2 of the required continuing education hours asynchronously, noninteractive.

(g) Except for the 1-time training in human trafficking, which may be used to comply with the requirement for the 1-time training and a continuing education requirement, an applicant may not earn continuing education credit for implicit bias training required by R 338.7004, and may not earn credit for a continuing education program or activity that is identical to a program or activity an applicant has already earned credit for during that renewal period.

(h) The submission of the application for renewal constitutes the applicant's certification of compliance with the requirements of this rule. The board may require an applicant or a licensee to submit evidence to demonstrate compliance with this rule. An applicant or licensee shall maintain evidence of complying with the requirements of this rule for a period of 5 years after the date of the submission for renewal. Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221.

(i) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department for the board's consideration not less than 30 days before the last regularly scheduled board meeting before the expiration date of the license. The public notice for the board meetings can be found at: <https://www.michigan.gov/lara/bureau-list/bpl/.health/hp-lic-health-prof/dental>.

History: 1984 AACCS; 2006 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023

R 338.11249 Rescinded.

History: 1984 AACCS; 1989 AACCS.

R 338.11253 Certification of renewal; display.

Rule 1253. A licensee shall display a current certificate of licensure in his or her principal place of practice. A licensee whose practice involves more than 1 office shall have a copy of his or her current certificate of licensure on display at all additional locations.

History: 1984 AACCS; 2021 AACCS.

R 338.11255 Licensure by endorsement of dentist; requirements.

Rule 1255. (1) An applicant who has never held a dental license in this state, who is licensed in another state, and who is not applying for licensure by examination may apply for licensure by endorsement by submitting a completed application on a form provided by the department, together with the requisite fee.

(2) An applicant who is licensed in another state as a dentist is presumed to have met the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets

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the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, and all of the following requirements in subdivisions (a) to (g) of this subrule, subject to subdivisions (h) and (i) of this subrule:

(a) An applicant for licensure by endorsement shall meet 1 of the following requirements:

(i) Has graduated from a dental educational program that meets the standards in R 338.11301, in which the applicant has obtained at least a 2-year DDS degree or DMD degree. The completion of the program must be confirmed by official transcripts from the school, with documentation of graduation.

(ii) If the applicant graduated from a dental educational program that does not comply with the standards provided in R 338.11301, the applicant shall meet 1 of the following requirements for licensure by endorsement in this state:

(A) Has graduated from a minimum 2-year master's degree or certificate program in dentistry that complies with the standards in R 338.11301, in which the applicant has obtained a degree or certificate in a specialty branch of dentistry recognized in R 338.11501, with proof as required in part 5 of these rules.

(B) Has graduated from a minimum 2-year master's degree or certificate program in dentistry that complies with the standards in R 338.11301, in which the applicant has obtained a degree or certificate in a specialty branch of dentistry that has not been recognized in R 338.11501 but is approved by the board.

(b) Has passed all phases of the NBDE or INBDE if the INBDE replaces the NBDE for dentists.

(c) Subject to (h) and (i) of this rule, the applicant submits proof of successful completion of all parts, written and clinical, of the ADEX examination required in R 338.11223(2) and (3) that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency. If the applicant has passed a regional or state board examination the applicant may petition the board for review of the regional examination or a state board examination for a determination that it is substantially equivalent under R 338.11257(5) and (6), to all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA. A passing score on a substantially equivalent examination is the score recommended by the sponsoring organization. However, an applicant shall present evidence to the department of a converted score of 75 or higher on each component of the examination.

(d) Has held a license as a dentist in good standing in another state for 1 year before filing an application in this state.

(e) Discloses each license, registration, or certification in a health profession or specialty issued by any another state, the United States military, the federal government, or another country on the application form.

(f) Satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(g) Submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(h) An applicant who is licensed and practicing as a dentist in another state that required the successful completion of a regional examination or state board, who has been practicing for a minimum of 5 years immediately preceding the application for licensure in this state, meets the requirements of subdivisions (a), (b), and (c) of this subrule.

(i) An applicant who is licensed and practicing as a dentist in another state that does not require the successful completion of a regional examination, and who has been practicing for a minimum of 5 years immediately preceding the application for licensure in this state, meets the requirements of subdivisions (a) and (b) of this subrule. The applicant may petition the board for a determination that the applicant's credentials are substantially equivalent to the requirements for licensure by endorsement instead of taking an examination.

(3) The board may deny an application for licensure by endorsement upon finding the existence of a board action in another state for a violation related to applicable provisions of section 16221 of the code, MCL 333.16221, or upon determining that the applicant does not fulfill the requirements of section 16186 of the code, MCL 333.16186.

History: 1989 AACCS; 2006 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11256 Licensure by endorsement of dentist licensed in Canada; requirements.

Rule 1256. An applicant who currently holds a license as a dentist in Canada but has never been licensed as a dentist in this state may apply for a license by endorsement and is presumed to meet the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, section 16174 of the code, MCL 333.16174, submits a completed application on a form provided by the department together with the requisite fee, and provides proof of all of the following:

(a) The applicant's Canadian license is active and in good standing for 1 year before filing an application in this state.

(b) The applicant has been certified by the NDEB.

(c) The applicant has passed 1 of the following:

(i) The NDEB dental written examination and the ADEX clinical examination.

(ii) All parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency.

(d) The applicant has graduated with 1 of the following:

(i) A BDS, DDS, or DMD degree from a program accredited by the CDAC with all training completed in Canada.

(iii) A DDS degree or DMD degree from a dental educational program that complies with the standards in R 338.11301.

(e) The applicant discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(f) The applicant satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary

proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(g) The applicant submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11257 Licensure by endorsement of dental therapist; requirements.

Rule 1257. (1) An applicant who has never held a dental therapy license in this state and who is not applying by examination may apply for licensure by endorsement by submitting a completed application on a form provided by the department, together with the requisite fee.

(2) An applicant who is licensed as a dental therapist in another state is presumed to have met the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, and all of the following requirements:

(a) Graduated from a dental therapy educational program that meets the standards in R 338.11302 and provides the department with the original, official transcripts of professional education and documentation of graduation for board evaluation.

(j) Passed all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency, with a converted passing score of not less than 75 on each component of the examination.

(b) Verifies completion of not less than 500 hours of clinical practice in dental therapy that substantially meets the requirements of R 338.11218, in a dental therapy educational program that meets the standards in R 338.11302.

(c) Discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(d) Satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(e) Has held a license as a dental therapist that is active and in good standing in another state for 1 year before filing an application in this state.

(f) Submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(3) The board may deny an application for licensure by endorsement upon finding the existence of a board action in another state for a violation related to applicable provisions of section 16221 of the code, MCL 333.16221, or upon determining that the applicant does not fulfill the requirements of section 16186 of the code, MCL 333.16186.

(4) For purposes of this rule, subject to subrules (5) and (6) of this rule, the board may approve a dental therapist clinical regional or state board examination if the examination is substantially equivalent to all parts of the ADEX examination, a comprehensive, competency-based clinical examination developed by the CDCA-WREB-CITA, or a successor organization. A passing score on a substantially equivalent examination is the score recommended by the sponsoring organization. However, an applicant shall present evidence to the department of a converted score of 75 or higher on each component of the examination.

(5) To determine substantial equivalency as specified in subrule (4) of this rule, the board shall consider at least the following factors:

- (a) Subject areas included.
- (b) Detail of material.
- (c) Comprehensiveness.
- (d) Length of an examination.
- (e) Degree of difficulty.

(6) To demonstrate substantial equivalency as specified in subrules (4) and (5) of this rule, an applicant may be required to submit materials, including any of the following:

(a) A copy of the examination booklet or description of the examination content and examination scores issued by the testing agency.

(b) An affidavit from the appropriate state licensing agency that describes the examination and sets forth the legal standards that were in effect at the time of the examination.

(c) An affidavit from a state licensing board or examination agency that describes the examination.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11259 Licensure by endorsement of dental hygienists; requirements. Rule

1259. (1) An applicant who has never held a RDH license in this state and who is not applying by examination may apply for licensure by endorsement by submitting a completed application, on a form provided by the department, together with the requisite fee.

(2) An applicant who is licensed in another state as a dental hygienist is presumed to have met the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, and all of the following requirements in subdivisions (a) to (g) of this subrule, subject to subrules (3) and (4) of this rule:

(a) Has graduated from a dental hygiene educational program that meets the standards provided in R 338.11303 and provides the department with the original, official transcripts of professional education and documentation of graduation for board evaluation.

(b) Has passed all phases of the NBDHE. This requirement is waived for persons who graduated from an accredited school before 1962.

(c) The applicant submits proof of successful completion of all parts, written and clinical, of the ADEX examination required in R 338.11223(2) and (3) that is conducted

by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency. If the applicant has passed a regional examination or state board examination the applicant may petition the board for review of the regional examination or a state board examination for a determination that it is substantially equivalent under R 338.11257(5) and (6), to all parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA. A passing score on a substantially equivalent examination is the score recommended by the sponsoring organization. However, an applicant shall present evidence to the department of a converted score of 75 or higher on each component of the examination.

(d) Holds a license as a dental hygienist that is active and in good standing in another state for at least 1 year before filing an application in this state.

(e) Discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(f) Satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(g) Submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(3) An applicant who is licensed and is practicing as a dental hygienist in another state that required the successful completion of a regional examination or state board, for a minimum of 3 years immediately preceding the application for licensure in this state, meets the requirements of subrule (2)(a), (b), and (c) of this rule.

(4) An applicant who is licensed and is practicing as a dental hygienist in another state that does not require the successful completion of a regional examination for a minimum of 3 years immediately preceding the application for licensure in this state, meets the requirement of subrule (2)(a) and (b) of this rule. The applicant may petition the board for a determination that the applicant's credentials are substantially equivalent to the requirements for licensure by endorsement instead of taking an examination.

(5) An applicant who currently holds a license as a dental hygienist in Canada but who has never been licensed as a dental hygienist in this state may apply for a license by endorsement and is presumed to meet the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, requirements of section 16174 of the code, MCL 333.16174, submits a completed application on a form provided by the department together with the requisite fee, and provides proof of all of the following:

(a) The applicant's Canadian license is active and in good standing for at least 1 year before filing an application in this state.

(b) The applicant has passed 1 of the following:

(i) The National Dental Hygiene Canadian Exam written examination and the ADEX clinical examination.

(ii) All parts, written and clinical, of the ADEX examination that is conducted by the CDCA-WREB-CITA, a successor organization, or by another regional testing agency.

(c) The applicant has graduated from 1 of the following:

(i) A dental hygiene program accredited by CDAC with all training completed in Canada.

(ii) A dental hygiene educational program in compliance with the standards in R 338.11303.

(f) The applicant discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(g) The applicant satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(h) Submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(6) The board may deny an application for licensure by endorsement upon finding the existence of a board action in another state for a violation related to applicable provisions of section 16221 of the code, MCL 333.16221, or upon determining that the applicant does not fulfill the requirements of section 16186 of the code, MCL 333.16186.

History: 1989 AACCS; 2006 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11261 Licensure by endorsement of RDAs; requirements.

Rule 1261. (1) An applicant who has never held a RDA license in this state and who is not applying for licensure by examination may apply for licensure by endorsement by submitting a completed application, on a form provided by the department, together with the requisite fee.

(2) An applicant who is licensed or registered in another state is presumed to have met the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, and all of the following requirements:

(a) Graduated from a dental assistant educational program that meets the standards in R 338.11307 and provides the department with the original, official transcripts of professional education and documentation of graduation for board evaluation.

(b) Submits proof of successful completion of both a written and clinical examination, approved by the board under R 338.11239, with a score of not less than 75, on each section of both the written and clinical examinations.

(c) Submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(d) Holds a license as a dental assistant that is active and in good standing in another state for at least 1 year before filing an application in this state.

(e) Discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(f) Satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(3) An applicant who currently holds a license as a dental assistant in Canada but who has never been licensed as a dental assistant in this state may apply for a license by endorsement and is presumed to meet the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, the requirements of section 16174 of the code, MCL 333.16174, submits a completed application on a form provided by the department together with the requisite fee, and provides proof of all of the following:

(a) The applicant's Canadian license is active and in good standing for 1 year before filing an application in this state.

(b) The applicant has met all the requirements of 1 of the following licensure paths:

(i) The applicant has graduated from a dental assistant educational program in Canada with all training completed in Canada and meets all of the following requirements:

(A) The applicant has passed the National Dental Assistant Examining Board examination in Canada.

(B) The applicant has 2 or more years of dental assisting experience.

(C) The applicant has completed the Washtenaw Community College Alternative Dental Assistant Education Project pathway or a substantially similar pathway approved by the board.

(D) The applicant has completed the board written examination, approved by the board under R 338.11239, with a score of not less than 75.

(ii) The applicant graduated from a dental assistant educational program that complies with the standards in R 338.11307, and completed both a written and clinical examination, approved by the board under R 338.11239, with a score of not less than 75, on each section of both the written and clinical examination.

(c) The applicant discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(d) The applicant satisfies the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(e) The applicant submits proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.

(4) The board may deny an application for licensure by endorsement upon finding the existence of a board action in another state for a violation related to applicable provisions of section 16221 of the code, MCL 333.16221, or upon determining that the applicant does not fulfill the requirements of section 16186 of the code, MCL 333.16186.

History: 1989 AACS; 2006 AACS; 2011 AACS; 2021 AACS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11263 Relicensure requirements; dentists.

