**OREGON BOARD OF DENTISTRY**
**MINUTES**
**JUNE 12, 2026**

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| MEMBERS PRESENT: | Sheena Kalia, D.D.S., President<br>Sharity Ludwig, R.D.H., E.P.P., Vice President<br>Reza Sharifi, D.M.D.<br>Terrence Clark, D.M.D.<br>Michelle Aldrich, D.M.D.<br>Olesya Salathe, D.M.D.<br>Kristen Simmons, R.D.H., E.P.P.<br>Ginny Jorgensen<br>Kieshawn Lewis |
| STAFF PRESENT: | Haley Robinson, Executive Director<br>Angela Smorra, D.M.D., Dental Director/Chief Investigator<br>Winthrop "Bernie" Carter, D.D.S., Dental Investigator<br>Kathleen McNeal, Licensing Manager<br>Gabriel Kubik, Investigator<br>Dawn Dreasher, Office Specialist |
| ALSO PRESENT: | Joanna Tucker-Davis, Sr. Assistant Attorney General |
| VISITORS ALSO PRESENT: | Brett Hamilton, Director of Government and Regulatory Affairs (ODA); Amy Coplen, R.D.H., D.T. (ODHA/Pacific University); Mary Harrison, Vice President, Oregon Dental Assistants Association (ODAA); Molly McGrew (ODHA) |
| VIA ZOOM*: | Amberlena Fairlee, D.M.D., President, Oregon Dental Association (ODA); Lisa Rowley, Advocacy & Membership Director, Oregon Dental Hygienists' Association (ODHA); Catrice Opichka; Richael Cobler; Dan Ta; Alicia Riedman; Michelle Lee; Kelly Jones; Karan Bershaw; Mary Ellen Murphy, Government Relations Associate at DANB; Amanda Cameron; Stephen Prisby; Kari Hiatt; |

*This list is not exhaustive, as it was not possible to verify all participants on the Zoom.

**Call to Order:** The meeting was called to order by the President at 8:00 a.m. President Kalia then read the Mission Statement as follows:

> The mission of the Oregon Board of Dentistry is to promote quality oral health care and protect all communities in the State of Oregon by equitably and ethically regulating dental professionals.

President Kalia welcomed everyone to the meeting and had the Board Members, Joanna Tucker-Davis, Haley Robinson, and OBD staff introduce themselves. President Kalia announced that the Board had a quorum.

## NEW BUSINESS

### Approval of April 24, 2026 Minutes

Ms. Simmons moved and Dr. Aldrich seconded that the Board approve the minutes from the April 24, 2026, Board Meeting as presented. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

## ASSOCIATION REPORTS

### Oregon Dental Association (ODA)

Dr. Amberena Fairlee, President of ODA, congratulated Dr. Aaron Tinkle and Dr. Jared Thompson on being appointed to serve on the Board of Dentistry. Dr. Fairlee said the ODA is excited to have the opportunity to work with them. Dr. Fairlee thanked Dr. Michelle Aldrich and Dr. Terrence Cark again for their four years of service to the Oregon Board of Dentistry.

Dr. Fairlee reported that on the previous weekend she had the privilege of participating in the OHSU School of Dentistry Hooding Ceremony welcoming 70 new dentists to that wonderful profession. Dr. Fairlee said the ODA always appreciates the school allowing ODA to speak at the Hooding Ceremony.

Dr. Fairlee reported that she had the pleasure of giving the ODA's Student Leadership Award to recipient Dr. Aaron Bell-Cares. Dr. Fairlee noted that Dr. Bell-Cares served as the ASDA Student Liaison to the ODA Advocacy team in 2024-26, adding that during that time, Dr. Bell-Cares was a strong advocate for dentistry and oral health at the state and national level and provided invaluable insight to the ODA.

Dr. Fairlee shared that she recently had the pleasure of watching the Portland Fire play the Indiana Fever with Governor Kotek. Dr. Fairlee said the Governor has always been a big supporter of dentistry and oral health. Dr. Fairlee shared that they discussed the current workforce shortages, the growing expense of dental education/student debt, and the weight of operating a practice with increasing costs and stagnant reimbursements.

Dr. Fairlee announced that the date of the 2027 Oregon Dental Conference (ODC) has been changed to April 29-May 1, 2027. Dr. Fairlee explained that the adjustment was made to support the overall success of the meeting, noting that it is important that the ODA not overlap dates with other West Coast conferences so that the best exhibitors and speakers would be available for OCD attendees.

### Oregon Dental Hygienists' Association (ODHA)

Amy Coplen, R.D.H., D.T., ODHA member, reported that the first class has completed the new dental hygiene program at **Rogue Community College**. Ms. Coplen stated that

all **20 students** have passed the National Board Dental Hygiene Exam and the Local Anesthesia Clinical Board Exam. Ms. Coplen said they will receive their associate degrees on June 13, 2026, at Rogue's Commencement Ceremony.

Ms. Coplen reported that **Oregon Institute of Technology** is pleased to offer a new **Master of Science in Dental Hygiene** (MSDH) program. Ms. Coplen shared that this program is the first of its kind in Oregon and one of a limited number offered nationwide. Ms. Coplen explained that this fully online graduate program will allow dental hygiene students and graduates to earn the highest degree currently offered in the dental hygiene field. Ms. Coplen added that this degree can open career pathways in education, public health, research, administration, and business. Ms. Coplen announced that the program officially launches in the summer term 2026 and that Darlene Swigart, MS, EPDH, FADHA will serve as MSDH program director and primary advisor. Ms. Coplen instructed everyone to please contact Darlene at **darlene.swigart@oit.edu** for more information.

**Oregon Dental Assistants Association (ODAA)**

Mary Harrison, Vice President of ODAA, thanked the Board for the opportunity to share a report of some of ODAA's activities.

Ms. Harrison stated that ODAA representative, Linda Kihs, has represented ODAA for many years in meetings with Radiation Protection Services of the Public Health Division of the Oregon Health Authority. Ms. Harrison reported that during a meeting that week they discussed budget/funding, training, and product updates among other topics. Ms. Harrison clarified that no dental issues were discussed at the meeting. Ms. Harrison added that, in the past, Ms. Kihs was instrumental in the discussion and review of the thyroid collar for minors, and that the ODAA appreciates her input regarding dental safety.

