



PRESIDENT'S MESSAGE REZA J. SHARIFI, D.M.D.



The Rearview Mirror – Some History and Context

In my first official communication to such esteemed colleagues as president of the board, it seemed fitting to begin with something “presidential” sounding: A quarter score and zero years ago, I began my journey as the newest member of the Oregon Board of Dentistry. As a bright-eyed, bushy-tailed Oral Surgeon fresh out of the United States Army, working six days a week, I was still driven and motivated to serve more. I had served my country, but serving all communities in my home state was an itch that required scratching.

In my career thus far, I have been privileged to experience a broad array of dental healthcare delivery settings to include military hospitals, dental service organizations, academic institutions, and private practice. I feel comfortable in saying, “I’ve seen things!”

Over the past five years I have been a first-hand witness to the interaction of the Oregon Board of Dentistry, and its members, with dental health care providers in the State of Oregon regarding their treatment of and interaction with patients. The Board’s mission and activities are essential to establishing and enforcing standards, and investigating potential areas of concern, in service to the promotion of excellence in dental care in our Great State, and I am grateful for the privilege of being part of it.

I have also been fortunate to observe several past presidents, past and current board members, and to be a student of how their wisdom and discernment was brought to the table. I would like to specifically thank and recognize, amongst others, Gary Underhill, Todd Beck, Amy Fine, Yadira Martinez, Hai Pham, Jose Javier, Alicia Riedman, Jennifer Brixey, and Chip Dunn. Your “isms” continue to have a positive impact on our board.

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The Windshield – What is Ahead

Looking forward, I want to acknowledge the challenges of the “daily grind” that affects us collectively and individually, and our endeavors to find ways to prioritize and cope. Life gets hard, then it gets harder, and when you are down, it can continue to be merciless. Over the past several years a global pandemic, societal pressures and discord, social media, global conflict, and a world that seems to move at light speed (artificial intelligence, self-driving cars to name but a couple examples) have impacted us all. Increasingly, people find themselves depressed, defeated, angry, stressed, leading unhealthy lifestyles, or all the above. We are winning the war against the COVID-19 pandemic, but how will we fare in the struggle to cope with the pandemic of “everything else”? It affects everyone—our patients, providers, staff, close friends, and loved ones.

Unfortunately, for many, we avoid seeking treatment for reasons that range from denial of our condition, access to care, fear of treatment and medications and, most commonly, stigma.

What can we do? Studies dating back to the early 1900’s have shown that exercise, even in short spurts, are effective in helping to reset our mindset, improve memory, raise self-esteem, result in better sleep, increase energy, and improve your ability to deal with stress and anxiety. The past several years have been trying, exhausting, and humbling. What has personally helped me to persevere has been support from family and friends, intentional focus on self-care and love, exercise, eating healthy and, of course, the occasional but necessary Salt and Straw Chocolate Goopy Brownie binge...progress, not perfection!

Today, I feel happier than I can recall feeling in a long time, and there are exciting new things I’m looking forward to. For example, I recently rebranded and opened a new practice:

Skyline Oral, Facial, and Dental Implant Surgery...doing what I do best: surgery, anesthesia, advocating for and making my patients feel comfortable and cared for throughout the entire surgical process.

As president, I look forward to supporting a productive, cooperative, and cohesive team dynamic with our board staff and members. My goal is simply to uphold the mission “to promote quality oral health care and protect all communities in the State of Oregon by equitably and ethically regulating dental professionals.” I look forward to partnerships with all of you in service to that end!

Yours Truly,

Reza J. Sharifi, DMD, FACS ■

BOARD MEMBERS



REZA SHARIFI, D.M.D.

PRESIDENT
PORTLAND

SECOND TERM EXPIRES 2027

AARATI KALLURI, D.D.S.

VICE PRESIDENT
HILLSBORO

FIRST TERM EXPIRES 2025



OLESYA Z. SALATHE, D.M.D.

CLACKAMAS

FIRST TERM EXPIRES 2028

KRISTEN SIMMONS, R.D.H.

HILLSBORO

FIRST TERM EXPIRES 2028



GINNY JORGENSEN

CANBY

FIRST TERM EXPIRES 2028

SHARITY LUDWIG, R.D.H.

BEND

FIRST TERM EXPIRES 2026



SHEENA KANSAL, D.D.S.