Rule 1263. (1) An applicant whose dentist license in this state has lapsed, under section 16201(3) or (4) of the code, MCL 333.16201, as applicable, may be relicensed by complying with the following requirements:

For a dentist who has let a license in this state lapse:	Lapsed 0-3 years	Lapsed more than 3 years, but less than 5 years	Lapsed 5 or more years
(a) Submit a completed application, on a form provided by the department, together with the requisite fee.	√	√	√
(b) Establish that the applicant is of good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√
(c) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(d) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.	√	√	√
(e) Submit proof of having completed 60 hours of continuing education in courses and programs approved by the board as required under R 338.11701, all of which were earned within the 3-year period immediately preceding the application for licensure. If the continuing education hours submitted with the application are deficient, the applicant has 2 years after the date of the application to complete the deficient hours. The department shall hold the application and not issue the license until the applicant has completed the continuing education requirements. The 60 hours of continuing education must include all of the following: (i) Not less than 3 hours in pain and symptom management.	√	√	√

<p>(ii) One hour in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses.</p> <p>(iii) One hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's</p>			
(f) Complete a 1-time training in identifying victims of human trafficking that meets the standards in R 338.11271.	√	√	√
(g) Complete a 1-time training in opioids and other controlled substances awareness as required in R 338.3135.	√	√	√
(h) Meet the English language requirement under R 338.7002b and the implicit bias training required in R 338.7004.	√	√	√
(i) Meet the implicit bias training requirement under R 338.7004.	√	√	√
(j) Verify with the application for relicensure, that the applicant complies with R 338.11801 to R 338.11821, and specify the make of each amalgam separator in the dentist's office and the year that each separator was installed, if the applicant is subject to R 338.11801 to R 338.11821.	√	√	√
<p>(k) An applicant who is or has ever been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following:</p> <p>(i) Disclose each license, registration, or certification on the application form.</p> <p>(ii) Satisfy the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.</p>	√	√	√
<p>(l) If an applicant's license has lapsed for more than 3 years but less than 5 years, the applicant shall meet either of the following:</p> <p>(i) Retake and pass the ADEX clinical and written examination for dentists developed and scored by the CDCA-WREB-CITA or another testing agency with a passing score of not less than 75, within the 2-year period immediately preceding the application for relicensure.</p> <p>(ii) Provide the department documentation that</p>		√	

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<p>the applicant holds or held a valid and unrestricted dentist’s license in another state or in Canada within 3 years immediately preceding the application for relicensure.</p>			
<p>(4m) If an applicant’s license has lapsed 5 or more years, the applicant shall provide the department with documentation that proves the applicant holds or held a valid and unrestricted dentist license in another state or Canada within the 3 years immediately preceding the application for relicensure and meets all of the requirements in subdivisions (a) to (jk) of this subrule or complies with all of the following:</p> <p>(i) Meets the requirements of section 16174 of the code, MCL 333.16174, and the rules.</p> <p>(iii) Provides proof of graduation from a dental educational program that meets the standards in R 338.11301 in which the applicant obtained a DDS or DMD degree.</p> <p>(iv) Provides proof of having ever passed all parts of the NBDE, or INBDE if the INBDE replaces the NBDE, conducted and scored by the JCNDE to qualify for the dental clinical and written examination.</p> <p>(v) Provides proof of having passed the ADEX dental clinical and written examination conducted and scored by the CDCA-WREB-CITA or another regional agency within the 2-year period immediately preceding the application for relicensure.</p>			<p>√</p>

(2) If relicensure is granted and it is determined that a sanction has been imposed by another state, the United States military, the federal government, or another country, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11265 Relicensure requirements; dental therapists.

Rule 1265. (1) An applicant whose dental therapist license in this state has lapsed under section 16201(3) or (4) of the code, MCL 333.16201, as applicable, may be relicensed by complying with the following requirements:

For a dental therapist who has let a license in this state lapse:	Lapsed 0-3 years	Lapsed more than 3 years, but less than 5 years	Lapsed 5 or more years
(a) Submit a completed application, on a form provided by the department, together with the requisite fee.	√	√	√
(b) Establish that the applicant is of good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√
(c) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(d) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.	√	√	√
(e) Submit proof of having completed 35 hours of continuing education in courses and programs approved by the board as required under R 338.11703, all of which were earned within the 2-year period immediately preceding the application for licensure. If the continuing education hours submitted with the application are deficient, an applicant has 2 years after the date of the application to complete the deficient hours. The department shall hold the application and not issue the license until the applicant has completed the continuing education requirements. The 35 hours of continuing education must include all of the following: (i) Not less than 2 hours in pain and symptom management. (ii) One hour in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses. (iv) One hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines.	√	√	√
(f) Submit proof of having completed a 1-time training in identifying victims of human trafficking that meets the standards in R 338.11271.	√	√	√

<p>(g) Submit proof of having completed a 1-time training in opioids and other controlled substances awareness as required in R 338.3135. Meet the English language requirement under R 338.7002b.</p>	√	√	√
<p>(h) Meet the English language requirement under R 338.7002b and the implicit bias training required in requirement under R 338.7004.</p>	√	√	√
<p>(i) An applicant who is or has ever been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following: (i) Disclose each license, registration, or certification on the application form. (iii) Satisfy the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.</p>	√	√	√
<p>(j) If an applicant's license has lapsed for more than 3 years but less than 5 years, the applicant shall meet either of the following: (i) Retake and pass a comprehensive, competency-based clinical examination approved by the department with a converted passing score of not less than 75, within the 2-year period immediately preceding the application for relicensure. (ii) Provide the department documentation that the applicant holds or held a valid and unrestricted dental therapist's license in another state within 3 years immediately preceding the application for relicensure.</p>		√	
<p>(k) If an applicant's license has lapsed for 5 years or more, the applicant shall provide the department with documentation that proves the applicant holds or held a valid and unrestricted dental therapist license in another state within the 3 years immediately preceding the application for relicensure and meets all of the requirements in subdivisions (a) to (i) of this subrule or complies with all of the following: (i) Meets the requirements of section 16174 of the code, MCL 333.16174, and the rules. (ii) Provides proof of graduation from a dental therapy program that meets the standards in R 338.11302. () Provide proof of having passed a comprehensive, competency-based dental therapy clinical examination as required in R 338.11213,</p>			√

within the 2-year period immediately preceding the application for relicensure.			
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(2) If relicensure is granted and it is determined that a sanction has been imposed by another state, the United States military, the federal government, or another country, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11267 Relicensure requirements; RDHs.

Rule 1267. (1) An applicant whose RDH license in this state has lapsed under section 16201(3) or (4) of the code, MCL 333.16201, as applicable, may be relicensed by complying with the following requirements:

For a RDH who has let a license in this state lapse:	Lapsed 0-3 years	Lapsed more than 3 years, but less than 5 years	Lapsed 5 or more years
(a) Submit a completed application, on a form provided by the department, together with the requisite fee.	√	√	√
(b) Establish that the applicant is of good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√
(c) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(d) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.	√	√	√
(e) Submit proof of having completed 36 hours of continuing education in courses and programs approved by the board as required under R 338.11704, all of which were earned within the 3-year period preceding the date of application for relicensure. If the continuing education hours submitted with the application are deficient, the applicant has 2 years after the date of the application to complete the deficient hours. The department shall hold the application and not issue the license until the applicant has completed the continuing education requirements. The 36 hours of continuing education must include all of the following:	√	√	√

<p>(i) Not less than 2 hours in pain and symptom management.</p> <p>(ii) One hour in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses.</p> <p>(ii) One hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's</p>			
<p>(f) Submit proof of having completed a 1-time training in identifying victims of human trafficking that meets the standards in R 338.11271.</p>	√	√	√
<p>(g) Meet the English language requirement under R 338.7002b and the implicit bias training required in R 338.7004.</p>	√	√	√
<p>(h) Meet the implicit bias training requirement under R 338.7004.</p>	√	√	√
<p>(hi) An applicant who is or has ever been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following:</p> <p>(i) Disclose each license, registration, or certification on the application form.</p> <p>(ii) Satisfy the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.</p>	√	√	√
<p>(ij) If an applicant's license is lapsed for more than 3 years but less than 5 years, the applicant shall meet 1 of the following:</p> <p>(i) Provide proof of having passed the ADEX hygiene clinical and written examination conducted and scored by the CDCA-WREB-CITA or another regional agency, within the 2-year period immediately preceding the application for relicensure.</p> <p>(ii) Provide the department documentation that the applicant holds or has held a valid and unrestricted license in another state or in Canada within 3 years immediately preceding the application for licensure.</p>		√	
<p>(jk) If an applicant's license has lapsed for 5 years or more, the applicant shall provide the department with documentation that proves the applicant holds</p>			√

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<p>or held a valid and unrestricted license in another state or in Canada within the 3 years immediately preceding the application for relicensure and meets all of the requirements in subrules subdivisions (a) to (hi) of this subrule or complies with all of the following:</p> <p>(i) Meets the requirements of section 16174 of the code, MCL 333.16174, and the rules.</p> <p>(ii) Provides proof of graduation from a dental hygiene educational program that meets the standards in R 338.11303.</p> <p>(iii) Provides proof of having ever passed all parts of the NBDHE conducted and scored by the JCNDE to qualify for the dental hygiene clinical and written examination. This paragraph does not apply to an applicant who graduated from a dental hygiene program before 1962.</p> <p>(iv) Provides proof of having passed the ADEX hygiene clinical and written examination conducted and scored by the CDCA-WREB-CITA or another regional testing agency, within the 2-year period immediately preceding the application for relicensure.</p>			
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(2) If relicensure is granted and it is determined that a sanction has been imposed by another state, the United States military, the federal government, or another country, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

History: 1989 AACs; 2011 AACs; 2021 AACs; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11269 RDA relicensure requirements.

Rule 1269. (1) An applicant whose RDA license in this state has lapsed under section 16201(3) or (4) of the code, MCL 333.16201, as applicable, may be relicensed by complying with the following requirements:

For a RDA who has let a license in this state lapse:	Lapsed 0-3 years	Lapsed more than 3 years, but less than 5 years	Lapsed 5 or more years
(a) Submit a completed application, on a form provided by the department, together with the requisite fee.	√	√	√
(b) Establish that the applicant is of good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√

(c) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(d) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the license.	√	√	√
(e) Submit proof of having completed 36 hours of continuing education in courses and programs approved by the board as required under R 338.11704, all of which were earned within the 3-year period immediately preceding the date of the application for relicensure. If the continuing education hours submitted with the application are deficient, the applicant has 2 years after the date of the application to complete the deficient hours. The department shall hold the application and not issue the license until the applicant has completed the continuing education requirements. The 36 hours of continuing education must include all of the following: (i) Not less than 2 hours in pain and symptom management. (ii) One hour in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses. (iii) One hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines.	√	√	√
(f) Completed a 1-time training in identifying victims of human trafficking that meets the standards in R 338.11271.	√	√	√
(g) Meet the English language requirement under R 338.7002b and the implicit bias training required in R 338.7004.	√	√	√
(h) Meet the implicit bias training requirement under R 338.7004.	√	√	√
(i) An applicant who is _____ or has ever been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following: (i) Disclose each license, registration, _____ or certification on the application form. (ii) Satisfy the requirements of section 16174(2)	√	√	√

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<p>of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.</p>			
<p>(j) If an applicant’s license has lapsed for more than 3 years but less than 5 years, the applicant shall meet either of the following:</p> <p>(i) Pass a board-approved written and clinical examination that meets the requirements of R 338.11239, within the 2-year period immediately preceding the application for relicensure.</p> <p>(ii) Provide the department documentation that the applicant holds or held a valid and unrestricted license in another state or in Canada within the 3 years immediately preceding the application for relicensure.</p>		√	
<p>(k) If an applicant’s license has lapsed for 5 years or more, the applicant shall provide the department with documentation that proves the applicant holds or held a valid and unrestricted license in another state or in Canada within the 3 years immediately preceding the application for relicensure and meets all of the requirements in subdivisions (a) to (h) of this subrule or complies with all of the following:</p> <p>(i) Meets the requirements of section 16174 of the code, MCL 333.16174, and the rules.</p> <p>(ii) Provides proof of graduation or certification from an educational program that meets the standards in R 338.11307.</p> <p>(iv) Provides proof of having passed a board-approved clinical examination that meets the requirements of R 338.11239.</p> <p>(v) Provides proof of having passed a board-approved written examination that meets the requirements of R 338.11239, within the 2-year period immediately preceding the application for relicensure.</p>			√

(2) If relicensure is granted and it is determined that a sanction has been imposed by another state, the United States military, the federal government, or another country, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

History: 2021 AACs; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11271 Training standards for identifying victims of human trafficking; requirements.

Rule 1271. (1) Pursuant to section 16148 of the code, MCL 333.16148, an individual seeking licensure, registration, or who is licensed or registered shall complete training in identifying victims of human trafficking that meets the following standards:

(a) Training content covers all of the following:

(i) Understanding the types and venues of human trafficking in this state or the United States.

(ii) Identifying victims of human trafficking in health care settings.

(iii) Identifying the warning signs of human trafficking in health care settings for adults and minors.

(iv) Specifying resources for reporting the suspected victims of human trafficking.

(b) Acceptable providers or methods of training include any of the following:

(i) Training offered by a nationally recognized or state-recognized health-related organization.