Ms. Harrison said the ODAA looked forward to the graduating classes of dental assistants from the CODA programs and other dental assistant schools throughout Oregon, adding that these assistants will help with what seems to be a shortage in Oregon. Ms. Harrison stated that ODAA continues to work with many others on that issue.

Ms. Harrison shared some of ODAA's ideas for addressing the workforce shortage, including working with PCC and possible collaboration with a panel consisting of dental practices that utilize Restorative and Local Anesthesia assistants. Ms. Harrison explained that the panel would include dentists, assistants, front office, and hygienists and would explore how they work together in scheduling and the benefits for patients and for the offices that utilize this concept to show positive results for all involved. Ms. Harrison shared her hope that this activity might be part of the 2027 ODC as an example of possible improved access to care, better production, and less stress in the office.

Ms. Harrison stated that ODAA continues to support and appreciate the DAWSAC committee and supports the registration of dental assistants and the survey the Board would be working on during the meeting.

Ms. Harrison reported that the ODAA website is frequently updated with the latest

continuing education courses available, not only ODAA courses but also those of PCC and any other related dental assistant courses. Ms. Harrison reiterated that ODAA is very proud of its website and wants to share all the many links and helpful information it contains. Ms. Harrison invited everyone to take a look at the ODAA website.

Ms. Harrison reminded everyone that the 4th of July is coming up next, saying, "Be careful. I say have a fifth on the fourth."

**ADEX**

Stephen Prisby, Regulatory and Educational Affairs Director at ADEX, provided a report and updates to the Board.

**COMMITTEE AND LIAISON REPORTS**

**Licensing, Standards & Competency Committee**

Dr. Kalia presented items for Board discussion from the April 7, 2026, Licensing, Standards & Competency Committee meeting.

OAR 818-042-0117 - Phlebotomy

The Board reviewed prepared materials about current Board approved phlebotomy courses and discussed minimal requirements for such courses. The Board also discussed whether basic chairside dental assistants should be allowed to receive training and perform phlebotomy on patients or if the dental assistant must meet minimum certification requirements before phlebotomy training.

Dr. Kalia moved and Dr. Clark seconded that the Board refer Proposed Amendment to OAR 818-042-0117 as presented to the Rules Oversight Committee and establish parameters for phlebotomy training to include a minimum of four hours of didactic training and at least 20 direct supervised live phlebotomy starts during the education course. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**Draft Option #1 All dental assistants can obtain Phlebotomy training:**

OAR 818-042-0117

**Initiation of IV Line and Phlebotomy Blood Draw**

**The Board may certify a Dental Assistant to perform the expanded function anesthesia duties below if the applicant submits a completed application, pays the certification fee and:**

(1) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a ~~Certified Anesthesia~~ Dental Assistant may initiate an intravenous (IV) infusion line for a patient being prepared for IV medications, sedation, or general anesthesia under the Indirect Supervision of a dentist holding the appropriate anesthesia permit.

(2) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a ~~Certified Anesthesia~~ Dental Assistant may perform a phlebotomy blood draw under the Indirect Supervision of a dentist. Products obtained

through a phlebotomy blood draw may only be used by the dentist, to treat a condition that is within the scope of the practice of dentistry.

OAR 818-026-0055 – DA Administration of Nitrous Oxide

The Board discussed the issue of allowing dental assistants to assist in the administration of nitrous oxide under direct supervision. No Board action was taken.

OAR 818-035-0072 and OAR 818-042-0095 – ADEX Merger

Dr. Kalia moved and Ms. Ludwig seconded that the Board refer Proposed Amendments to OAR 818-035-0072 and OAR 818-042-0095 to require successful passage of a Dental Hygiene Restorative Examination approved by the Board as presented to the Rules Oversight Committee. The motion passed with SK, SL, RS, TC, MA, KS, GJ, and KL voting Aye.

**818-035-0072**
**Restorative Functions of Dental Hygienists**

(1) The Board shall issue a Restorative Functions Endorsement (RFE) to a dental hygienist who holds an unrestricted Oregon license, and has successfully completed:

(a) A Board approved curriculum from a program accredited by the Commission on Dental Accreditation of the American Dental Association or other course of instruction approved by the Board, and successfully passed the ~~CDCA-WREB-CITA's~~ **a** Dental Hygiene Restorative Examination ~~or other equivalent examinations~~ approved by the Board within the last five years; or

(b) If successful passage of the ~~CDCA-WREB-CITA's~~ **a** Dental Hygiene Restorative Examination ~~or other equivalent examinations~~ approved by the Board occurred over five years from the date of application, the applicant must submit verification from another state or jurisdiction where the applicant is legally authorized to perform restorative functions and certification from the supervising dentist of successful completion of at least 25 restorative procedures within the immediate five years from the date of application.

(2) A dental hygienist may perform the placement and finishing of direct restorations, except gold foil, under the indirect supervision of a licensed dentist, after the supervising dentist has prepared the tooth (teeth) for restoration(s):

(a) These functions can only be performed after the patient has given informed consent for the procedure and informed consent for the placement of the restoration(s) by a Restorative Functions Endorsement dental hygienist;

(b) Before the patient is released, the final restoration(s) shall be checked by a dentist and documented in the chart.

**818-042-0095**
**Restorative Functions of Dental Assistants**

(1) The Board shall issue a Restorative Functions Certificate (RFC) to a dental assistant who holds an Oregon EFDA Certificate, and has successfully completed:

(a) A Board approved curriculum from a program accredited by the Commission on Dental Accreditation of the American Dental Association or other course of instruction approved by the Board, and successfully passed ~~the~~ ~~CDCA-WREB-CITA's~~ **a** Dental Hygiene Restorative Examination ~~or other equivalent examinations~~ approved by the Board within the last five years, or

(b) If successful passage of ~~the~~ ~~CDCA-WREB-CITA's~~ **a** Dental Hygiene Restorative Examination ~~or other equivalent examinations~~ approved by the Board occurred over five years from the date of application, the applicant must submit verification from another state or jurisdiction where the applicant is legally authorized to perform restorative functions and certification from the supervising dentist of successful completion of at least 25 restorative procedures within the immediate five years from the date of application.
(2) A dental assistant may perform the placement and finishing of direct restorations, except gold foil, under the indirect supervision of a licensed dentist, after the supervising dentist has prepared the tooth (teeth) for restoration(s):
(a) These functions can only be performed after the patient has given informed consent for the procedure and informed consent for the placement of the restoration by a Restorative Functions dental assistant.
(b) Before the patient is released, the final restoration(s) shall be checked by a dentist and documented in the chart.