PORTLAND

FIRST TERM EXPIRES 2025

TERRENCE CLARK, D.M.D.

WEST LINN

FIRST TERM EXPIRES 2026



MICHELLE ALDRICH, D.M.D.

SALEM

FIRST TERM EXPIRES 2026

CHARLES "CHIP" DUNN

HAPPY VALLEY

SECOND TERM EXPIRES 2025



SCHEDULED BOARD MEETINGS

2024 -25

- June 14, 2024
- August 23, 2024
- October 25, 2024
- December 13, 2024
- February 28, 2025
- April 25, 2025
- June 13, 2025
- August 22, 2025
- October 24, 2025
- December 12, 2025

A WORD FROM THE EXECUTIVE DIRECTOR

STEPHEN PRISBY



(From left to right) Chip Dunn, Jennifer Brixey, Alicia Riedman, RDH, Jose Javier, DDS & Stephen Prisby

Brevity, Courtesy, Equity, Fairness & Focus - these words are on my desk, and are what I strive for every day at the Oregon Board of Dentistry (OBD). This aligns with our mission and my goals as the OBD Executive Director since 2015.

The calendar & years roll on and a new normal has set in at the Board. I am grateful and impressed that the OBD Staff have been able to continue to show up at our downtown Portland Office and get our work done. We experience turnover like any organization, and yet we are able to maintain high levels of productivity, customer service and fulfill our mission with a small staff, additional work & reporting requirements. Roughly half the staff work a hybrid work model, reporting on-site three days a week and remote for two days. The others including myself, have a regular five day work week at the downtown Portland office. We are committed to providing you and anyone that interacts with us timely, accurate and helpful service.

In the spring of 2024 we said thank-you and farewell to three well-respected Board Members. The transitions continue of course as we welcomed their replacements and share biographies of the three new Board Members, whose terms began in April 2024.

Every April the Board elects its new president and thanked outgoing OBD President Chip Dunn for his contributions and leadership. I appreciated his commitment and support throughout his term and he brought his consumer focus to board activities. The picture accompanying this article was taken at the February 2024 Board Meeting recognizing outgoing Board Members for their service.

I am excited to work with Dr. Reza Sharifi who is the OBD's Board President for 2024 - 2025. This is a highlight of my job to work with a new president every year. I have 100% confidence in Dr. Sharifi, whose experience as an oral surgeon, long term tenure on the Board and support of the OBD should make it a productive and positive presidential term.

We highlight important news and rule changes in this newsletter since the last newsletter was published last year. We also keep the OBD website up to date and links to important rule changes, meeting agendas, meeting minutes, recordings, past newsletters, staff contact information and other important information on it.

I look forward to hearing from you if you have any questions or comments.

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OREGON WELLNESS PROGRAM



All licensees – dentists, dental therapists, and dental hygienists – have access to highly confidential mental health services through the Oregon Wellness Program (OWP). Self-referral is all that is required and the Board is not involved or aware of anyone accessing it.

Any Licensee may contact the OWP and receive up to eight free visits per calendar year. Interested licensees can make a self-referral by visiting the OWP website to review available providers and contact providers directly to schedule an appointment. Visits are available in-person or via telehealth. There is no reporting to a primary health provider or billing of insurance.

The Oregon Board of Dentistry is committed and supportive of our licensees to utilize all available tools for success in their practice and in all aspects of life.

<https://oregonwellnessprogram.org/> ■



For program questions or help choosing a mental health provider, call 541-242-2805.
If you are experiencing a mental health crisis, call 9-1-1 or 9-8-8.

FAREWELL & THANK YOU FOR YOUR SERVICE



Farewell & Thank You for Your Service
The OBD said farewell & thank you to three Board Members whose second terms of service concluded in spring of 2024.

Jennifer Brixey indicated she would not seek another term on the OBD. She joined the Board on September 28, 2018 for a partial first term, and the current term ended on April 6, 2024. We appreciate and thank Ms. Brixey for her service and support on the Board. Her lived experience, tribal background and consumer's point of view has been very valuable in OBD discussions and decisions.