(ii) Training offered by, or in conjunction with, a state or federal agency.

(iii) Training obtained in an educational program that has been approved by the board for initial licensure, or by a college or university.

(iv) Reading an article related to the identification of victims of human trafficking that meets the requirements of subdivision (a) of this subrule and is published in a peer review journal, health care journal, or professional or scientific journal.

(c) Acceptable modalities of training include any of the following: (i) Teleconference or webinar.

(ii) Online presentation.

(iii) Live presentation.

(iv) Printed or electronic media.

(2) The department may select and audit a sample of individuals and request documentation of proof of completion of training. If audited by the department, an individual shall provide an acceptable proof of completion of training, including either of the following:

(a) Proof of completion certificate issued by the training provider that includes the date, provider name, name of training, and individual's name.

(b) A self-certification statement by an individual. The certification statement must include the individual's name and either of the following:

(i) For training completed pursuant to subrule (1)(b)(i) to (iii) of this rule, the date, training provider name, and name of training.

(ii) For training completed pursuant to subrule (1)(b)(iv) of this rule, the title of article, author, publication name of peer review journal, health care journal, or professional or scientific journal, and date, volume, and issue of publication, as applicable.

(3) Pursuant to section 16148 of the code, MCL 333.16148, the requirements specified in subrule (1) of this rule apply for license or registration renewals beginning with the first renewal cycle after January 6, 2017, and for initial licenses or registrations issued after January 6, 2022.

History: 2021 AACCS.

PART 3. EDUCATION

R 338.11301 Approval of dental educational programs; accreditation standards; adoption by reference.

Rule 1301. (1) The board adopts by reference the standards of CODA of the ADA, as set forth in the following publications:

- (a) "Accreditation Standards for Dental Education Programs," copyright 2021.
 - (b) "Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Surgery," copyright 2021.
 - (c) "Accreditation Standards for Advanced Dental Education Programs in Endodontics," copyright 2019.
 - (d) "Accreditation Standards for Advanced Dental Education Programs in Orthodontics and Dentofacial Orthopedics," copyright 2019.
 - (e) "Accreditation Standards for Advanced Dental Education Programs in Prosthodontics," copyright 2020.
 - (f) "Accreditation Standards for Advanced Dental Education Programs in Periodontics," copyright 2020.
 - (g) "Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry," copyright 2021.
 - (h) "Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Pathology," copyright 2021.
 - (i) "Accreditation Standards for Advanced Dental Education Programs in Oral Medicine," copyright 2020.
 - (j) "Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain," copyright 2020.
 - (k) "Accreditation Standards for Advanced Dental Education Programs in Dental Public Health," copyright 2020.
 - (l) "Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Radiology," copyright 2020.
 - (m) "Accreditation Standards for Advanced Dental Education Programs in Dental Anesthesiology," copyright 2020.
- (2) A dental educational program accredited by CODA, or a successor organization, is considered board approved.
- (3) These standards may be obtained at no cost from CODA of the ADA, 211 East Chicago Avenue, Chicago, Illinois, 60611-2678 or at no cost from the association's website at <http://www.ada.org>. Copies of these standards are available at 10 cents per page for inspection and distribution, from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11302 Approval of dental therapy educational programs; accreditation standards; adoption by reference.

Rule 1302. (1) The board adopts by reference the standards of CODA of the ADA, as set forth in the publication titled “Accreditation Standards for Dental Therapy Education Programs,” effective February 6, 2015, copyright 2021.

(2) A dental therapy educational program that is accredited by CODA or a successor organization is considered board approved.

(3) For an applicant applying for a dental therapy license, upon application for licensure on a department form, the board shall review and may approve an applicant’s dental therapy education program if the program substantially conforms to the dental therapy education program CODA standards at the time of graduation of the dental therapy applicant.

(4) A dental therapy educational program must be taught at a postsecondary education institution that meets the standards in R 338.11302a.

(5) CODA standards may be obtained at no cost from CODA of the ADA, 211 East Chicago Avenue, Chicago, Illinois, 60611-2678 or at no cost from the association's website at <http://www.ada.org>. Copies of these standards are available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11302a Higher education institutions; accreditation standards; adoption by reference.

Rule 1302a. (1) A higher education institution meets the requirements of R 338.11302(4) if it is accredited by the accrediting body of the region in which the institution is located, and the accrediting body meets either the recognition policy and procedures of the Council for Higher Education Accreditation (CHEA) or the recognition procedures and criteria of the United States Department of Education.

(2) The board adopts by reference the procedures and criteria for recognizing accrediting agencies of the United States Department of Education, 34 CFR part 602, and the CHEA Recognition of Accrediting Organizations Policy and Procedures, copyright 2021. Copies of the procedures and criteria of the United States Department of Education and the policy and procedures of CHEA are available for inspection and distribution at no cost from the website for the United States Department of Education at the Office of Postsecondary Education, <http://www.ed.gov/about/offices/list/OPE/index.html> and the CHEA website at <http://www.chea.org>. Copies are also available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Bureau of Professional Licensing, Department of Licensing and Regulatory Affairs, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11303 Approval of dental hygiene educational programs; accreditation standards; adoption by reference.

Rule 1303. (1) The board adopts by reference the standards of CODA of the ADA, as set forth in the publication titled "Accreditation Standards for Dental Hygiene Education Programs," effective January 1, 2013, copyright 2019. A dental hygiene educational program accredited by CODA is considered board approved. CODA is the only accreditation accepted by the board.

(2) These standards may be obtained at no cost from CODA of the ADA, 211 East Chicago Avenue, Chicago, Illinois, 60611-2678 or at no cost from the association's website at <http://www.ada.org>. Copies of these standards are available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11307 Approval of dental assisting schools educational programs; standards; adoption by reference.

Rule 1307. (1) The board adopts by reference the standards of CODA of the ADA, as set forth in the publication titled "Accreditation Standards for Dental Assisting Education Programs," copyright 2021. A dental education program accredited by CODA is approved by the board. CODA is the only accreditation accepted by the board.

(2) These standards may be obtained at no cost from CODA of the ADA, 211 East Chicago Avenue, Chicago, Illinois, 60611-2678 or at no cost from the association's website at <http://www.ada.org>. Copies of these standards are available for inspection and distribution at 10 cents per page from the Board of Dentistry, Bureau of Professional Licensing, Michigan Department of Licensing and Regulatory Affairs, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 1984 AACCS; 1997 AACCS; 2006 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

PART 4A. DELEGATION, SUPERVISION, ASSIGNMENT OF UDAs, RDAs, AND RDHs

R 338.11401 Definitions.

Rule 1401. As used in this part:

(a) "Assignment" means a dentist designates a patient of record upon whom services are to be performed and describes the procedures to be performed. Unless assignment is designated in these rules under general or direct supervision, the dentist need not be physically present in the office when the procedures are being performed.

(b) "Delegation" means an authorization granted by a licensee to a licensed or unlicensed individual to perform selected acts, tasks, or functions that fall within the

scope of practice of the delegator and that are not within the scope of practice of the delegatee and that, in the absence of the authorization, would constitute illegal practice of a licensed profession.

(c) “Direct supervision” means that a dentist complies with all of the following:

(i) Designates a patient of record upon whom the procedures are to be performed and describes the procedures to be performed.

(ii) Examines the patient before prescribing the procedures to be performed and upon completion of the procedures.

(iii) Is physically present in the office when the procedures are being performed.

(d) “General supervision” means that a dentist complies with both of the following:

(i) Designates a patient of record upon whom services are to be performed.

(ii) Is physically present in the office when the procedures are being performed.

(e) “Patient of record” means a patient who has been examined, evaluated, and diagnosed with a resulting treatment plan by a dentist, or dental therapist to the extent authorized by the supervising dentist, in-person at least once every 24 months. A patient of record includes a patient getting radiographic images by allied dental personnel with training pursuant to R 338.11411(4)(a) after receiving approval from the assigning dentist or dental therapist.

History: 1984 AACs; 1998-2000 AACs; 2014 AACs; 2021 AACs; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11402 Rescinded.

History: 2014 AACs; 2021 AACs.

R 338.11403 Rescinded.

History: 1984 AACs; 1989 AACs; 2006 AACs; 2014 AACs; 2021 AACs.

R 338.11404 Rescinded.

History: 2006 AACs; 2011 AACs; 2021 AACs.

R 338.11404a Rescinded.

History: 2011 AACs; 2014 AACs; 2021 AACs.

R 338.11405 Rescinded.

History: 1984 AACs; 1998-2000 AACs; 2006 AACs; 2011 AACs; 2014 AACs; 2021 AACs.

R 338.11405a Rescinded.

History: 2006 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS.

R 338.11405b Rescinded.

History: 2014 AACCS; 2021 AACCS.

R 338.11405c Rescinded.

History: 2014 AACCS; 2021 AACCS.

R 338.11406 Rescinded.

History: 1984 AACCS; 2006 AACCS; 2014 AACCS; 2014 AACCS; 2021 AACCS.

R 338.11408 Rescinded.

History: 1984 AACCS; 1998-2000 AACCS; 2006 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS.

R 338.11409 Rescinded.

History: 2006 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS.

R 338.11410 Rescinded.

History: 2014 AACCS; 2021 AACCS.

R 338.11411 Delegated and assigned dental procedures for allied dental personnel.

Rule. 1411. (1) Before a dentist may delegate a function to a UDA the UDA shall meet both of the following:

(a) Submit proof of current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards equivalent to those established by the AHA, earned within the 2-year period before receiving the delegated or assigned function.

(b) Submit proof of attending training of at least 1 hour in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines.

(2) Before a dentist delegates functions to a UDA the dentist shall provide to the UDA a copy of the delegation and assigned duties in Table 1 and explain the levels of supervision.

(3) Except for the functions a dentist may delegate to a dental therapist, a dentist or dental therapist may only assign or delegate procedures to an unlicensed or licensed individual, including a UDA, RDA, or RDH under section 16611 of the code, MCL 333.16611, as provided in Table 1.:

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(4) Table 1 - Delegated and Assigned Dental Procedures for Allied Dental Personnel

	U UDA	R RDA	R RDH	Procedure
(a)	A	A	A	Operating of dental radiographic equipment. A UDA shall successfully complete a course in dental radiography that is substantially equivalent to a course taught in a program approved by the board pursuant to R 338.11302, R 338.11303, or R 338.11307. A dentist may delegate necessary radiographs for a new patient to a UDA, RDA or RDH.
(b)	G	A	A	Instructing in the use and care of dental appliances.
(c)	G	A	A	Taking impressions or digital scans for study and opposing models and matrices for temporary crowns and bridges.
(d)	G	A	A	Applying nonprescription topical anesthetic solution.
(e)	G	A	A	Trial sizing of orthodontic bands.
(f)	D	A	A	Placing, removing, and replacing orthodontic elastic or wire separators, arch wires, elastics, and ligatures.
(g)	D	A	A	Dispensing orthodontic aligners.
(h)	D	D	A	Removing orthodontic bands, brackets, and adhesives with hand instruments only. Use of high-speed rotary instruments is not in the scope of practice of a UDA, RDA, or RDH.
(i)	D**	A	A	Polishing assigned teeth with a slow-speed rotary hand piece immediately before an acid etch procedure.
(j)	D**	G*	G*	Etching and placing adhesives before placement of orthodontic brackets and attachment for aligners.
(k)	D**	D	D	Cementing orthodontic bands or initial placement of orthodontic brackets and attachments for aligners.
(l)		A		Removing excess temporary cement from supragingival surfaces of a tooth with hand instruments only.

(m)			A	Removing orthodontic or other cements from supragingival or subgingival surfaces with hand instruments or powered scaling instruments.
(n)	D**	A	A	Providing nutritional counseling for oral health and maintenance.
(o)	A	A	A	Providing commonly accepted medical emergency procedures.
(p)	D**	A	A	Inspecting and charting the oral cavity using a mouth mirror and radiographs including the classifying of occlusion.
(q)		A	A	Placing and removing dental dam.
(r)	D**	A	A	Applying anticariogenic agents including, but not limited to, sealants, fluoride varnish, and fluoride applications. UDAs may not place sealants.
(s)		A	A	Polishing and contouring of sealants with a slow-speed rotary hand piece immediately following a procedure for occlusal adjustment.
(t)		A		Fabricating temporary restorations, temporary crowns, and temporary bridges.
(u)		A	A	Placing a nonmetallic temporary or sedative restoration with non-tissue cutting instruments.
(v)	D**	A	A	Temporarily cementing and removing temporary crowns and bands.
(w)		G*	A	Preliminary examination including performing pulp vitality testing.
(x)		G*	A	Applying desensitizing agents.
(y)	D**	G*	A	Taking impressions for intraoral appliances including bite registrations.
(z)		G*		Placing and removing matrices and wedges.
(aa)		G*		Applying cavity liners and bases.