OAR 818-001-0087 – Predetermination on Licensure

Ms. Ludwig moved and Dr. Kalia seconded that the Board refer Proposed Amendments to Draft OAR and OAR 818-001-0087 regarding Predetermination on Licensure as presented to the Rules Oversight Committee. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**847-001-xxxx**
**Criminal Conviction Determination Process**
(1) As used in this rule:
(a) “Applicant” means a person who has applied for a license from the Oregon Board of Dentistry (Board).
(b) “Petitioner” means a person who has requested the Board review their criminal history to determine whether it will prevent them from being granted a license by the Board.
(2) A person who was convicted of a crime may petition the Board for a determination as to whether a criminal conviction will prevent the person from receiving a license issued by the Board.
(3) The petitioner must submit the Board’s determination request form, relevant criminal history documentation, and the required $75 fee.
(4) The Executive Director has the authority to review a petitioner’s request under this rule and to determine whether the petitioner’s criminal conviction(s) prevent the person from obtaining a license issued by the Board.
(5) The Board will reconsider a determination that a criminal conviction prevents the person from obtaining a license if the person submits a completed application for a license.
(6) Upon reconsideration, the Board may rescind a previous determination that a criminal conviction does not prevent the person from obtaining a license if the applicant:
(a) Has allegations or charges pending in criminal court;
(b) Failed to disclose a previous criminal conviction;
(c) Has been convicted of another crime during the period between the determination and the person’s submission of a completed application for an occupational or professional license; or

(d) Has been convicted of a crime that, during the period between the determination and the person's submission of a completed application for an occupational or professional license, became subject to a change in state or federal law that prohibits licensure for an occupational or professional license because of a conviction of that crime.
(7) Failure to disclose a previous criminal conviction includes any misrepresentation of a prior criminal conviction, any concealment or failure to disclose a material fact about a prior criminal conviction, or any other misinformation regarding a prior criminal conviction.
(8) Nothing in this rule prohibits the Board from denying licensure for a reason other than conviction of a crime.
(9) A determination made under this rule:
(a) Is subject to the same confidentiality requirements that are applicable to completed applications for a license; and
(b) Is not considered a final determination of the Board.

**818-001-0087**
**Fees**
(1) The Board adopts the following fees:
(a) Biennial License Fees:
(A) Dental —$490;
(B) Dental — retired — $0;
(C) Dental Faculty — $435;
(D) Volunteer Dentist — $0;
(E) Dental Hygiene —$279;
(F) Dental Hygiene — retired — $0;
(G) Volunteer Dental Hygienist — $0;
(H) Dental Therapy - $279;
(I) Dental Therapy - retired - $0;
(b) Biennial Permits, Endorsements or Certificates:
(A) Nitrous Oxide Permit — $40;
(B) Minimal Sedation Permit — $75;
(C) Moderate Sedation Permit — $200;
(D) Deep Sedation Permit — $400;
(E) General Anesthesia Permit — $400;
(F) Radiology — $75;
(G) Expanded Function Dental Assistant — $50;
(H) Expanded Function Orthodontic Assistant — $50;
(I) Instructor Permits — $40;
(J) Dental Hygiene Restorative Functions Endorsement — $50;
(K) Restorative Functions Dental Assistant — $50;
(L) Anesthesia Dental Assistant — $50;
(M) Dental Hygiene, Expanded Practice Permit — $75;
(N) Non-Resident Dental Background Check - $100.00;
**(O) Predetermination on Licensure Fee - $75**
(c) Applications for Licensure:
(A) Dental — General and Specialty — $445;
(B) Dental Faculty — $405;

(C) Dental Hygiene — $210;
(D) Dental Therapy - $210;
(E) Licensure Without Further Examination — Dental — $890.
(F) Licensure Without Further Examination — Dental Hygiene and Dental Therapy — $820
(d) Examinations:
(e) Jurisprudence — $0;
(f) Duplicate Wall Certificates — $50.
(2) Fees must be paid at the time of application and are not refundable.
(3) The Board shall not refund moneys under $5.01 received in excess of amounts due or to which the Board has no legal interest unless the person who made the payment or the person's legal representative requests a refund in writing within one year of payment to the Board.

AI Guidelines

The Board discussed drafting a proposed statement on the use of AI. The Board decided to postpone that discussion until after the new Board members have been installed.

**818-012-0070**
**Patient Records**

(1) Each licensee shall have prepared and maintained an accurate and legible record for each person receiving dental services, regardless of whether any fee is charged. The record shall contain the name of the licensee rendering the service and include:
(a) Name and address and, if a minor, name of guardian;
(b) Date description of examination and diagnosis;
(c) An entry that informed consent has been obtained and the date the informed consent was obtained. Documentation may be in the form of an acronym such as "PARQ" (Procedure, Alternatives, Risks and Questions) or its equivalent.
(d) Date and description of treatment or services rendered;
(e) Date, description and documentation of informing the patient of any recognized Treatment complications;
(f) Date and description of all radiographs, study models, and periodontal charting;
(g) Current health history; and
(h) Date, name of, quantity of, and strength of all drugs dispensed, administered, or prescribed.
(2) Each licensee shall have prepared and maintained an accurate record of all charges and payments for services including source of payments.
(3) Each licensee shall maintain patient records and radiographs for at least seven years from the date of last entry unless:
(a) The patient requests the records, radiographs, and models be transferred to another licensee who shall maintain the records and radiographs;
(b) The licensee gives the records, radiographs, or models to the patient; or
(c) The licensee transfers the licensee's practice to another licensee who shall maintain the records and radiographs.
(4) When a dental implant is placed the following information must be given to the patient in writing and maintained in the patient record:
(a) Manufacture brand;

(b) Design name of implant;
(c) Diameter and length;
(d) Lot number;
(e) Reference number;
(f) Expiration date;
(g) Product labeling containing the above information may be used in satisfying this requirement.
(5) 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.
(6) Upon the death or permanent disability of a licensee, the administrator, executor, personal representative, guardian, conservator or receiver of the former licensee must notify the Board in writing of the management arrangement for the custody and transfer of patient records. This individual must ensure the security of and access to patient records by the patient or other authorized party, and must report arrangements for permanent custody of patient records to the Board in writing within 90 days of the death of the licensee.