Alicia Riedman's, RDH, service on the Board concluded on March 31, 2024. She first joined the Board on April 1, 2015 for a partial first term. She had one of the longest service records of any board member (based on recent records), with almost 9 years of service on the Board. We appreciate and thank Ms. Riedman for her years of service and support on the Board. Her FQHC dental outreach program experience, compassion for oral health care in children and long tenure on the Board has been very valuable in OBD discussions and decisions.

Dr. Jose Javier's service on the Board concluded on April 1, 2024. He completed two full terms of service, initially joining the Board on June 1, 2016. We appreciate and thank Dr. Javier for his service and support on the Board. His clinical experience in private practice, dental director of a FQHC and insight has been very valuable in OBD discussions and decisions.

Throughout their time on the Board they served as OBD President or Vice President at one time and chaired various OBD Committees. They committed their time and attention to regular board meetings, special board meetings, committee meetings, rulemaking hearings, workgroups, two Strategic Planning Sessions and helped steer the OBD through the most recent worldwide pandemic. ■

WELCOME



Dr. Olesya Z. Salathe DMD completed her undergraduate studies at George Fox University before pursuing her graduate degree at OHSU. Since 2010, Dr. Salathe has been serving her community through private practice, with offices located in Molalla and West Linn. Beyond her practice, Dr. Salathe is actively engaged in leadership roles at the county, state, and national levels within Clackamas, Oregon, and the American Dental Association (ADA). Her commitment to advancing dentistry extends beyond the clinic, as she strives to shape the future of oral healthcare through advocacy and innovation. Outside of her professional endeavors, Dr. Salathe finds joy in her role as a mother to two teenagers. She and her husband reside on a 20-acre ranch, where they cherish the beauty of rural life.



Kristen Simmons is an assistant professor at Pacific University School of Dental Hygiene Studies. In 2020, she completed her doctoral degree in Education and Leadership from Pacific University. Kristen is actively involved in various initiatives aimed at improving the quality of oral healthcare. She enjoys working with the constantly evolving oral healthcare system to emphasize the importance of quality measurement, which can lead to better oral health outcomes.



Virginia (Ginny) Jorgensen is a native Oregonian who was born and raised in Northeast Portland. She raised two daughters in Gladstone and now resides in Wilsonville. Her siblings, daughters and grandchildren all live in the Portland metro area. As a dental assistant in general and orthodontic practices Ginny learned about patient advocacy and the importance of dental health. Her desire to help patients have a positive experience during dental treatment guided her toward becoming a Certified Dental Assistant, an Oregon Expanded Functions Dental Assistant and a dental assisting educator. Ginny believes that all Oregon Citizens should receive safe, quality dental care from trained, responsible dental health care workers. She is actively involved in the Oregon Dental Assistant Association, a professional organization that focuses on education, community involvement and patient advocacy.

OBD RULE CHANGES EFFECTIVE MAY 1, 2024

The Oregon Board of Dentistry and other state agencies operate under a system of administrative rules to ensure fairness and consistency in procedures and decisions. Periodically, these Oregon Administrative Rules (OAR) must be adopted, amended or repealed. OAR are written within the agency's statutory authority granted by the Legislature. Official Notice of rulemaking is provided in the Secretary of State's Bulletin.

The Board convened its committees to review potential rule changes throughout 2023 and conducted a public rulemaking hearing on December 15, 2023. It held open the public comment period until January 19, 2024. The Board then reviewed the rules again at its February 23, 2024 Board Meeting and approved them with an effective date of May 1, 2024. 10 rules were amended and 1 new rule was adopted. The complete text of rule changes and updated Dental Practice Act can be found on the OBD Website or contact OBD staff if you have any questions.

1. AMEND: 818-012-0005 RULE SUMMARY: The reference to dental implant training requirements are being refined for clarity.
2. AMEND: 818-021-0060 RULE SUMMARY: The reference to dental implant training requirements are being refined for clarity.
3. AMEND: 818-026-0010 RULE SUMMARY: Minimal sedation will now include reference to non-intramuscular methods and recovery is defined in the rule as well.
4. AMEND: 818-026-0050 RULE SUMMARY: The rule is clarifying that no permit holder shall have more than one person under nitrous oxide sedation at the same time
5. AMEND: 818-035-0030 RULE SUMMARY: The rule is adding optional additional functions including intravenous access, phlebotomy and blood draw with successful completion of a Board approved course
6. AMEND: 818-042-0020 RULE SUMMARY: The rule clarifies that dental assistants may take physical impressions and digital scans.
7. AMEND: 818-042-0100 RULE SUMMARY: The rule is deleting reference to taking impressions and other orthodontics.