(bb)		G*		Drying endodontic canals with absorbent points.
(cc)		G*		Placing and removing nonepinephrine retraction cords or materials.
(dd)		D	A	Removing sutures.
(ee)		D	A	Applying and dispensing in-office bleaching products.
(ff)		G	G	Before cementation by the dentist, adjusting and polishing contacts and occlusion of indirect restorations.
(gg)		D***		Placing, condensing, and carving amalgam restorations.
(hh)		D***		Placing Class I resin bonded restorations, occlusal adjustment, finishing and polishing with non-tissue cutting slow-speed rotary hand pieces.
(ii)		D***		Taking final impressions for indirect restorations and prosthesis including bite registration, intra-oral imaging, and in-office fabrication of restorations.
(jj)		D	D	Assisting and monitoring the administration of nitrous oxide analgesia by a dentist or thean RDH qualified to administer nitrous oxide under Section 16611(4) of the code and subdivision (uu) . A dentist shall assign these procedures only if the RDA or RDH who is not qualified to administer nitrous oxide has successfully completed an approved course that meets the requirements of section 16611(7) of the code, MCL 333.16611, with a minimum of 5 hours of didactic instruction. The levels must be preset by the dentist or an RDH qualified to administer nitrous oxide and must not be adjusted by the RDA or RDH who is not qualified to administer nitrous oxide except in case of an emergency, in which case the RDA or RDH may turn off the nitrous oxide and administer 100% oxygen. As used in this subdivision, “assisting” means setting up equipment and placing the face mask. Assisting does not include titrating and turning the equipment on or off, except in the case of an emergency in which circumstances the RDA or RDH not qualified to administer nitrous oxide may turn off the nitrous oxide and administer 100% oxygen.
(kk)			A	Removing accretions and stains from the surfaces of the teeth and applying topical agents essential to complete prophylaxis.
(ll)			A	Root planing, debridement, deep scaling, and removal of calcareous deposits.

(mm)			A	Polishing and contouring restorations.
(nn)			A	Charting of the oral cavity, including all the following: periodontal charting, intra oral and extra oral examining of the soft tissue, charting of radiolucencies or radiopacities, existing restorations, and missing teeth.
(oo)			A	Applying topical anesthetic agents by prescription of the dentist.
(pp)			A	Removing excess cement from tooth surfaces.
(qq)			A	Placing subgingival medicaments.
(rr)			A	Micro abrasion of tooth surfaces to remove defects, pitting, or deep staining.
(ss)			D	Performing soft tissue curettage with or without a dental laser.
(tt)	D	G	G	Taking digital scans for final restorations or intra-oral appliances.
(uu)			D****	<p>Administering intra oral block and infiltration anesthesia, or no more than 50% nitrous oxide analgesia, or both, to a patient who is 18 years of age or older if the RDH has met all of the following requirements:</p> <p>(i) Successfully completed an approved course that meets the requirements in section 16611(4) of the code, MCL 333.16611, in the administration of local anesthesia, with a minimum of 15 hours didactic instruction and 14 hours clinical experience.</p> <p>(ii) Successfully completed a state or regional board administered written examination in local anesthesia within 18 months after completion of the approved course in paragraph (i) of this subdivision.</p> <p>(iii) Successfully completed an approved course that meets the requirements in section 16611(4) of the code, MCL 333.16611, in the administration of nitrous oxide analgesia, with a minimum of 4 hours didactic instruction and 4 hours clinical experience.</p> <p>(v) Successfully completed a state or regional board administered written examination in nitrous oxide analgesia, within 18 months after completion of the approved course in paragraph</p>

				(iii) of this subdivision. (v) Maintains and provides evidence of current certification in BLS or ACLS that meets the standards contained in R 338.11705.
(vv)	D	A	A	Using a glucometer to measure blood glucose according to the manufacturer's instructions, based on the patient's health history and medical status.

(5) As used in subrule (4) of this rule:

- (a) "A" means assignment, as that term is defined in R 338.11401.
- (b) "D" means direct supervision, as that term is defined in R 338.11401.
- (c) "G" means general supervision, as that term is defined in R 338.11401.

* A dentist shall assign these procedures to an RDA and RDH only if the allied dental personnel has successfully completed an approved course that meets the requirements in section 16611(12) and (13) of the code, MCL 333.16611, and contains a minimum of 10 hours of didactic and clinical instruction.

** A dentist shall delegate these procedures to a UDA only if the UDA has successfully completed an in-person or virtual training with performance evaluations on the following functions:

- Polishing assigned teeth with a slow-speed rotary hand piece immediately before an acid etch procedure.
- Etching and placing adhesives before placement of orthodontic brackets and attachment for aligners.
- Cementing orthodontic bands or initial placement of orthodontic brackets and attachments for aligners.
- Providing nutritional counseling for oral health and maintenance.
- Inspecting and charting the oral cavity using a mouth mirror and radiographs including the classifying of occlusion.
- Applying anticariogenic agents including, but not limited to, sealants, fluoride varnish, and fluoride applications.
- Temporarily cementing and removing temporary crowns and bands.
- Taking impressions for intraoral appliances including bite registrations.

*** A dentist shall assign these procedures to a RDA only if the RDA has successfully completed an approved course that meets the requirements in section 16611(11) of the code, MCL 333.16611, and contains a minimum of 20 hours of didactic instruction followed by a comprehensive clinical experience of sufficient duration that validates clinical competence through a criterion-based assessment instrument.

**** The department fee for certification of completion of the requirements is \$10.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

PART 4B. SUPERVISION OF DENTAL THERAPISTS

R 338.11415 Definitions

R 1415. As used in this part, “supervise” or “supervision” means overseeing or participating in the work of another individual by a health professional licensed under article 15 of the code, MCL 333.16101 to 333.18838, in circumstances where at least all of the following conditions exist:

(a) Continuous availability of direct communication in person or by radio, telephone, or telecommunication between the supervised individual and a health professional licensed in this state.

(b) Availability of a health professional licensed in this state on a regularly scheduled basis to review the practice of the supervised individual, to provide consultation to the supervised individual, to review records, and to further educate the supervised individual in the performance of his or her functions.

(c) The provision by the supervising health professional licensed in this state of predetermined procedures and drug protocol.

History: 2021 AACCS.

R 338.11417 Practice agreement; care or services.

Rule 1417. (1) A dental therapist may practice only under the supervision of a dentist licensed and practicing in this state through a written practice agreement that is signed by the dental therapist and dentist licensed and practicing in this state and that meets all the requirements in section 16655 of the code, MCL 333.16655.

(2) A dentist may supervise no more than 4 dental therapists under section 16655(5) of the code, MCL 333.16655.

(3) A dental therapist may supervise no more than 3 UDAs or RDAs and 2 RDHs in any 1 health setting as allowed in a written practice agreement. The practice agreement must define the type of supervision required by the dental therapist.

(4) A dentist may not authorize a dental therapist to do either of the following:

(a) Prescribe controlled substances.

(b) Administer phentolamine mesylate.

(5) A dentist may authorize a dental therapist to provide care or services described in section 16656(1)(a) to (w) of the code, MCL 333.16656.

(6) A dental therapist may perform other services and functions agreed to by the supervising dentist for which the dental therapist is trained that are ancillary to those care and services described in section 16656(1)(a) to (w) of the code, MCL 333.16656.

(7) Subject to section 16657 of the code, MCL 333.16657, and the dental therapist’s written practice agreement, if the patient requires treatment that exceeds the dental therapist’s capabilities or the scope of practice as a dental therapist, the dentist or dental therapist shall refer the patient to an appropriate provider within a reasonable distance.

(8) Subject to sections 16655 and 16656(2) of the code, MCL 333.16655 and 333.16656, and the dental therapist’s written practice agreement, a dental therapist’s authority to delegate to allied dental personnel may not exceed a dentist’s authority to delegate to allied dental personnel under R 338.11411.

History: 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11419 Health settings.

Rule 1419. (1) A dental therapist may provide care and services in any health setting included in section 16654 of the code, MCL 333.16654.

(2) The health setting in section 16654(f) of the code, MCL 333.16654, includes a geographic area that is designated as a dental shortage area by the United States Department of Health and Human Services in geographic health professional shortage areas based on geographic area and population groups.

(3) The computation to determine 50% of the annual total patient base of the dental therapist in section 16654(i) of the code, MCL 333.16654, includes any patient who has been seen at least once by the dental therapist.

History: 2021 AACCS.

PART 5. SPECIALTIES

R 338.11501 Specialties; recognition by the board.

Rule 1501. (1) The department on behalf of the board may issue a health profession specialty license in all of the following branches of dentistry as specialties:

- (a) Endodontics.
- (b) Oral and maxillofacial surgery.
- (c) Oral and maxillofacial pathology.
- (d) Orthodontics and dentofacial orthopedics.
- (e) Pediatric dentistry.
- (f) Periodontics.
- (g) Prosthodontics.

(2) In addition to the specialties listed in subrule (1) of this rule, the department may issue a health profession specialty license in the following branches of dentistry:

- (a) Dental anesthesiology.
- (b) Dental public health.
- (c) Oral and maxillofacial radiology.
- (d) Oral Medicine
- (e) Orofacial pain.

(3) Each branch of a dental specialty that is licensed by the board is defined in these rules and by the standards set forth by CODA under R 338.11301.

(4) An applicant who currently holds a license as a dental specialist in endodontics, oral and maxillofacial surgery, oral and maxillofacial pathology, orthodontics and dentofacial orthopedics, periodontics, prosthodontics, dental public health, or oral and maxillofacial radiology from a province in Canada may apply for a license if the applicant submits a completed application, on a form provided by the department, together with the requisite fee, and provides proof of all of the following:

(a) Meet the requirements of the code, R 338.7001 to R 338.7005, any other rules promulgated under the code, and the requirements of section 16174, of the code, MCL 333.16174.

(b) Hold a current license to practice dentistry in this state.

(c) Hold at least a master's degree in a specialty listed in subrule (4) of this rule, in Canada, from a dental institution that is accredited by the NDEB.

(d) Have graduated from a specialty program recognized by the CDAC with all training completed in Canada.

(e) Have passed the National Dental Specialty Examination (NDSE) and have NDSE certification.

History: 1984 AACCS; 1994 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11502 Dental anesthesiology explained; licensure requirements; examination content.

Rule 1502. (1) The practice of dental anesthesiology includes managing pain, anxiety, and overall patient health during dental, oral, maxillofacial, and adjunctive surgical or diagnostic procedures throughout the entire perioperative period. The specialty is dedicated to promoting patient safety as well as access to care for all dental patients, including the very young and patients with special healthcare needs.

(2) An applicant for licensure shall hold a current license to practice dentistry in this state and satisfy all the requirements of either subdivision (a) or (b) of this subrule:

(a) Meet both of the following:

(i) Have graduated from a CODA-approved program of dental anesthesiology approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(iv) Provide the department with evidence of the successful passing of the American Board of Dental Anesthesiology (ADBA) written exam. The passing score accepted for licensure is the passing score established by the ADBA.

(b) Meet both of the following:

(i) Have completed a hospital-based anesthesia residence program in the United States before 1985 that was accredited by the Accreditation Council for Graduate Medical Education.

(ii) Petition the board for a review of credentials, which must be substantially equivalent to the current CODA standards.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11503 Rescinded.

History: 1984 AACCS; 1994 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS.

R 338.11504 Dental public health explained; licensure requirements; examination content.

Rule 1504. (1) The practice of dental public health includes preventing and controlling dental diseases and promoting dental health through organized community efforts. It is the form of dental practice that serves the community as a patient rather than the individual. It is concerned with the dental health education of the public, with applied dental research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis. Implicit in this definition is the requirement that the specialist have broad knowledge and skills in public health administration, research methodology, the prevention and control of oral diseases, and the delivery and financing of oral healthcare.

(2) An applicant for licensure shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of dental public health approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Provide the department with evidence of the successful passing of the American Board of Dental Public Health (ABDPH) written exam. The passing score accepted for licensure is the passing score established by the ABDPH.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11505 Rescinded.

History: 1984 AACCS; 1989 AACCS; 1994 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS.

R 338.11506 Oral and maxillofacial radiology explained; licensure requirements; examination content.

Rule 1506. (1) The practice of oral and maxillofacial radiology includes the production and interpretation of images and data produced by all modalities of radiant energy that are used for the diagnosis and management of diseases, disorders, and conditions of the oral and maxillofacial region.

(2) An applicant for licensure shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of oral and maxillofacial radiology approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Meet 1 of the following:

(i) Provide the department with evidence of the successful passing of the American Board of Oral and Maxillofacial Radiology (ABOMR) written exam. The passing score accepted for licensure is the passing score established by the ABOMR.

(ii) Petition the board for a review of credentials.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11507 Rescinded.

History: 1984 AACCS; 2011 AACCS; 2017 AACCS.

R 338.11508 Oral Medicine explained; licensure requirements; examination content.

Rule 1508. (1) The practice of oral medicine includes the oral healthcare of medically complex patients and for the diagnosis and management of medically related diseases, disorders, and conditions affecting the oral and maxillofacial region.

(2) An applicant for licensure shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of oral medicine approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Meet 1 of the following:

(i) Provide the department with evidence of the successful passing of the American Board of Oral Medicine (AAOM) written exam. The passing score accepted for licensure is the passing score established by the AAOM.

(ii) Petition the board for a review of credentials.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11509 Rescinded.

History: 1984 AACCS; 2011 AACCS; 2017 AACCS.

R 338.11510 Orofacial pain explained; licensure requirements; examination content.

Rule 1510. (1) The practice of orofacial pain includes the diagnosis, management, and treatment of pain disorders of the jaw, mouth, face, head, and neck. The specialty of orofacial pain is dedicated to the evidenced-based understanding of the underlying pathophysiology, etiology, prevention, and treatment of these disorders and improving access to interdisciplinary patient care.

(2) An applicant for licensure shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of orofacial pain approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Meet 1 of the following:

(i) Provide the department with evidence of the successful passing of the American Board of Orofacial Pain (AAOP) written exam. The passing score accepted for licensure is the passing score established by the AAOP.