**818-012-0010**
**Unacceptable Patient Care**
The Board finds, using the criteria set forth in ORS 679.140(4), that a licensee engages in or permits the performance of unacceptable patient care if the licensee does or permits any person to:
(1) Provide treatment which exposes a patient to risk of harm when equivalent or better treatment with less risk to the patient is available.
(2) Fail to seek consultation whenever the welfare of a patient would be safeguarded or advanced by having recourse to those who have special skills, knowledge and experience; provided, however, that it is not a violation of this section to omit to seek consultation if other competent licensees in the same locality and in similar circumstances would not have sought such consultation.
(3) Fail to provide or arrange for emergency treatment for a patient currently receiving treatment.
(4) Fail to exercise supervision required by the Dental Practice Act over any person or permit any person to perform duties for which the person is not licensed or certified.
(5) Fail to ensure radiographic and other imaging are of diagnostic quality.
(6) Render services which the licensee is not licensed to provide.
(7) Fail to comply with ORS 453.605 to 453.755 or rules adopted pursuant thereto relating to the use of x-ray machines.
(8) Fail to maintain patient records in accordance with OAR 818-012-0070.
(9) Fail to provide goods or services in a reasonable period of time which are due to a patient pursuant to a contract with the patient or a third party.
(10) Attempt to perform procedures which the licensee is not capable of performing due

to physical or mental disability.
(11) Perform any procedure for which the patient or patient's guardian has not previously given informed consent provided, however, that in an emergency situation, if the patient is a minor whose guardian is unavailable or the patient is unable to respond, a licensee may render treatment in a reasonable manner according to community standards.
(12) Use the behavior management technique of Hand Over Mouth (HOM) without first obtaining informed consent for the use of the technique.
(13) Use the behavior management technique of Hand Over Mouth Airway Restriction (HOMAR) on any patient.
(14) Fail to determine and document a dental justification prior to ordering a Cone Beam CT series with field greater than 10x10 cm for patients under 20 years of age where pathology, anatomical variation or potential treatment complications would not be otherwise visible with a Full Mouth Series, Panoramic or Cephalometric radiographs.
(15) Fail to advise a patient of any recognized treatment complications.
(16) Fail to maintain proper storage or handling of medications, including injectables, according to federal regulations, guidelines, standards, and manufacturer recommendations.
(17) Fail to obtain and maintain a written informed consent prior to administering Botulinum Toxin Type A or dermal fillers.

**Potential statement on the use of AI**

**Example statement regarding AI from Oregon Medical Board Adopted April 2, 2024:**

Artificial/Augmented Intelligence (AI) is a tool, or set of tools, residing on a spectrum. AI may be as simple as a chatbot on a smartphone or as complex as a complex, algorithmic black box capable of suggesting treatment pathways for cancer. AI is developing rapidly in reach, capability, and quality, and medical providers and regulators must prepare for the ubiquity of AI, which is sure to envelop medical care with astonishing speed.

AI has tremendous promise. It will undoubtedly advance the standard of care, and clinicians who carefully embrace AI tools will ultimately detect pathologic subtlety, improve accuracy, and spend more quality time in face-to-face patient care than those who do not. AI can improve patient access and engagement by shifting administrative tasks away from the clinician while simultaneously increasing empathy shown to patients in spite of pervasive health care provider shortages.

Despite these technological advancements, the Oregon Medical Board will continue to hold licensees responsible for the care they provide to patients and expects licensees to use technology – including AI – responsibly and ethically. Regardless of who introduces AI into the practice, OMB licensees are expected to possess basic AI literacy in order to understand the technology and how to use it, explain its capabilities and limitations, assess the quality of AI outputs, and identify and guard against bias in AI algorithms. OMB licensees must guard against complacency and not compromise their own medical decision making by becoming overly reliant on AI.

The Oregon Medical Board recommends that clinicians become “tech-fluent" in relevant AI tools and incorporate them into their practice responsibly to keep pace with the increasing standard of care.

**Dental Assistant Workforce Shortage Advisory Committee (DAWSAC)**

Ms. Jorgensen announced that Dr. Salathe had joined as co-chair of the committee and provided an overview of the May 26, 2026, DAWSAC meeting.

Ms. Robinson stated she would include the May 13, 2026, article from DANB entitled *4 Ways Dentists Can Make Dental Assistants Feel Valued* in the August Board Book and in the next Newsletter.

Ms. Robinson presented the revised Dental Assistant Survey. The Board suggested changes to the survey and discussed how it would be distributed. The Board decided to email the survey to all licensees and to include an optional survey in licensure renewals.

Dr. Salathe presented data regarding enrollment and graduation rates among dental, dental hygiene, and dental assisting programs. Dr. Salathe requested that information be included in the August Board meeting for further discussion.

Ms. Jorgensen shared that Mary Ellen Murphy, Government Relations Associate at DANB, provided information regarding which states have regulatory/legislative authority over dental assistants and asked Ms. Robinson to include it in the next DAWSAC meeting.

## EXECUTIVE DIRECTOR’S REPORT

**Board Member and Staff Updates**

On behalf of the OBD, Director Robinson thanked Dr. Michelle Aldrich for her 4 years of service on the OBD from 2022 to 2026. Ms. Robinson stated that, as a private practitioner who started as a Registered Dental Hygienist, Dr. Aldrich brought an invaluable viewpoint, passion, and scrutiny to Board actions and proceedings.

On behalf of the OBD, Director Robinson thanked Dr. Terrence Clark for his 4 years of service on the OBD from 2022 to 2026. Ms. Robinson stated that, as a private practitioner and a licensed Oregon dentist for almost 40 years, Dr. Clark brought an important viewpoint, experience, and perspective to Board actions and proceedings.

Ms. Robinson shared that Dr. Aaron Tinkle and Dr. Jared Thompson had been nominated for Senate confirmation on June 15. Ms. Robinson announced that she will be scheduling onboarding and orientation sessions in July, and that she looks forward to officially welcoming them to the Board at their first meeting in August.