8. AMEND: 818-042-0114 RULE SUMMARY: A number is being removed, no change to language or intent of rule

9. AMEND: 818-042-0115 RULE SUMMARY: The rule is adding that certified dental assistants can perform phlebotomy for dental procedures.

10. AMEND: 818-042-0117 RULE SUMMARY: The rule is adding that the certified dental assistant may perform phlebotomy procedures after completing a Board approved course.

11. ADOPT: 818-038-0022 RULE SUMMARY: The new rule is adding optional additional functions including intravenous access, phlebotomy and blood draw with successful completion of a Board approved course. ■

PATIENT RECORDS

The OBD regularly interacts with unhappy consumers and also Licensees who are frustrated in trying to track down patient records. Please do your best to ensure patient records are transferred appropriately in all circumstances: patients transferring offices, retiring, relocating or closing a practice.

Professional relations, customer service and doing the right thing should ensure patient records are transferred in a timely manner and will reduce the number of complaints the Board receives every year. It will also speed up investigations and the time it takes to close board cases.

Diagnostic Records- in general patient records need to be transferred or given to the patient within 14 days. You do not need a written request to do it.

When changing practice locations, closing a practice location or retiring, each licensee must retain patient records for the required amount of time or transfer the custody of patient records to another licensee licensed and practicing dentistry in Oregon. Transfer of patient records pursuant to this section of this rule must be reported to the Board in writing within 14 days of transfer, but not later than the effective date of the change in practice location, closure of the practice location or retirement. Failure to transfer the custody of patient records as required in this rule is unprofessional conduct.

Please review OAR 818-012-0032 Diagnostic Records and 818-012-0070 Patient Records for more detail and specific language in the rules.

CLARIFICATION ON RADIOGRAPHS

The Oregon Board of Dentistry (Board) regularly receives questions about the requirement for radiographs/X-rays and how often they are required.

The decision about whether and/or when to take radiographs is the responsibility of Oregon licensed dental professionals, including Dentists, Dental Therapists, or an Expanded Practice Permit Dental Hygienist. It should be based on factors including the patient's oral health, patient's age, the risk for disease, and any sign or symptoms of oral disease that a patient may be experiencing.

The Oregon Board of Dentistry does not have a time requirement for how often radiographs or X-rays are to be taken. So, if your Dentist says we (the Board) require X-rays every six months or every year, that is not true.



The dental professional uses their professional judgment to decide when radiographic imaging is clinically indicated, not the patient.

Dental radiographs are an important diagnostic tool to assist your dental professional in treatment planning, and it is the responsibility of the treating dental professional to determine how often they are needed.

The Board takes the following into consideration when it reviews care provided by our licensees:

Oregon Revised Statute (ORS) 679.140(4) states: "In determining what constitutes unacceptable patient care, the board may take into account all relevant factors and practices, including but not limited to the practices generally and currently followed and accepted by persons licensed to practice Dentistry in this state, the current teachings at accredited dental schools, relevant technical

reports published in recognized dental journals, and the desirability of reasonable experimentation in the furtherance of the dental arts."

In order to diagnose dental pathology and complete an adequate examination on a new or existing patient, the dental professional must have adequate dental radiographs, periodontal probings (if appropriate), and a current medical history. If pathology is diagnosed during the dental examination, the dental professional is obligated to explain the problem, the treatment options, the risks of providing or not providing the treatment, and answer questions. The dental professional is also required to document in the patient's records any dental pathology that is diagnosed during the examination.

When treatment is provided, the dental professional is expected to have obtained the patient's informed consent prior to providing the treatment. Patients may choose to refuse diagnostic tests, dental radiographs, or recommended treatment. A dentist is not obligated to treat a patient who does not agree with a treatment plan, including X-rays. The Board cannot mandate that dental professionals provide unacceptable patient care, and the Board cannot force a licensee to provide treatment for a patient if, in their professional judgement, they do not have the ability to obtain an accurate dental diagnosis or dental justification for treatment. ■



Have you moved or changed work locations recently?