(ii) Petition the board for a review of credentials.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11511 Rescinded.

History: 1984 AACCS; 2011 AACCS; 2017 AACCS.

R 338.11512 Oral and maxillofacial pathology explained; licensure requirements.

Rule 1512. (1) The practice of oral and maxillofacial pathology deals with the nature, identification, and management of diseases affecting the oral and maxillofacial regions. It is a science that investigates the causes, processes, and effects of these diseases.

(2) The specialty of oral and maxillofacial pathology includes, but is not limited to, the research and diagnosis of diseases using clinical, radiographic, microscopic, biochemical, or other examinations.

(3) An applicant for licensure as an oral and maxillofacial pathologist shall meet all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of oral and maxillofacial pathology approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Provide verification of a passing score on the specialty certification examination by the American Board of Oral and Maxillofacial Pathology.

History: 1994 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11513 Oral and maxillofacial surgery explained; licensure requirements; examination content.

Rule 1513. (1) The practice of oral and maxillofacial surgery includes the diagnosis, surgical, and adjunctive treatment of diseases, injuries, and defects involving both the functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

(2) The specialty of oral and maxillofacial surgery includes, but is not limited to, the care, treatment, and procedures associated with an office and hospital-based practice under R 338.11301.

(3) A dentist who applies for licensure as an oral and maxillofacial surgeon shall comply with both of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of oral and maxillofacial surgery approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements. The board accepts the examinations and evaluative processes required to successfully complete a CODA-

accredited oral and maxillofacial residency program as meeting the requirements of section 16608 of the code, MCL 333.16608.

History: 1984 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11515 Orthodontics and dentofacial orthopedics explained; licensure requirements; examination content.

Rule 1515. (1) The practice of orthodontics includes the diagnosis, prevention, interception, and correction of malocclusion, as well as the neuromuscular and skeletal abnormalities of the developing or mature orofacial structures. The term "orthodontics and dentofacial orthopedics" means the same as the term "orthodontics."

(2) The specialty of orthodontics includes, but is not limited to, all of the following:

- (a) The diagnosis, prevention, interception, and comprehensive treatment of all forms of malocclusion of the teeth and associated alterations in their surrounding structures.
- (b) The design, application, and control of functional and corrective appliances.
- (c) The growth guidance of the dentition and its supporting structures to attain and maintain optimum occlusal relations in physiologic and esthetic harmony among facial and cranial structures.

(3) A dentist who desires licensure as an orthodontist shall comply with all of the following requirements:

- (a) Hold a current license to practice dentistry in this state.
- (b) Have graduated from a CODA-approved program of orthodontics approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.
- (c) Provide the department with evidence of the successful passing of the American Board of Orthodontics (ABO) written exam. The passing score accepted for licensure is the passing score established by the ABO.

History: 1984 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11517 Prosthodontics explained; licensure requirements; examination content.

Rule 1517. (1) The practice of prosthodontics includes the diagnosis, treatment planning, rehabilitation, and maintenance of the oral function, comfort, appearance, and health of patients with clinical conditions associated with missing or deficient teeth or oral and maxillofacial tissues, or both, using biocompatible substitutes.

(2) The specialty of prosthodontics includes, but is not limited to, the restoration and maintenance of oral function, comfort, appearance, and health of the patient by the restoration of natural teeth and the replacement of missing teeth and contiguous oral and maxillofacial tissues with artificial substitutes.

(3) A dentist who applies for licensure as a prosthodontist shall comply with all of the following requirements:

- (a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of prosthodontics approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Provide verification of a passing score on the written portion of the American College of Prosthodontics (ACP).

History: 1984 AACCS; 1998-2000 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11519 Periodontics explained; licensure requirements; examination content.

Rule 1519. (1) The practice of periodontics includes the prevention, diagnosis, and treatment of disease of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function, and esthetics of these structures and tissues.

(2) A dentist who desires licensure as a periodontist shall comply with both of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of periodontics approved by the board under R 338.1130 and submit a certification form from the program or hospital of completion of all requirements. The board accepts the examinations and evaluative processes required to successfully complete a CODA-accredited oral and maxillofacial residency program as meeting the requirements of section 16608 of the code, MCL 333.16608.

History: 1984 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11521 Pediatric dentistry explained; licensure requirements; examination content.

Rule 1521. (1) The practice of pediatric dentistry is an age-defined specialty that provides both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.

(2) A dentist who desires licensure as a pediatric dentist shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of pediatric dentistry approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Provide verification of a passing score on the American Board of Pediatric Dentistry (ABPD) qualifying examination that is conducted and scored by the ABPD.

History: 1984 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11523 Endodontics explained; licensure requirements; examination content.

Rule 1523. (1) The practice of endodontics includes the morphology, physiology, and pathology of the human dental pulp and periradicular tissues. Its study encompasses related basic and clinical sciences, including the biology of the normal pulp and the etiology, diagnosis, prevention, and treatment of diseases and injuries of the pulp and associated periradicular conditions.

(2) A dentist who applies for licensure as an endodontist shall comply with all of the following requirements:

(a) Hold a current license to practice dentistry in this state.

(b) Have graduated from a CODA-approved program of endodontics approved by the board under R 338.11301 and submit a certification form from the program or hospital of completion of all requirements.

(c) Provide documentation to the department evidencing the successful passing of the American Board of Endodontists (ABE) written examination. The passing score accepted for licensure is the passing score established by the ABE.

History: 1984 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11525 Specialists; holding self out to public.

Rule 1525. (1) A dentist who is not licensed as a specialist by the board shall not announce or hold himself or herself out to the public as limiting his or her practice to, as being specially qualified in, or as giving special attention to, a branch of dentistry that is listed as a specialty in R 338.11501. A dentist is considered to be holding himself or herself out as a specialist in a branch of dentistry that is listed as a specialty in R 338.11501 in either of the following situations:

(a) When, in any way, he or she gives public emphasis to the practice of a specialty of dentistry listed in R 338.11501 without disclosing that he or she is a dentist who is not licensed in this state as a specialist under R 338.11501.

(b) When he or she identifies himself or herself with a specialty of dentistry in R 338.11501, whether or not he or she claims special attention to or a practice limited to the specialty, or if he or she employs the use of signs, professional cards, letterheads, other listings, or letters to the public or the profession that, in any way, implies special knowledge or ability in a specialty of dentistry in R 338.11501. This subdivision does not apply to specialists who are advertising in the specialty for which they are licensed in this state under R 338.11501.

(2) A dentist who is licensed as a specialist in this state under R 338.11501 shall include his or her license number in all public advertisements for that specialty, including, but not limited to, telephone books, solicitations, print media, newspapers, and internet advertising.

(3) Identification as an employer, employee, or partner, with an individual who is duly licensed as a specialist in this state under R 338.11501 constitutes announcement to the public of qualifications for specialization, unless the individual so associating himself or herself publicly states, by signs, cards, or announcements, that he or she is not licensed in this state as a specialist under R 338.11501 or is engaged in the practice of

some other specialty of dentistry in which he or she is duly licensed in this state under R 338.11501.

History: 1984 AACCS; 1994 AACCS; 2011 AACCS; 2021 AACCS.

R 338.11527 Dental license suspension or revocation; automatic suspension or revocation of specialty licensure; American board discipline.

Rule 1527. (1) The suspension or revocation of the dental license of a dentist automatically causes the suspension or revocation of a specialty license issued to that dentist under the code and these rules.

(2) A licensee who holds a dental specialty license shall notify the department of any action that results in a suspension or revocation of a certification by an American board of dentistry within 30 days after the date of the suspension or revocation.

History: 1984 AACCS; 2011 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

PART 6A. GENERAL ANESTHESIA AND SEDATION

R 338.11601 General anesthesia, deep sedation; requirements.

Rule 1601. (1) A general dentist who does not hold a specialty license in dental anesthesiology or oral and maxillofacial surgery, shall not administer general anesthesia or deep sedation to a dental patient in a dental office unless the dentist complies with the following requirements:

(a) The dentist has demonstrated competency by meeting all the following requirements:

(i) Completing a minimum of 1 year of advanced training in general anesthesia and pain control in a program that meets the standards adopted in R 338.11603(1). A program that is accredited by CODA as meeting the accreditation standards for advanced dental education programs in anesthesiology or oral and maxillofacial surgery meets the requirements of this subdivision.

(ii) Completing a course in managing medical emergencies that includes all of the following:

(A) Current monitoring guidelines for adults from the ADA or the American ASA, or the AAOMS for oral and maxillofacial surgeons, and for children from the ASA, or AAOMS for oral and maxillofacial surgeons, the AAP, and the AAPD.

(B) Equipment and material used in an anesthesia or sedation emergency.

(C) The personnel needed for anesthesia or sedation.

(D) The drugs needed for resuscitation in an emergency.

(iii) Maintaining certification in BLS and ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11603(2). A certification in BLS and ACLS for healthcare providers with a hands-on component from AHA or BLS for the healthcare provider and PALS with a hands-on component from AHA meets the requirements of this subdivision.

(b) If general anesthesia or deep sedation is performed in a dental office, any allied dental personnel and dental therapists who are directly involved in the procedure shall complete a course in managing medical emergencies that includes all of the following:

(i) Current monitoring guidelines for adults from the ADA or the ASA, or AAOMS for oral and maxillofacial surgeons, and for children from the ASA, the AAP, and the AAPD or AAOMS for oral and maxillofacial surgeons.

(ii) Equipment and materials used in an anesthesia or sedation emergency.

(iii) The personnel needed for anesthesia or sedation.

(iv) The drugs needed for resuscitation in an emergency.

(2) A general dentist who does not hold a specialty license in dental anesthesiology or oral and maxillofacial surgery, shall not collaboratively provide general anesthesia or deep sedation with a physician anesthesiologist, oral surgeon, or nurse anesthetist, under section 17210 of the code, MCL 333.17210, in a dental office, unless the dentist, and allied dental personnel and dental therapists who are directly involved in the procedure, maintain certification in BLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11603(2). A certification in BLS for healthcare providers with a hands-on component from AHA or BLS for the healthcare provider and PALS with a hands-on component from AHA meets the requirements of this subdivision.

(3) At no time is a RDA or RDH allowed to adjust medication levels during a procedure, other than nitrous oxide and oxygen, as allowed in R 338.11411(4).

History: 1990 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11602 Moderate or minimal sedation; requirements.

Rule 1602. (1) A general dentist who does not hold a specialty license in dental anesthesiology or oral and maxillofacial surgery, shall not administer moderate or minimal sedation to a dental patient in a dental office unless all of the following requirements are satisfied:

(a) The dentist has demonstrated competency by meeting all of the following requirements:

(i) Completing either of the following:

(A) A comprehensive training program in moderate sedation that satisfies the requirements described in the moderate sedation section of the ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students when the training was commenced, which must include 60 hours of classroom training and hands-on interaction in moderate sedation with 20 patients.

(B) An advanced education program accredited by CODA that provides comprehensive training to administer moderate sedation.

(ii) Maintaining certification in BLS and ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification under standards substantially equivalent to the standards adopted in R 338.11603(2). A certification in BLS and ACLS for healthcare providers with a hands-on component from AHA or basic life support for the healthcare provider and PALS with a hands-on component from AHA meets the requirements of this paragraph.

(iii) Completing a course in managing medical emergencies that includes all of the following:

(A) Current monitoring guidelines for adults from the ADA or the ASA, or AAOMS for oral and maxillofacial surgeons, and for children from the ASA, the AAP, and the AAPD, or AAOMS for oral and maxillofacial surgeons.

(B) Equipment used in an anesthesia or sedation emergency.

(C) The personnel needed for anesthesia or sedation.

(D) The drugs needed for resuscitation in an emergency.

(b) If moderate sedation is performed in a dental office, any allied dental personnel and dental therapists that are directly involved in the procedure shall complete a course in managing medical emergencies that includes all of the following:

(i) Current monitoring guidelines for adults from the ADA or the ASA, or AAOMS for oral and maxillofacial surgeons, and for children from the ASA, the AAP, and the AAPD, or AAOMS for oral and maxillofacial surgeons.

(ii) Equipment and materials used in an anesthesia or sedation emergency.

(v) The personnel needed for anesthesia or sedation.

(vi) The drugs needed for resuscitation in an emergency.

(2) A general dentist who does not hold a specialty license in dental anesthesiology or oral and maxillofacial surgery, shall not collaboratively provide moderate or minimal sedation with a physician anesthesiologist, oral surgeon, or nurse anesthetist, under section 17210 of the code, MCL 333.17210, in a dental office, unless the dentist, and allied dental personnel and dental therapists who are directly involved in the procedure, maintain certification in BLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11603(2). A certification in BLS for healthcare providers with a hands-on component from AHA or BLS for the healthcare provider and PALS with a hands-on component from AHA meets the requirements of this subdivision.

(3) At no time is a RDA or RDH allowed to adjust medication levels during a procedure, other than nitrous oxide and oxygen, as allowed in R 338.11411(2).

History: 1990 AACCS; 1997 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11603 Adoption of standards; effect of certification of programs.