Ms. Robinson thanked Sharity Ludwig for her continued service and willingness to serve a second term on the OBD. Ms. Robinson announced that Ms. Ludwig will be reappointed on June 15th.

**OBD Budget Status Report**
Ms. Robinson presented the attached budget report for the 2025 - 2027 Biennium. Ms. Robinson highlighted that this report, which is from July 1, 2025 through May 17, 2026, shows revenue of $2,053,950.16 and expenditures of $1,607,489.85. **Attachment #1**

**Customer Service Survey**
Ms. Robinson presented the attached legislatively mandated survey results from July 1, 2025 through May 31, 2026. Ms. Robinson highlighted that the results of the survey show that the OBD continues to receive positive ratings from the majority of those who submit a survey. **Attachment #2**

**Memo - Delegated Duties for Executive Director & Staff**
Ms. Robinson reminded everyone that every June the new President of the OBD takes the gavel for the first regular board meeting after being elected President at the April Board Meeting for a 1-year term of office. Ms. Robinson explained that every June Board Meeting she submits to the Board for reauthorization the attached memo outlining delegated duties to herself as Executive Director and OBD staff, along with her job description. **Attachment #3 ACTION REQUESTED**

Dr. Clark moved and Dr. Aldrich seconded that the Board reauthorize Delegated Duties of Executive Director and OBD Staff. The motion passed with SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**OBD Bylaws**
Ms. Robinson directed the Board's attention to the OBD Bylaws, originally adopted in 2018, which were attached for annual review by the Board. **Attachment #4**

**Staff Speaking Engagements**
Ms. Robinson reported that Kathleen McNeal, Licensing Manager, gave four License Application presentations to graduating Dental Hygiene Students in April and May:

Tuesday, 3/10/26 Rogue Community College
Wednesday, 4/22/26 Pacific University
Monday, 5/18/26 Lane Community College
Tuesday, 5/19/26 Portland Community College

Ms. Robinson reported that Dr. Bernie Carter gave a presentation titled "Record Keeping, Clinical Judgement and Risk Management" on April 18th to Permanente Dental Group.

Ms. Robinson reported that Dr. Bernie Carter gave a presentation titled "Combat Periodontics" on May 2nd to the International College of Dentists – USA Section.

**Dental Testing & Regulatory Summit**
Ms. Robinson explained that this inaugural event brings together members of the American Board of Dental Examiners (ADEX), the American Association of Dental

Administrators (AADA), and the American Association of Dental Boards (AADB) so that professionals in the dental testing and regulatory space can seamlessly attend multiple Annual Meeting events with fewer schedule shifts, lessening travel needs and easing financial barriers to participation. Ms. Robinson announced that the meetings are scheduled for October 14-18, 2026, in National Harbor, Maryland. Ms. Robinson added that two Board Members are most welcome to attend and can contact her for more details. Ms. Robinson said she would like to attend the summit and asked for the Board's permission to do so. **Attachment #5 ACTION REQUESTED**

Dr. Kalia moved and Ms. Ludwig seconded that the Board approve Director Robinson's Travel and Attendance at October 14-18, 2026, Dental Testing & Regulatory Summit. The motion passed with SK, SL, TC, MA, OS, KS, GJ, and KL voting Aye.

**CRDTS Annual Meeting**

Ms. Robinson announced that the CRDTS Annual Meeting is scheduled for August 28 – 29, 2026, in Omaha, Nebraska. Ms. Robinson invited any Board Members who are interested in attending to confirm with her so she can assist with logistics and approve travel authorization. Ms. Robinson thanked Ms. Simmons for planning to attend this meeting. **Attachment #6**

**UNFINISHED BUSINESS AND RULES**

**OMPC Pain Module Update**

Ms. Robinson provided an update on possible OMPC Pain Module changes due to funding challenges. Ms. Robinson explained that a problem arises if the one-hour pain management course that is mandated by statute is made unavailable. Ms. Robinson added that many of the other healthcare boards would be affected and that she would continue to be in discussion with the directors of those boards. Ms. Robinson expressed hope that funding would be made available for another year and added that she will be monitoring the situation and may have an update in August.

**ADA Sedation Guidelines**

Dr. Kalia directed the Board's attention to the updated ADA Sedation and Pain Control Guidelines. Dr. Smorra initiated a discussion about Oregon dentists currently being allowed to prescribe a single oral anxiolytic without a permit in contrast to the updated ADA guidelines defining minimal sedation as "previously known as anxiolysis." Dr. Smorra asked the Board if there should be a rule change instructing dentists who prescribe an anxiolytic to be monitoring and discharging such patients under minimal sedation guidelines. The Board asked Dr. Smorra to draft an article about best practices for patients under anxiolysis for Board review and to include the article in the next newsletter.

**2026-2029 Strategic Plan**

Dr. Kalia introduced the five key points in the Strategic Plan, which were (i) the future of dental regulation; (ii) emerging dental practice challenges; (iii) community & access to care; (iv) workplace environment; and (v) technology & processes. The Board discussed changes to the Strategic Plan.

Ms. Robinson said she would bring suggested edits to the facilitators and will present the final draft at the August Board meeting.

**CORRESPONDENCE**

- Kimberly Pennington, R.D.H. Letter in Support of a Dental Assistant Registry
- Dr. Smorra and Dr. Salathe Hygiene and Lasers Discussion

The Board discussed issues regarding emerging laser use in dental offices. Dr. Smorra gave an overview of the rules as they are currently written in which lasers are treated like any other tool in that the provider must be trained to competency, working within their scope, and supervised by a dentist. Board members discussed the uses and advantages of lasers, safety concerns, and research on requirements in other states. Dr. Smorra offered to draft a proposed rule change incorporating required training for laser use to be presented at the August board meeting.

- Karla Brumley Request for Acceptance of Out of State Credentials

The Board discussed Ms. Brumley's training and exam results.