ORS. 679.120(4), 679.615(5), and 680.074(4) requires that licensees update the Board within 30 days of any change of address.

To update your contact info, please go to www.oregon.gov/dentistry and click "Licensee Portal" for instructions.

DENTAL IMPLANT RULE CHANGES

NEW CE REQUIREMENTS NOW EFFECTIVE IN 2024

At its June 17, 2022 meeting, the Board voted to change the effective date of the rules from July 1, 2022 to January 1, 2024.

Beginning January 1, 2024, Oregon dentists will be required to complete 56 hours of hands on clinical implant course(s), at an appropriate postgraduate level, prior to surgically placing dental implants. The Oregon Board of Dentistry (OBD) recommends that proof of meeting the training requirements be maintained indefinitely, as copies may be requested at random audits or complaint investigations.

Graduates of specialty training programs in Oral and Maxillofacial Surgery, Periodontics, and Prosthodontics that comply with CODA standard 4 curriculum guidelines (or similar educational requirements) who have been trained to competency in surgical implant placement may qualify to surgically place implants with documentation of completing the required training.

Only hours completed as part of CODA accredited postdoctoral dental programs, or through education providers that are AGD PACE or ADA CERP approved will qualify to meet the initial 56-hour training requirement.

Additionally, beginning January 1, 2024, Oregon dentists will be required to complete seven hours of continuing education related to the placement and/or restoration of dental implants each licensure renewal period. Dentists renewing in Spring 2024, and all subsequent renewing dentists, will be required to complete the required 7 hours of dental implant CE to be in compliance, if they are placing dental implants.

Below are the most frequently asked questions from our Implant Rules FAQ document on the OBD website. For the full document, please visit: <https://www.oregon.gov/dentistry>

What language (effective January 1, 2024) was added to the Scope of Practice Rule OAR 818- 012-0005?

(5) A dentist may place dental implants to replace natural teeth after completing a minimum of 56 hours of hands on clinical dental implant course(s), which includes treatment planning, appropriate case selection, potential complications and the surgical placement of the implants under direct supervision, and the provider is a Commission on Dental Accreditation (CODA) accredited postdoctoral dental education program, or a provider that has been approved by the Academy of General Dentistry Program Approval for Continuing Education (AGD PACE) or by the American Dental Association Continuing Education Recognition Program (ADA CERP).

(6) A dentist placing dental implants must complete at least seven (7) hours of continuing education related to the placement and or restoration of dental implants every licensure renewal period. (Effective January 1, 2024).

What language (effective January 1, 2024) was added to the Continuing Education Rules of OAR 818-021-0060?

(8) A dentist placing dental implants must complete at least seven (7) hours of continuing education related to the placement and/or restoration of dental implants every licensure renewal period (Effective January 1, 2024.)

How and why did the OBD decide to implement these rule changes regarding dental implants?

The OBD investigated 82 dental implants cases between February 2014 and August 2017. Of those cases, 41% resulted in Disciplinary Action, which was equally distributed between specialists and general practitioners. During Strategic Planning in 2016, the OBD identified dental implant complications and the subsequent complaints as a significant problem in Oregon. Dental implant safety was codified in the OBD's 2017-2020 Strategic Plan as a priority issue, and it has remained an ongoing safety concern of the Board through the present. At the April 21, 2017 Board Meeting, in order to effectively protect the public, and per ORS 679.280, the OBD established an ad hoc Committee named the "Dental Implant Safety Workgroup" to research, review, and discuss dental implants, implant complications, and the resulting investigations. The Workgroup's ultimate goal was to advise the OBD on the most effective actions to protect the public and educate dentists regarding dental implants. The Workgroup included OBD Board Members, OBD Staff and Licensees (both specialists and general practitioners).

If you would like more detail on the communications and timeline for the dental implant rule changes, you can find that document on the home page of the OBD website: <https://www.oregon.gov/dentistry>

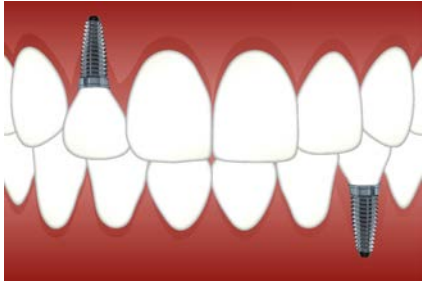
I am concerned that I will not be able to obtain proof of completion of my 56 hours of hands on clinical implant training, because some or all of those hours were completed long ago. Many records retention policies limit to seven years or less. Will I just be "out of luck" if I can't pull together proof of certain courses?