Rule 1603. (1) The board adopts by reference the CODA standards for anesthesiology educational programs in the publication titled "Accreditation Standards for Advanced Dental Education Programs in Anesthesiology," copyright 2020, and the standards for advanced training in anesthesia and pain control and training in intravenous conscious sedation and related subjects set forth by the ADA's publication titled "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," October 2016 edition. The guidelines may be obtained at no cost from the American Dental Association, 211 E. Chicago Avenue, Chicago, Illinois, 60611, or at no cost on the association's website at <http://www.ada.org>. A copy of the standards is available for inspection and distribution, at 10 cents per page from the Michigan Board of Dentistry,

Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

(2) The board adopts by reference the standards for credentialing in BLS and ACLS for healthcare providers with a hands-on component set forth by the AHA in the standards and guidelines for cardiopulmonary resuscitation and emergency cardiac care for professional providers, published in "2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care." A copy of the Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care may be obtained at an approximate cost of \$25.00 from the American Heart Association, 7272 Greenville Avenue, Dallas, Texas, 75231 or at no cost from the AHA's website at <https://cpr.heart.org/>. A copy of this document is available for inspection and distribution, at the same cost as purchasing a copy from AHA, from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 1990 AACCS; 1997 AACCS; 2006 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11604 Rescinded.

History: 1990 AACCS; 2011 AACCS; 2021 AACCS.

R 338.11605 Rescinded.

History: 2006 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

PART 6B. TELEHEALTH

R 338.11611 Definitions.

Rule 1611. As used in this part:

(a) "Telehealth" means the use of electronic information and telecommunication technologies to support or promote long-distance clinical healthcare, patient and professional health-related education, public health, or health administration. Telehealth may include, but is not limited to, telemedicine.

(b) "Telehealth service" means a healthcare service that is provided through telehealth. The requirement in R 338.11401 to have an "in-person" contact with the dentist or dental therapist once every 24 months does not apply to telehealth services unless the dentist or dental therapist delegates or assigns duties, other than radiographic images, to allied dental personnel.

(c) "Telemedicine" means the use of electronic media to link patients with healthcare professionals in different locations. To be considered telemedicine, the telemedicine services must be provided by a healthcare professional who is licensed,

registered, or otherwise authorized to engage in the healthcare professional's healthcare profession in the state where the patient is located.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11613 Consent; scope of practice; standard of care.

Rule 1613. (1) The licensee shall obtain informed consent for treatment before providing a telehealth service under section 16284 of the code, MCL 333.16284. Informed consent requires all of the following:

(a) The licensee shall ensure that the patient understands the patient will be treated remotely using telehealth.

(b) At the inception of care, any licensee who has contact with the patient shall identify themselves to the patient as a dentist, dental therapist, UDA, RDA, or RDH consistent with R 338.11103(a).

(c) The licensee shall ensure that the patient is mentally capable of giving informed consent for diagnosis, care, or treatment.

(d) The licensee shall explain the alternatives, capabilities, and limitations of telemedicine and that the patient may decline to receive telehealth services.

(2) If the patient is less than 18 years of age, a parent or legal guardian must provide informed consent for the patient.

(3) The licensee shall keep proof of consent for a telehealth service in the patient's up-to-date medical record and satisfy section 16213 of the code, MCL 333.16213.

(4) A licensee who provides telehealth services shall comply with all of the following:

(a) Act within the scope of the licensee's practice.

(b) Exercise the same standard of care applicable to a traditional, in-person healthcare service.

(c) Verify that telemedicine is appropriate to evaluate, diagnose, and treat the patient based on the patient's unique presentation.

(5) The licensee shall be able to examine the patient via a health insurance portability and accountability act (HIPAA) of 1996, Public Law 104-191 compliant, secure interactive audio or video, or both, telecommunications system, or through the use of store and forward online messaging.

(6) Telehealth must be secure and compliant with federal and state security and privacy regulations.

History: 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11615 Prescribing medications.

R 1615. A licensee who is authorized to prescribe may prescribe a drug during a telehealth service if the licensee complies with all of the following:

(a) Is licensed in this state and is a prescriber in this state.

(b) Is acting within the licensee's scope of practice in prescribing the drug.

(c) Is acting in compliance with section 16285 of the code, MCL 333.16285.

(d) If the licensee determines that it is medically necessary, the licensee shall refer the patient for other healthcare services or to another health professional that is geographically accessible to the patient.

(e) After providing the telehealth service, the licensee or delegatee shall provide follow-up care services to the patient or refer the patient to another health professional for follow-up care.

History: 2023 MR 19, Eff. Oct. 2, 2023.

PART 7. CONTINUING EDUCATION

R 338.11701 License renewal for a dentist, dental specialist, and special-retired volunteer dentist; requirements; applicability.

Rule 1701. (1) This rule applies to an application for the renewal of a dentist license, dental specialist license, and special retired volunteer dentist license under sections 16201 and 16184 of the code, MCL 333.16201 and 333.16184. A dental specialist license must be renewed at the same time as the dentistry license.

(2) An applicant for a dentist license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall complete not less than 60 hours of continuing education approved by the board under R 338.11704a during the 3-year period before the end of the license cycle.

(3) An applicant for a dental specialist license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall complete 60 hours of continuing education approved by the board under R 338.11704a, with not less than 20 of the required 60 hours in board-approved continuing education in the dental specialty field in which the applicant is licensed, within the 3-year period before the end of the license cycle.

(4) In addition to meeting the requirements of section 16184 of the code, MCL 333.16184, an applicant for a special retired volunteer dentist license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall complete not less than 60 hours of continuing education approved by the board under R 338.11704a during the 3-year period before the end of the license cycle.

(5) An applicant shall possess current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11705(4).

(6) In complying with the requirements of subrules (2) to (4) of this rule, an applicant for a dentist license, dental specialist license, and special retired volunteer dentist license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall comply with all of the following before the end of the license cycle:

(a) Complete not less than 3 hours of the required continuing education hours in pain and symptom management. Continuing education hours in pain and symptom management may include, but are not limited to, courses in behavior management, psychology of pain, pharmacology, behavior modification, stress management, clinical

applications, and drug interactions. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for pain and symptom management.

(b) Complete at least 1 hour of the required continuing education hours in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel.

(c) Complete a minimum of 20 hours of the required continuing education hours in programs directly related to clinical issues including delivery of care, materials used in delivery of care, and pharmacology. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for clinical issues.

(d) Complete at least 1 hour of the required continuing education hours in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for infection control.

(e) Complete a minimum of 20 hours of the required continuing education hours by attending synchronous, live courses or programs, in-person or virtual, that provide for the opportunity of direct interaction between faculty and participants including, but not limited to, lectures, symposia, live teleconferences, workshops, and participation in volunteer patient or supportive dental services provided for in R 338.11704a(1)(m). These courses, with the exception of the volunteer services in R 338.11704a(1)(m), may be counted toward the required courses in clinical issues, including delivery of care, materials used in delivery of care, and pharmacology.

(f) Complete no more than 30 hours of the required continuing education hours asynchronously, noninteractive.

(7) Except for the 1-time training in human trafficking, which may be used to comply with the requirement for the 1-time training and a continuing education requirement, an applicant may not earn continuing education credit for implicit bias training required by R 338.7004, and may not earn credit for a continuing education program or activity that is identical to a program or activity an applicant has already earned credit for during that renewal period.

(8) The submission of the application for renewal constitutes the applicant's certification of compliance with the requirements of this rule. The board may require an applicant or a licensee to submit evidence to demonstrate compliance with this rule. An applicant or licensee shall maintain evidence of complying with the requirements of this rule for a period of 5 years after the date of the submission for renewal. Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221.

(9) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department for the board's consideration not less than 30 days before the last regularly scheduled board meeting before the expiration date of the license. The public notice for the board meetings can be found at: <https://www.michigan.gov/lara/bureau-list/bpl/.health/hp-lic-health-prof/dental>.

R 338.11703 License renewal for a dental therapist and special-retired volunteer dental therapist; requirements; applicability.

Rule 1703. (1) This rule applies to an application for the renewal of a dental therapist license and special-retired volunteer dental therapist license under sections 16184, 16201, and 16653 of the code, MCL 333.16184, 333.16201, and 333.16653.

(2) An applicant for a dental therapist license renewal who has been licensed for the 2-year period immediately preceding the expiration date of the license shall complete not less than 35 hours of continuing education approved by the board under R 338.11704a during the 2-year period before renewal.

(3) In addition to meeting the requirements of section 16184 of the code, MCL 333.16184, an applicant for a special-retired volunteer dental therapist license renewal who has been licensed for the 2-year period immediately preceding the expiration date of the license shall complete not less than 35 hours of continuing education approved by the board under R 338.11704a during the 2-year period before renewal.

(4) An applicant shall possess current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11705(4).

(5) In complying with the requirements of subrules (2) and (3) of this rule, an applicant for a dental therapist license or special-retired volunteer dental therapist license renewal who has been licensed for the 2-year period immediately preceding the expiration date of the license shall comply with all of the following before the end of the license cycle:

(a) Complete not less than 2 hours of the required continuing education hours in pain and symptom management. Continuing education hours in pain and symptom management may include, but are not limited to, courses in behavior management, psychology of pain, pharmacology, behavior modification, stress management, clinical applications, and drug interactions. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for pain and symptom management.

(b) Complete at least 1 hour of the required continuing education hours in dental ethics and jurisprudence that includes the delegation of duties to allied dental personnel, which may be completed in 1 or more courses. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for dental ethics and jurisprudence.

(c) Complete at least 1 hour of the required continuing education hours in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC's infection control guidelines. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for infection control.

(d) Complete a minimum of 12 hours of the required continuing education hours in programs directly related to clinical issues including delivery of care, materials used in

delivery of care, and pharmacology. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for clinical issues.

(e) Complete a minimum of 12 hours of the required continuing education hours by attending synchronous live courses or programs, in-person or virtual, that provide for the opportunity of direct interaction between faculty and participants including, but not limited to, lectures, symposia, live teleconferences, workshops, and participation in volunteer patient or supportive dental services provided for in R 338.11704a(1)(m). These courses, with the exception of the volunteer services in R 338.11704a(1)(m), may be counted toward the required courses in clinical issues including delivery of care, materials used in delivery of care, and pharmacology.

(f) Complete no more than 18 hours of the required continuing education hours asynchronously, noninteractive.

(6) Except for the 1-time training in human trafficking and 1-time training in opioid and controlled substances awareness, which may be used to comply with the requirement for the 1-time training and a continuing education requirement, an applicant may not earn continuing education credit for implicit bias training required by R 338.7004, and may not earn credit for a continuing education program or activity that is identical to a program or activity the applicant has already earned credit for during that renewal period.

(7) The submission of the application for renewal constitutes the applicant's certification of compliance with the requirements of this rule. The board may require an applicant or a licensee to submit evidence to demonstrate compliance with this rule. An applicant or licensee shall maintain evidence of complying with the requirements of this rule for a period of 5 years after the date of the submission for renewal. Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221.

(8) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department for the board's consideration not less than 30 days before the last regularly scheduled board meeting before the expiration date of the license. The public notice for the board meetings can be found at: <https://www.michigan.gov/lara/bureau-list/bpl/.health/hp-lic-health-prof/dental>.

History: 1991 AACCS; 2004 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11704 License renewal for a RDH, RDH special volunteer, RDA, and RDA special volunteer; requirements; applicability.

Rule 1704. (1) This rule applies to an application for the renewal of a RDH license and a RDA license under section 16201 of the code, MCL 333.16201, and a RDH special-retired volunteer license and a RDA special-retired volunteer license under section 16184 of the code, MCL 333.16184.

(2) An applicant for a RDH license renewal or a RDA license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license, shall complete not less than 36 hours of continuing education approved by the board under R 338.11704a during the 3 years before the end of the license cycle.

(3) An applicant holding both a RDH license and a RDA license shall complete not less than 36 hours of continuing education acceptable to the board under R 338.11704a

during the 3 years before the end of the license cycle. The 36 hours must include not less than 12 hours devoted to RDH functions and not less than 12 hours devoted to RDA functions.

(4) In addition to meeting the requirements of section 16184 of the code, MCL 333.16184, an applicant for a special-retired volunteer RDA license renewal or a special-retired volunteer RDH license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall complete not less than 36 hours of continuing education approved by the board under R 338.11704a during the 3-year period before the end of the license cycle.

(5) An applicant shall possess current certification in BLS or ACLS for healthcare providers with a hands-on component from an agency or organization that grants certification pursuant to standards substantially equivalent to the standards adopted in R 338.11705(4).

(6) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department for the board's consideration not less than 30 days before the last regularly scheduled board meeting before the expiration date of the license. The public notice for the board meetings can be found at: <https://www.michigan.gov/lara/bureau-list/bpl/.health/hp-lic-health-prof/dental>.

(7) In complying with the requirements of subrules (2) to (4) of this rule, an applicant for a RDA license, RDH license, special-retired volunteer RDA license, or special-retired volunteer RDH license renewal who has been licensed for the 3-year period immediately preceding the expiration date of the license shall also comply with all of the following before the end of the license cycle:

(a) Complete a minimum of 12 hours of the required continuing education hours in programs directly related to clinical issues including delivery of care, materials used in the delivery of care, and pharmacology. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for clinical issues.

(b) Complete a minimum of 12 hours of the required continuing education hours by attending synchronous, live courses or programs, in-person or virtual, that provide the opportunity for direct interaction between faculty and participants including, but not limited to, lectures, symposia, live teleconferences, workshops, and providing volunteer patient or supportive dental services in R 338.11704a(1)(m). These courses, with the exception of the volunteer services in R 338.11704a(1)(m), may be counted toward the required courses in clinical issues including delivery of care, materials used in delivery of care, and pharmacology.