Ms. Jorgensen moved and Dr. Kalia seconded that under OAR 818-042-0095 the Board accept the successful completion of the California University of the Pacific Arthur A. Dagoni School of Dentistry Registered Dental Assistant Extended Functions (RDAEF) Program and the RDAEF Exam as an approved course of instruction and examination for the EFDA Restorative Endorsement. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

- AAO Letter regarding 818-042-0110 Certification – EFODA

**OTHER**

**Items were in the Board meeting packet for informational purposes.**

- DDH Compact Draft Rules from May 18, 2026, Meeting

Ms. Robinson gave an update on revisions to the Compact rules that removed the requirement for a hands-on portion of accepted clinical examinations.

- Minimum Requirements for Board Approved Courses
- OHA Healthcare-Associated Infections Program Dental Resources

Ms. Robinson clarified that a cost-free Compliance Risk Review is for educational purposes only and that Compliance Consultants do not report infection control issues. Ms. Robinson further clarified that the Consultants are not medical or dental professionals but are infectious disease specialists. Ms. Robinson said she will email information about this to all licensees and will stress the non-reporting nature of this resource.

Dr. Kalia moved and Ms. Jorgensen seconded that the Board approve OBD Updated Guidelines as amended. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

## DRAFT for Board approval and discussion

### ~~STANDARD PROTOCOLS~~ GUIDELINES FOR VIOLATIONS OF THE DENTAL PRACTICE ACT AND GENERAL CONSENT ORDERS

In keeping with its obligation and mission to promote quality oral health care and protect all communities in the State of Oregon by equitably and ethically regulating dental professionals, the Oregon Board of Dentistry (OBD/Board) has updated the following recommended ~~protocols~~ **guidelines** for the most common violations of the Dental Practice Act.

The Board carefully considers the totality of the facts and circumstances in each individual case, with the safety of the public being paramount. To the extent not inconsistent with public protection, disciplinary actions shall be calculated to aid in the rehabilitation of the licensee.

These ~~protocols serve as~~ guidelines **serve as a description of the Board's practices and prior decisions and are provided as suggestions to guide the Board's decisions in similar matters to ensure consistency. These are not mandated or required,** and the Board acknowledges that there may be departures in individual cases depending **the individual facts of a case, including** ~~upon~~ mitigating or aggravating circumstances. **The guidelines do not constitute rules, policies, or statements of rights.**

**CIVIL PENALTIES**

**The following language is typically included in Board settlement agreements, and a description of the Board's typical payment plan in the "note" sections:**

Licensee shall pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check, made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

> **NOTE:** The Board ~~will~~ allow**s** licensed dentists a 30-day payment period for each civil penalty increment of $2,500.00.
>
> **NOTE:** The Board ~~will~~ allow**s** licensed dental therapists a 30-day payment period for each civil penalty increment of $500.00.
>
> **NOTE:** The Board ~~will~~ allow**s** licensed dental hygienists a 30-day payment period for each civil penalty increment of $500.00.

**REFUND AND/OR RESTITUTION PAYMENTS**

Licensee shall pay $(**XX**) *refund or restitution*, by a single payment, in the form of a cashier's, bank, or official check made payable to patient (PATIENT INITIALS) and delivered to the Board offices within (**XX**) days of the effective date of the Order.

> **NOTE:** The Board ~~will~~ allow**s** licensed dentists a 30-day payment period for each

restitution and/or refund increment of $2,500.00.

**NOTE:** The Board ~~will~~ allow**s** licensed dental therapists a 30-day payment period for each civil penalty increment of $500.00.

**NOTE:** The Board ~~will~~ allow**s** licensed dental hygienists a 30-day payment period for each civil penalty increment of $500.00.

REFUND: To restore money paid by patient for treatment.

RESTITUTION: Money to repair unacceptable treatment.

**REIMBURSEMENT PAYMENTS**

Licensee shall provide the Board with documentation verifying reimbursement payment made to (COMPANY NAME), patient (PATIENT INITIALS) insurance carrier, within (**XX**) days of the effective date of the Order.

**NOTE:** The Board ~~will~~ allow**s** licensed dentists a 30-day payment period for each reimbursement increment of $2,500.00.

**NOTE:** The Board ~~will~~ allow**s** licensed dental therapists a 30-day payment period for each reimbursement increment of $500.00.

**NOTE:** The Board ~~will~~ allow**s** licensed dental hygienists a 30-day payment period for each reimbursement increment of $500.00.

**RESTRICTIONS**

Licensee shall abide by any practice restriction(s) imposed by the Board until the Licensee receives written notice from the Board that the restriction(s) have been removed.

**NOTE:** If a license becomes inactive (expired, retired, etc.) while restriction(s) are in place, and the license is subsequently reinstated, the restriction(s) shall remain in place pending further order of the Board.

**REMEDIAL CONTINUING EDUCATION (CE) – BOARD ORDERED**

Licensee shall submit documentation to the Board verifying successful completion of (**XX**) hours of (**XX**) (OPTIONS: Board approved, hands-on, mentored), CE in the area of (**XX**) within (**XX**) (OPTIONS: years, months) of the effective date of the Order, unless the Board grants an extension, and advises Licensee in writing. This ordered CE is in addition to the CE required for the licensure period(s) (**XX**) (i.e. April 1, XXXX to March 31, XXXX, or October 1, XXXX to September 30, XXXX).

**FALSE/INACCURATE CERTIFICATION OR STATEMENTS ON DOCUMENTS OR RECORDINGS**

Licensee may be disciplined and required to pay a $(**XX**) civil penalty, by a single payment in the form of a cashier's, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

**NOTE:** The civil penalties are **typically** $2,000.00 for dentists, $1,000.00 for dental therapists, and $1,000.00 for dental hygienists.

**FAILURE TO MEET CONTINUING EDUCATION (CE) STANDARDS**

**NOTE:** If Licensee completes <100% of the required CE, the Board ~~will~~ **typically** request**s** a letter of explanation, review extenuating circumstances, and audit**s** an additional two-year cycle. Discipline may be recommended after review of circumstances.

**NOTE (ANESTHESIA PERMIT HOLDERS):** If Licensee fails to provide the CE required to maintain their anesthesia permit (i.e. for a CE audit), the Licensee **may have a case investigation opened to determine if the anesthesia permit revocation is indicated.** ~~will be notified that the permit has been removed from their license and will not be added back onto their license until documentation is provided to and accepted by the Board.~~

**FAILURE TO MAINTAIN BASIC LIFE SUPPORT (BLS) FOR HEALTHCARE PROVIDERS**

If Licensee fails to maintain **a current** BLS for Healthcare Providers **certification** for any period of time **within a licensure period,** the Board ~~will~~ **may** request a letter of explanation and review extenuating circumstances. **The Board considers the BLS expiration date to be the last day of the month that the BLS instructor indicates that the certification expires.**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and may be required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

1. **NOTE:** If Licensee fails to maintain **a current** BLS for Healthcare Providers **certification** for one day to three months **past the month BLS renewal is due within a licensure period**, discipline may be recommended after review of circumstances.