This information will be reviewed on a case-by-case basis, typically as part of a CE audit or an investigation. It is expected that the Licensee would put in their best effort to obtain this information in the event that the training was completed many years ago. The Board will review all relevant information and circumstances before taking any action.

I have placed a great number of implants over the years with a high success rate. Can I be "grandfathered" into placing implants without taking 56 hours of hands on clinical courses?

There is not currently a portion of the rules that allows this. In order to place implants after January 1, 2024, you will need to meet the 56 hour requirement in OAR 818-012-0005(4).

Does the course need to include practice on human patients? Or can it be on a manikin/typodont or an animal jaw?



The Board does not specify whether or not the implants need to be placed in a human. As long as the course meets the requirements of OAR 818-012-0005(4) it is acceptable.

Do the 56 hours of hands on clinical course(s) need to be direct patient care? Or can didactic course instruction be included in the 56 hours?

The Board defers to the course instructor to define “clinical hands on,” and determine how many hours of the course are dedicated to topics and format as stated in the rule. This could include some didactic instruction, provided it is under direct supervision as stated in the rule. ■

DENTAL THERAPY

The Oregon Board of Dentistry (OBD) and other state agencies operate under a system of administrative rules to ensure fairness and consistency in procedures and decisions.

The Board set about the task of promulgating new dental therapy rules due to the passage of HB 2528 (2021). The Board convened a new standing Committee named the Dental Therapy Rules Oversight Committee, which met five times and made recommendations to the Board. The Board held a special Board Meeting on March 30, 2022 dedicated to reviewing the Committee’s recommendations and to hear from the dental therapy community on the proposed rules.

The Board held two public rulemaking hearings on April 22, 2022 and May 18, 2022. Public comment on the proposed rule changes was accepted from March 31, 2022 until June 3, 2022.

At the June 17, 2022 Board Meeting, the Board adopted 10 new dental therapy rules, and amended 18 other rules. These rule changes were effective July 1, 2022.

Official Notice of rulemaking is provided in the Oregon Secretary of State’s Bulletin. In addition, you can email information@obd.oregon.gov to be put on the list to receive important OBD notices. Due to space constraints in this newsletter, the full text of the OARs and all rules can be found on our website: <http://www.oregon.gov/dentistry>

The important news on Dental Therapy:

- Dental Therapists have been able to apply for licensure since July 1, 2022.
- Oregon Health Authority (OHA) Dental Pilot Projects #100 and #300 are currently providing the applicant pool for individuals to become licensed as Oregon dental therapists.
- Graduates of CODA accredited Dental Therapy programs are also eligible to apply for licensure in Oregon. Currently, the the number of dental therapy programs is small but growing.
- Oregon dental hygienists who have completed the OHA’s dental pilot project #300 will be eligible to become dually licensed as both a dental hygienist and dental therapist.
- Beginning January 1, 2025, OHA Dental Pilot Projects #100 and #300 will sunset, and applicants will have to graduate from a CODA accredited dental therapy program to be eligible for an Oregon License.
- Dental Therapists must practice under the supervision of an Oregon licensed Dentist, or a dentist legally able to practice in Oregon under ORS 679.025. An Oregon licensed dentist, or a dentist legally able to practice in Oregon under ORS 679.025 may supervise and enter into no more than three collaborative agreements at any one time.
- Dental Therapists must dedicate at least 51 percent of their dental therapist’s practice to patients who represent underserved populations, as defined by OHA by rule, or patients located in dental care health professional shortage areas, as determined by the authority.
- Dental Therapists must submit a signed copy of their verification of collaborative agreement at least annually to the OBD. The annual submission on the collaborative agreement shall be submitted between August 1 and September 30 each year. If the collaborative agreement is revised between the annual submission, the dental therapist must submit to the OBD the signed revision within 14 days.
- The OBD’s Dental Therapy Rules Oversight Committee will continue as a standing committee. It will meet as needed to update rules, and address issues, as the practice of Dental Therapy evolves in Oregon. ■

OREGON BOARD OF DENTISTRY

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