(c) Complete not less than 2 hours of the required continuing education hours in pain and symptom management. Continuing education credits in pain and symptom management may include, but are not limited to, courses in behavior management, psychology of pain, pharmacology, behavior modification, stress management, clinical applications, and drug interactions. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for pain and symptom management.

(d) Earn no more than 18 of the 36 hours of the required continuing education hours asynchronously, noninteractive.

(e) Complete at least 1 hour of the required continuing education hours in dental ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel, which may be completed in 1 or more courses. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for ethics and jurisprudence with inclusion of delegation of duties to allied dental personnel.

(f) Complete at least 1 hour of the required continuing education hours in infection control, which must include sterilization of hand pieces, personal protective equipment, and the CDC’s infection control guidelines. Hours earned through volunteer patient or supportive dental services provided for in R 338.11704a(1)(m) do not count toward the required hours for infection control.

(8) Except for the 1-time training in human trafficking which may be used to comply with the requirement for the 1-time training and a continuing education requirement, an applicant may not earn continuing education credit for implicit bias training required by R 338.7004 and may not earn credit for a continuing education program or activity that is identical to a program or activity the applicant has already earned credit for during that renewal period.

(9) The submission of the application for renewal constitutes the applicant's certification of compliance required by this rule. The board may require an applicant or licensee to submit evidence to demonstrate compliance with this rule. The applicant or licensee shall maintain evidence of complying with the requirements of this rule for a period of 5 years after the date of the submission for renewal. Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221.

History: 2004 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11704a Acceptable continuing education for licensees, limitations.

Rule 1704a. (1) The board shall consider any of the following as acceptable continuing education for dentists, dental therapists, dental specialists, special-retired volunteer dentists, special-retired volunteer dental therapists, RDH, special-retired volunteer RDHs, RDAs, and special-retired volunteer RDAs, unless otherwise noted:

Acceptable Continuing Education activities		
(a)	<p>Completion of an approved continuing education program or activity related to the practice of dentistry. A course or program must substantially meet the standards and criteria for an acceptable category of continuing education under this rule and must be relevant to healthcare and advancement of the licensee’s dental education.</p> <p>A continuing education program or activity is approved, regardless of the format in which it is offered, if it is approved or offered for</p>	<p>The number of hours earned are the number of hours approved by the sponsor or the approving organization.</p> <p>If the activity was not approved for a set number of hours, then 1 credit hour for each 50 minutes of participation may be earned.</p> <p>No limitation on the number of</p>

	<p>continuing education credit by any of the following:</p> <p>A dental, dental therapy, dental hygiene, dental assistant, or a hospital-based dental specialty educational program approved by CODA.</p> <p>A continuing education sponsoring organization, institution, or individual approved by AGD.</p> <p>The Commission on Continuing Education Provider Recognition ADA CERP.</p> <p>A continuing education program or activity is approved, regardless of the format in which it is offered, if it is offered for continuing education credit by any of the following:</p> <p>American Academy of Dental Hygiene (AADH).</p> <p>American Dental Hygienists' Association (ADHA).</p> <p>American Dental Assistants Association (ADAA).</p> <p>Michigan Dental Association (MDA).</p> <p>Michigan Dental Hygienists Association (MDHA).</p> <p>Michigan Dental Assistants Association (MDAA).</p> <p>Another state board of dentistry.</p> <p>If audited, an applicant shall submit a copy of a letter or certificate of completion showing the applicant's name, number of hours earned, sponsor name or the name of the organization that approved the program or activity for continuing education credit, and the date the program was held or activity completed.</p>	<p>hours earned.</p>
(b)	<p>Completion of courses offered for credit in a dental, dental therapy, dental hygiene, dental assistant, or a hospital-based dental specialty educational program approved by CODA.</p> <p>If audited, an applicant shall submit an official transcript that reflects completion of the course and number of semester or quarter credit hours earned.</p>	<p>Ten hours may be earned for each quarter credit earned and 15 hours may be earned for each semester credit earned.</p> <p>No limitation on the number of hours earned.</p>

(c)	<p>Attendance at a program or activity related to topics approved in R 338.2443(2) and R 338.143(2) for category 1 continuing education by the board of medicine or board of osteopathic medicine.</p> <p>If audited, an applicant shall submit a copy of a letter or certificate of completion showing the applicant's name, number of hours earned, sponsor name or the name of the organization that approved the program or activity for continuing education credit, and the date the <u>program was held or activity completed.</u></p>	<p>One hour may be earned for each 50 minutes of program attendance.</p> <p>A maximum of 30 hours for a dentist, and 18 hours for a dental therapist, RDH, and RDA may be earned in each renewal period.</p>
(d)	<p>For dentists, satisfactory participation for a minimum of 7 months in a hospital or institution through a postgraduate dental clinical training program approved by CODA.</p> <p>If audited, an applicant shall submit a copy of a letter or certificate of completion showing the applicant's name, number of hours attended, the name of the hospital or institution, the name of the clinical training program, the date of participation, and the <u>activities completed.</u></p>	<p>Twenty hours may be earned in each calendar year for 7 months of participation in the calendar year.</p> <p>A maximum of 20 hours per calendar year may be earned.</p>
(e)	<p>For dentists, successful completion of an American-board specialty examination.</p> <p>If audited, an applicant shall submit proof of a passing score on the examination.</p>	<p>Ten hours may be earned in the year in which the applicant achieves a passing score on a specialty examination.</p> <p>A maximum of 20 hours may be earned in each renewal period. Credit is not given for repeating the same examination in a <u>renewal period.</u></p>
(f)	<p>Renewal of a dentist, dental therapist, RDH, or RDA license held in another state that requires continuing education for license renewal that is substantially equivalent in subject matter and total amount of required hours required in these rules if the applicant resides and practices in another state.</p> <p>If audited, an applicant shall submit proof of current licensure in another state and a copy of a letter or certificate of completion showing the <u>applicant's name, number of hours earned,</u></p>	<p>For a dentist, 60 hours may be earned. For a dental therapist, 35 hours may be earned. For a RDH or RDA, 36 hours may be earned.</p> <p>A maximum of 60 hours for a dentist, 35 hours for a dental therapist, and 36 hours for a RDH or RDA may be earned in each renewal period.</p>

	<p>sponsor name or the name of the organization that approved the program or activity for continuing education credit, type of program or activity, and the date the program was held or <u>activity completed.</u></p>	
(g)	<p>For a RDA, meeting the requirements for recertification in R 338.11705(3).</p> <p>If audited, an applicant shall submit proof of current certification, other than emeritus certification, by the Dental Assisting National Board (DANB).</p>	<p>Thirty-six hours may be earned.</p> <p>A maximum of 36 hours may be earned in each renewal period.</p>
(h)	<p>Initial publication of an article or text related to the practice of dentistry, dental therapy, dental hygiene, or dental assisting in either of the following:</p> <p>A textbook.</p> <p>A journal of a national association of dentists, dental therapists, dental specialists, dental hygienists, or dental assistants.</p> <p>If audited, an applicant shall submit a copy of the publication that identifies the applicant as <u>the author or a publication acceptance letter.</u></p>	<p>Twenty-five hours may be earned per publication.</p> <p>A maximum of 25 hours may be earned in each renewal period.</p>
(i)	<p>Initial publication of an article related to the practice of dentistry, dental therapy, dental hygiene, or dental assisting in either of the following:</p> <p>A journal of an accredited dentistry, dental therapy, dental hygiene, or dental assisting school.</p> <p>A state or state-component association of dentists, dental therapists, dental specialists, dental hygienists, or dental assistants.</p> <p>If audited, an applicant shall submit a copy of the publication that identifies the applicant as <u>the author or a publication acceptance letter.</u></p>	<p>Twelve hours may be earned per publication.</p> <p>A maximum of 12 hours may be earned in each renewal period.</p>
(j)	<p>Independent reading of articles or viewing or listening to media, other than online programs, related to dental, dental therapy, dental hygiene, or dental assisting education.</p> <p>If audited, an applicant shall submit an affidavit attesting to the number of hours the <u>applicant spent participating in these activities</u></p>	<p>One hour for each 50 minutes of participation may be earned per activity.</p> <p>A maximum of 10 hours may be earned in each renewal period.</p>

	that includes a description of the activity.	
(k)	<p>Development and presentation of a table clinical demonstration or a continuing education lecture offered in conjunction with the presentation of continuing education programs approved by the board pursuant to subrule (3) of this rule that is not a part of the licensee's regular job description.</p> <p>If audited, an applicant shall submit a copy of the curriculum and a letter from the program sponsor verifying the length and date of the <u>presentation</u>.</p>	<p>One hour for each 50 minutes devoted to the development and initial presentation.</p> <p>A maximum of 10 hours may be earned in each renewal period.</p>
(l)	<p>Attendance at a dental-related program that is approved by the board pursuant to subrule (3) of this rule and that is relevant to healthcare and advancement of the licensee's dental education.</p> <p>If audited, an applicant shall submit a copy of a letter or certificate of completion showing the applicant's name, number of hours earned, sponsor name or the name of the organization that approved the program or activity for continuing education credit, and the date the <u>program was held or activity completed</u>.</p>	<p>Ten hours may be credited per year.</p> <p>A maximum of 10 hours may be earned in each renewal period.</p>
(m)	<p>Providing volunteer patient or supportive dental services in this state at a board-approved program pursuant to subrule (4) of this rule that is not a part of the licensee's regular job description or required under a board order or agreement and that complies with the following:</p> <p>The program is a public or nonprofit entity, program, or event, or a school or nursing home.</p> <p>The program provides patient or supportive dental services to the indigent or dentally underserved populations.</p> <p>The licensee does not receive direct or indirect remuneration of any kind including, but not limited to, remuneration for materials purchased or used.</p> <p>The licensee shall sign in and sign out daily upon commencement and termination of the <u>provision of services</u>.</p>	<p>One hour for each 120 minutes of providing patient or supportive dental services.</p> <p>A dentist or special-retired volunteer dentist may earn a maximum of 20 hours per renewal period.</p> <p>A dental therapist, RDH, RDA, special-retired volunteer dental therapist, special-retired volunteer RDH, and special-retired volunteer RDA may earn a maximum of 12 hours per renewal period.</p>

	<p>A dentist with a specialty license issued from this state shall limit volunteer clinical dental services to the specialty area in which the dentist is licensed.</p> <p>If audited, an applicant shall submit proof from the sponsor of the assignments and the hours of service provided.</p>	
(n)	<p>Providing patient or supportive dental services in this state to indigent or dentally underserved populations that is part of the licensee's regular job description but is not required under a board order or agreement.</p> <p>If audited, an applicant shall submit proof from an employer of the assignments and the hours worked.</p>	<p>One hour for each 120 minutes of providing patient or supportive dental services.</p> <p>A dentist or special-retired volunteer dentist may earn a maximum of 20 hours per renewal period.</p> <p>A dental therapist, RDH, RDA, special-retired volunteer dental therapist, special-retired volunteer RDH, and special-retired volunteer RDA may earn a maximum of 12 hours per renewal period.</p>

(2) If an organized continuing education course or program is offered in segments of 50 to 60 minutes each, 1 hour of credit is given for each segment.

(3) The following requirements are established for continuing education, which includes, but is not limited to, any continuing education not otherwise approved by subrule (1) of this rule:

(a) The continuing education applicant shall submit a completed application, on forms provided by the department, which includes submission of a curriculum vitae or biography for all instructors and speakers.

(b) A completed application form must be submitted to the department not less than 70 days before the date the course or program is conducted and not less than 70 days before the next regularly scheduled board meeting for the proposed continuing education to be considered for approval by the board. Continuing education conducted before board consideration and approval will be denied approval.

(c) A course or program must substantially meet the standards and criteria for an acceptable category of continuing education under this rule and must be relevant to healthcare and advancement of the licensee's dental education.

(d) Board approval is for a term of 3 years from the date of approval.

(e) Approved continuing education must be reevaluated by the board before any changes during the 3-year approval term including, but not limited to, changes in the following:

(i) Instructors and speakers.

(ii) Content, title, or number of continuing education hours to be awarded to participants.

(f) Subject to subdivision (g) of this subrule, all changes to previously approved continuing education courses or programs must be submitted on required department forms not less than 70 days before the date the continuing education course or program is offered to participants and not less than 70 days before the next regularly scheduled board meeting to be considered for approval by the board. Any changes to the submitted and previously approved courses or programs conducted before board reconsideration and approval will be denied approval.

(g) Emergency changes to instructors and speakers that are unable to be submitted to the board not less than 70 days before the date of the continuing education may be reviewed by the department in consultation with the board chair when proof acceptable to the department is submitted with the change supporting the nature of the emergency.

(h) Other than the beginning term of approval, specific dates of the continuing education course or program and the number of times the course or program are offered do not require further board approval and may be changed without review by the board if the presentation dates are within the board's original 3-year term of approval.

(i) All of the following information must be recorded on a continuing education course or program certificate of completion or other proof prepared by the sponsor conducting the continuing education:

- (i) The name of the applicant, sponsor, or both.
- (ii) Continuing education approval number issued by the board.
- (vii) Course title.
- (viii) Date the approved continuing education course was conducted.
- (iii) Number of continuing education hours awarded.
- (ix) Signature of the individual responsible for attendance.
- (x) Dates of the current approval term.
- (xi) Name of participant.