   **NOTE:** If Licensee fails to maintain **a current** BLS for Healthcare Providers **certification** for three months to six months **past the month BLS renewal is due within a licensure period,** the Licensee may be reprimanded and required to pay a $500.00 (DENTIST) civil penalty, a $250.00 (DENTAL THERAPIST) civil penalty, or a $250.00 (DENTAL HYGIENIST) civil penalty.

   **NOTE:** If Licensee fails to maintain **a current** BLS for Healthcare Providers **certification** for longer than six months **past the month BLS renewal is due within a licensure period,** the Licensee may be reprimanded and required to paya $1,000.00 (DENTIST) civil penalty, a $500.00 (DENTAL THERAPIST) civil penalty, or a $500.00 (DENTAL HYGIENIST) civil penalty.

   **NOTE (ANESTHESIA PERMIT HOLDERS):** If an anesthesia permit holder fails to **a current** BLS for Healthcare Providers **certification** for longer than six months **past the month BLS renewal is due within a licensure period,** the Licensee may be reprimanded and pay a $1,500.00 (DENTIST) civil penalty or a $1,000.00 (DENTAL HYGIENIST) civil penalty. If Licensee fails to provide or maintain a current BLS for Healthcare Providers **certificate a case investigation may be opened to determine if Licensee should have their anesthesia permit revoked.**, ~~the licensee will be notified that the permit has been removed from their license and will not be added back onto their license until documentation is provided to and accepted by the Board.~~

**FAILURE TO MAINTAIN ADVANCED CARDIOVASCULAR LIFE SUPPORT (ACLS) AND/OR PEDIATRIC ADVANCED LIFE SUPPORT (PALS) CERTIFICATION.**

If Licensee who is required to maintain a~~n~~ **current** ACLS and/or PALS certification fails to maintain ACLS and/or PALS for any period of time, the Board will request a letter of explanation and review extenuating circumstances. **The Board considers the BLS expiration date to be the last day of the month that the BLS instructor indicates that the certification expires.**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and may be required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

> **NOTE:** If Licensee fails to provide or maintain **a current** ACLS and/or PALS for one day to three months **past the month BLS renewal is due within a licensure period,** discipline may be recommended after review of circumstances.
>
> **NOTE:** If Licensee fails to provide or maintain **a current** ACLS and/or PALS for longer than three months **past the month BLS renewal is due within a licensure period,** Licensee may be reprimanded and required to pay at minimum a $1,500.00 civil penalty.
>
> **NOTE:** (ANESTHESIA PERMIT HOLDERS): If an anesthesia permit holder who is required to maintain a~~n~~ **current** ACLS and/or PALS certification fails to provide or maintain a current ACLS and/or PALS, **certificate a case investigation may be opened to determine if the anesthesia permit should be revoked.**~~, the licensee will be notified that the permit has been removed from their license and will not be added back onto their license until documentation is provided to and accepted by the Board.~~

**PRACTICING WITHOUT A CURRENT LICENSE**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check, made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

> **NOTE:** A licensed dentist, who practiced any number of days without an active license ~~will be~~ **is typically** issued a Notice of Proposed Disciplinary Action and offered a Consent Order incorporating a reprimand and a requirement to pay at minimum a $2,000.00 civil penalty.
>
> **NOTE:** A licensed dental therapist who practiced any number of days without an active license or without a valid Collaborative Agreement, ~~will be~~ **is typically** issued a Notice of Proposed Disciplinary Action and offered a Consent Order incorporating a reprimand and a requirement to pay at minimum a $1,000.00 civil penalty.
>
> **NOTE:** A licensed dental hygienist who practiced any number of days without an active license ~~will be~~ **is typically** issued a Notice of Proposed Disciplinary Action and offered a Consent Order incorporating a reprimand and requirement to pay at minimum a civil penalty of $1,000.00.

**ALLOWING A PERSON TO PERFORM DUTIES FOR WHICH THE PERSON IS NOT LICENSED OR CERTIFIED**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee shall be disciplined and required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check, made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

**NOTE:** The civil penalties are **typically** $2,000.00 for the first offense. Increased civil penalties may be assessed in the event of repeated or egregious offenses.

**FAILURE TO RESPOND WITHIN TEN DAYS TO A BOARD REQUEST FOR INFORMATION**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check, made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

> **NOTE:** The Board ~~may issue~~ **typically issues** a Notice of Proposed Disciplinary Action and offer a Consent Order, incorporating a reprimand and a $1,000.00 civil penalty, to a licensed dentist, who fails to respond within ten days to a Board request for information.
>
> **NOTE:** The Board ~~may issue~~ **typically issues** a Notice of Proposed Disciplinary Action and offer a Consent Order, incorporating a reprimand and a $500.00 civil penalty, to a licensed dental therapist, who fails to respond within ten days to a Board request for information.
>
> **NOTE:** The Board ~~may issue~~ **typically issues** a Notice of Proposed Disciplinary Action and offer a Consent Order, incorporating a reprimand and a $500.00 civil penalty, to a licensed dental hygienist, who fails to respond within ten days to a Board request for information.

**FAILURE TO CONDUCT WEEKLY BIOLOGICAL TESTING OF STERILIZATION DEVICES**

~~Failures are calculated as a percentage of required biological monitoring, based on the number of weeks per calendar year that patients were scheduled, multiplied by the number of testing devices in use.~~ **Failures are calculated by the number of missed weeks when no required biological monitoring was completed within a 12-month calendar year. Biological monitoring is required for all weeks when an office is opened one day or more days in which scheduled patients are treated.**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**XX**) days of the effective date of the Order.