(j) The board may revoke the approval status of any approved continuing education course or program any time the course or program fails to comply with these rules.

(k) The continuing education applicant shall submit a "Patient Protection" form provided by the department to the department for each continuing education course or program involving treatment of live patients.

(4) The following requirements are established for board approval of a sponsor offering volunteer continuing education opportunities under subrule (1)(m) of this rule:

(a) A sponsor shall apply to the department to obtain approval as a sponsoring entity on the volunteer dental application form.

(b) A sponsor shall retain patient records.

(c) A sponsor shall retain documentation of all volunteer assignments and the hours of service provided.

(d) Upon request, a sponsor shall provide the board with the records, copy of the assignments, hours of service, and evidence of compliance with the requirements of subrule (1)(m) of this rule.

(e) A sponsor shall provide each licensee with verification of all volunteer hours of dental care provided by the licensee upon completion of the licensee's service.

(f) Upon request, a sponsor shall submit documentation to the department, evidencing compliance with the requirements of subrules (1)(m) and (5) of this rule.

(g) Board approval is for a term of 4 years from the date of approval.

(h) The board may revoke the approval status of any volunteer continuing education opportunity any time an approved continuing education program fails to comply with these rules.

(i) All of the following information must be recorded on a continuing education certificate of completion or other proof prepared by the sponsor conducting the volunteer continuing education course or program:

(i) The name of the sponsoring organization.

(ii) Continuing education approval number issued by the board.

(iii) Dates and times of volunteer services.

(iv) Number of continuing education hours earned.

(v) Signature of individual responsible for attendance.

(vi) Dates of the current approval term.

(vii) Name of participant.

(5) A continuing education sponsor shall maintain evidence of participation in continuing education, including signed continuing education certificates of completion issued to participants, for a period of 5 years from the date of the continuing education program or course.

History: 2004 AACCS; 2006 AACCS; 2011 AACCS; 2014 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11704b Rescinded.

History: 2011 AACCS; 2017 AACCS; 2021 AACCS.

R 338.11704c Rescinded.

History: 2011 AACCS; 2017 AACCS; 2021 AACCS.

R 338.11705 Standards and requirements; adoption by reference.

Rule 1705. (1) The board adopts by reference the standards and criteria of the AGD's Program Approval for Continuing Education (PACE) which are set forth in the publication titled "PACE Academy of General Dentistry Program Approval for Continuing Education Program Guidelines, revised August 2021." Information on the PACE standards and criteria is available at no cost from the Academy of General Dentistry, 560 W. Lake St., Sixth Floor, Chicago, Illinois, 60661-6600 or at no cost from the academy's internet website at www.agd.org. A copy of the guidebook is available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Michigan Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

(2) The board adopts by reference the standards and criteria of the ADA CERP for approval of continuing education sponsoring organizations, which are set forth in the publication titled "ADA CERP Recognition Standards and Procedures January 2022." A copy of this publication may be obtained at no cost from the association at ADA CERP, 211 East Chicago Avenue, Chicago, Illinois, 60611-2678 or at no cost from the association's internet website at www.ada.org. A copy of the publication is available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

(3) The board adopts by reference the requirements for recertification established by DANB as set forth in the publication titled "Dental Assisting National Board, Inc. Recertification Requirements 2022." A copy of the publication may be obtained at no cost from the Dental Assisting National Board, Inc., 444 North Michigan Avenue, Suite 900, Chicago, Illinois, 60611 or at no cost from the national board's internet website at www.danb.org. A copy of the guidelines and requirements are available for inspection and distribution at 10 cents per page from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

(4) The board adopts by reference the standards for certification in BLS and ACLS for healthcare providers with a hands-on component set forth by the AHA in the standards and guidelines for cardiopulmonary resuscitation and emergency cardiac care for professional providers, published in "2020 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care." A copy of the guidelines for cardiopulmonary resuscitation and emergency cardiovascular care may be obtained at a cost of approximately \$25.00 from the AHA's website at www.cpr.heart.org. A copy of this document is available for inspection and distribution, at the same cost as purchasing a copy from the AHA, from the Michigan Board of Dentistry, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan, 48909.

History: 1991 AACCS; 2004 AACCS; 2006 AACCS; 2011 AACCS; 2014 AACCS; 2017 AACCS; 2011 AACCS; 2017 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.

PART 8. DENTAL AMALGAM

R 338.11801 Definitions.

Rule 1801. (1) As used in this part:

(a) "Amalgam separator" means a device designed to remove dental amalgam waste particles from dental office wastewater.

(b) "Dental amalgam" means a mixture of mercury and other metals used as a dental restorative material.

(c) "Dental amalgam waste" means waste from a dental office containing any of the following:

(i) Contact amalgam waste, which means dental amalgam that has been in contact with the patient including, but not limited to, extracted teeth with dental amalgam

restorations; carving scrap collected at chair-side; and dental amalgam captured by chair-side traps, vacuum pump filters, amalgam separators, or other dental amalgam capture devices.

(ii) Non-contact amalgam scrap, which means dental amalgam that has not been in contact with the patient including, but not limited to, excess dental amalgam mix remaining at the end of a dental procedure.

(iii) Empty amalgam capsules, which means individually dosed containers left over after mixing precapsulated dental amalgam.

(iv) Dental amalgam that may have accumulated in the plumbing system or that is found in other areas of a dental office.

(d) “Dentist,” means an individual licensed under article 15 of the code, MCL 333.16101 to 333.18838, and these rules, to engage in the practice of dentistry, who uses or removes dental amalgam or who owns or operates a dental office that generates dental amalgam waste.

(e) “Discharge” means the release of any dental amalgam waste into the environment. This includes any releases to land, ground or surface waters, septic systems, or wastewater treatment systems.

(f) “Holding tank” means a closed, watertight, sealed structure designed and used to receive and store wastewater. Holding tanks are designed and constructed for ultimate disposal of collected wastewater at another site.

(g) “Recycle” or “recycling” means sending mercury or dental amalgam waste to either the contracted separator company or a facility in the United States that reclaims or distills the mercury for reuse. “Recycle” or “recycling” does not include any of the following:

(i) The on-site processing of mercury or dental amalgam waste.

(ii) The sale, donation, or exchange of mercury or dental amalgam waste through internet lists.

(iii) The sale or donation of mercury or dental amalgam waste to any individual or company for any other reuse purpose.

(2) Unless otherwise defined in these rules, the terms defined in the code have the same meanings when used in this part.

History: 2012 AACCS; 2021 AACCS.

R 338.11811 Amalgam separator; installation and operation; requirements. Rule

1811. (1) A dentist shall have installed an amalgam separator on each wastewater drain in the dentist’s dental office that is used to discharge dental amalgam waste. In addition to meeting the requirements of the code and these rules, a dentist who is required to install an amalgam separator, under section 16631 of the code, MCL 333.16631, shall comply with all of the following:

(a) Install an amalgam separator that meets the requirements of R 338.11813.

(h) Install, operate, and maintain the amalgam separator according to the manufacturer’s instructions.

(i) Ensure the installed amalgam separator is properly sized to accommodate maximum dental amalgam wastewater flow rates at the dental office. The maximum allowable flow rate through an amalgam separator at a dental office must not exceed the

maximum flow rate capacity at which the amalgam separator was tested under R 338.11813(1)(a).

(d) Ensure that all wastewater from the dental office containing dental amalgam waste passes through an installed and properly functioning and maintained amalgam separator before being discharged.

(2) Subrule (1) of this rule does not apply to any of the following:

- (a) Oral and maxillofacial surgeons.
- (b) Oral and maxillofacial radiologists.
- (c) Oral and maxillofacial pathologists.
- (d) Orthodontists.
- (e) Periodontists.
- (f) Dentists while providing services in a dental educational program, in a hospital, or through a local health department.
- (g) Dentists who install and use a holding tank and do not discharge amalgam waste.

History: 2012 AACS; 2021 AACS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11813 Amalgam separator; requirements.

Rule 1813. (1) An amalgam separator that is installed in a dental office under R 338.11811 must meet all of the following requirements:

(a) Be certified as passing the International Organization for Standardization (ISO) 11143 standard, 2008, for evaluating amalgam separators.

(b) Have a removal efficiency of not less than 95% as determined by the testing required under subdivision (a) of this subrule, based on the overall average of the 3 empty and the 3 simulated full test results.

(c) Be tested and certified by 1 of the following:

- (i) SP Technical Research Institute of Sweden.
- (ii) TUV Nord, Germany.
- (i) NSF international.
- (ii) Both of the following:

(A) A testing laboratory accredited by an accreditation body that is a signatory to the International Laboratory Accreditation Cooperation's mutual recognition arrangement and has a scope of accreditation that includes ISO 11143 standard, 2008.

(B) A certification body accredited by an accreditation body that is a signatory to the International Accreditation Forum's multilateral recognition arrangement and has a scope of accreditation that includes ISO 11143 standard, 2008.

(2) Any amalgam separator that meets the requirements of subrule (1) of this rule qualifies as an amalgam separator approved by the board.

History: 2012 AACS; 2021 AACS; 2023 MR 19, Eff. Oct. 2, 2023.

R 338.11815 Collection, disposal, and recycling of dental amalgam waste; requirements.

Rule 1815. (1) A dentist shall comply with all of the following:

- (a) Use amalgam only in a precapsulated form.
 - (b) Salvage, store, and recycle non-contact and contact dental amalgam materials, including empty amalgam capsules.
 - (c) Collect and recycle extracted teeth or portions of teeth that contain dental amalgam materials.
 - (d) Store all dental amalgam waste in enclosed and structurally sound containers until a sufficient amount has been collected for shipment to a reclamation facility or recycler or at a minimum, recycle annually.
 - (e) Label all containers holding dental amalgam waste. The label must include at a minimum, the title “dental amalgam waste for recycling” and the date the waste was initially placed in the container.
 - (f) Use chair-side traps to retain amalgam and recycle the content.
 - (g) Recycle all amalgam materials collected in amalgam separators, vacuum pump filters, chair-side traps, or other wastewater processing devices.
 - (h) Ensure that the separators operate properly and do not become full and bypass. This may include inspecting the separators annually, halfway through the operating life, or as required by the manufacturer.
 - (i) Follow the steps for the cleanup of mercury spills as recommended by the Michigan department of health and human services at www.michigan.gov/mercury.
- (2) A dentist shall not do any of the following:
- (a) Store bulk elemental mercury that is not in capsule form.
 - (b) Put dental amalgam waste down a toilet or drain.
 - (c) Put dental amalgam waste or empty amalgam capsules into trash containers, or biohazard or infectious waste bags.
 - (d) Disinfect teeth or any item containing dental amalgam by autoclaving or using heat.
 - (e) Use cleaners containing bleach or chlorine to flush drains or wastewater lines.
- (3) A dentist shall train and have written procedures for training dental office staff who manage or dispose of dental amalgam waste to ensure compliance with this rule.
- (4) This rule does not apply to a dentist listed in R 338.11811(2)(a) to (f). A dentist who installs and uses a holding tank and does not discharge amalgam waste shall comply with the requirements of subrules (1), (2), and (3) of this rule, as applicable.

History: 2012 AACCS; 2021 AACCS.

R 338.11817 Record keeping.

Rule 1817. (1) A dentist who is subject to the provisions of R 338.11811 shall maintain records at his or her dental office that include all of the following:

- (a) Type of amalgam separator installed, including the manufacturer and model.
- (b) Date the amalgam separator became operational.
- (c) Documentation verifying that the amalgam separator meets the requirements of R 338.11813.
- (d) Documentation of the manufacturer’s instructions for the operation and maintenance of the amalgam separator.
- (e) Service records for each amalgam separator in use at the dental office that includes all of the following:

- (i) Dates of maintenance.
- (ii) Dates separator contents were recycled.
- (iii) Name of the staff or contractor performing the service.
- (f) Documentation verifying that the dentist disposed of and recycled any dental amalgam waste that was generated from the individual's dental office consistent with the requirements of R 338.11815. The documentation must include all of the following:
 - (i) Name and address of the collection service or recycler.
 - (ii) Amount by weight of dental amalgam waste that was collected and the date it was collected or shipped from the dental office for recycling.
 - (iv) Name and address of the facility where the dental amalgam waste is recycled.
 - (v) Shipping or manifest papers documenting transfer of the dental amalgam waste to the recycler.
- (2) Upon request by an authorized state official, local public health department staff, or local municipality's representative, a dentist subject to this rule shall provide the records required under subrule (1) of this rule.
- (3) A dentist subject to this rule shall retain the records required under subrule (1) of this rule for a minimum of 3 years.

History: 2012 AACCS; 2021 AACCS.

R 338.11819 Verification.

Rule 1819. With each license renewal, a dentist who is subject to the provisions of R 338.11811 shall verify on a form provided by the department that he or she is in compliance with these rules and provide the amalgam separator make and year that each separator was installed.

History: 2012 AACCS; 2021 AACCS.

R 338.11821 Compliance and enforcement.

Rule 1821. Failure to comply with the requirements of these rules, or the Department of Environment, Great Lakes, and Energy's amalgam reporting requirements is a violation of section 16221(h) of the code, MCL 333.16221, and may result in sanctions as provided for in the code, or under state or federal law. The amalgam reporting requirements can be found at: <https://www.michigan.gov/egle/about/organization/Water-Resources/industrial-pretreatment/epa-dental-rule>.

History: 2012 AACCS; 2021 AACCS; 2023 MR 19, Eff. Oct. 2, 2023.