Licensee may be required to submit documentation to the Board verifying successful completion of (**XX**) hours of Board approved continuing education in the area of infection control within (**XX**) (OPTIONS: years, months) of the effective date of the Order. This ordered continuing education is in addition to the continuing education required for the licensure period(s) (**XX**) (i.e. April 1, XXXX to March 31, XXXX or October 1, XXXX to September 30, XXXX).

For a period of one year of the effective date of the Order, Licensee may be required to submit, on a quarterly basis, the results of the previous month's weekly biological monitoring testing of sterilization devices. Periods of time Licensee is not practicing in Oregon shall not apply to reduction of the one-year requirement.

**NOTE:** ~~Failure to complete ≤5% of required biological monitoring testing within the previous calendar year and current year-to-date will result in a Letter of Concern.~~
**Typically, failure to complete 1 - 5 weeks of required biological monitoring testing within a 12- month calendar year results in a Letter of Concern.**

**NOTE:** ~~Failure to complete >5% to 10% of required biological monitoring testing within a calendar year will result in the issuance of a Notice of Proposed Disciplinary Action and an offer of a Consent Order incorporating a reprimand.~~ **Failure to complete 1 - 5 weeks of required biological monitoring testing within a 12- month calendar year after a previous Letter of Concern for the same issue typically results in the issuance of a Notice and an offer of a Consent Order incorporating a reprimand, a $2,500.00 civil penalty, two hours of Board approved continuing education in the area of infection control within (XX), and quarterly submission of spore testing results for a period of one year from the effective date of the Order.**

**NOTE:** ~~Failure to complete >10% to 20% of required biological monitoring testing within a calendar year will result in the issuance of a Notice and an offer of a Consent Order incorporating a reprimand, a $3,000.00 civil penalty, two hours of Board approved continuing education in the area of infection control within (**XX**), and quarterly submission of spore testing results for a period of one year from the effective date of the Order.~~ **Failure to complete 6 - 10 weeks of required biological monitoring testing within a 12-month calendar year typically results in the issuance of a Notice and an offer of a Consent Order incorporating a reprimand, a $3,000.00 civil penalty, two hours of Board approved continuing education in the area of infection control within (XX), and quarterly submission of spore testing results for a period of one year from the effective date of the Order.**

**NOTE:** ~~Failure to complete >20% of required biological monitoring testing within a calendar year will result in the issuance of a Notice and an offer of a Consent Order incorporating a reprimand, a $6,000.00 civil penalty, four hours of Board approved continuing education in the area of infection control within (**XX**), and quarterly submission of spore testing results for a period of one year from the effective date of the Order.~~ **Failure to complete 11 or more weeks of required biological monitoring testing within a 12-month calendar year typically results in the issuance of a Notice and an offer of a Consent Order incorporating a reprimand, a $5,000.00 civil penalty, four hours of Board approved continuing education in the area of infection control within (XX), and quarterly submission of spore testing results for a period of one year from the effective date of the Order.**

**FAILURE TO REGISTER WITH THE PRESCRIPTION DRUG MONITORING PROGRAM (PDMP). Effective July 1, 2020.**

**The following language is typically included in Board settlement agreements, and a description of the Board's discipline is within in the "note" sections:**

Licensee may be disciplined and required to pay a $(**XX**) civil penalty, by a single payment, in the form of a cashier's, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within 30 days of the effective date of the Order.

**NOTE:** **Generally, the Board has interpreted** ~~R~~required date **to** means~~s~~ the date that the

rule became effective (July 1, 2020), the date of initial licensure in Oregon, or the date the licensee obtains a DEA number, whichever comes latest.

**NOTE:** Failure to be registered with the PDMP for one day to three months from the required date ~~may result~~ **typically results** in a Letter of Concern.

**NOTE:** Failure to be registered with the PDMP for three months to six months from the required date ~~may result~~ **typically results** in a reprimand.

**NOTE:** Failure to be registered with the PDMP for longer than six months from the required date ~~may result~~ **typically results** in a reprimand and a $1000.00 civil penalty.

**STANDARD ~~PROTOCOLS~~ GUIDELINES FOR CONSENT ORDERS RELATED TO DIAGNOSED SUBSTANCE USE DISORDER**

**The following language is typically included in Board settlement agreements.**

Licensee shall, for an indefinite length of time, be subject to the following conditions of this Consent Order:

Licensee shall voluntarily enter the State's Health Professionals' Services Program (HPSP) and abide by all of the terms and conditions established by the HPSP vendor, per Oregon law ORS 676.

Licensee shall contact and initiate procedures to enter HPSP within one (1) business day of the effective date of this Order. Business days are defined as days Monday through Friday excluding holidays. Licensee understands that failure to enroll in HPSP will result in notification to the Board.

Licensee shall not apply for relief from these conditions within five years of the effective date of the Order, and must do so in writing. Periods of time Licensee is not practicing dentistry as a dentist in Oregon, or dental hygiene as a dental hygienist in Oregon, shall not apply to reduction of the five-year requirement.

Licensee shall not use alcohol, marijuana, illegal drugs, stimulants, narcotics, sedatives, or any other mind altering substances at any place or time unless prescribed by a licensed practitioner for a bona fide medical condition and upon prior notice to the Board and care providers, except that prior notice to the Board and care providers shall not be required in the case of a bona fide medical emergency.

Licensee shall undergo an evaluation by a Board approved evaluator or treatment provider within 30 days of the effective date of the Order and make the written evaluation and treatment recommendations available to the Board.

Licensee shall adhere to, participate in, and complete all aspects of any and all residential care programs, continuing care programs and recovery treatment plans recommended by Board approved care providers and arrange for a written copy of all plans, programs, and contracts to be provided to the Board within 30 days of the effective date of this Order.

Licensee shall advise the Board, in writing, of any change or alteration to any residential care programs, continuing care programs, and recovery treatment plans 14 days before the change goes into effect.

Licensee shall instruct all health care providers participating in the residential, continuing care, and recovery programs to respond promptly to any Oregon Board of Dentistry inquiry concerning Licensee's compliance with the treatment plan and to immediately report to the Board, any positive

test results or any substantial failure to fully participate in the programs by the Licensee. Licensee shall instruct the foregoing professionals to make written quarterly reports to the Board of Licensee's progress and compliance with the treatment programs.

Licensee shall waive any privilege with respect to any physical, psychiatric, or psychological evaluation or treatment in favor of the Board for the purposes of determining compliance with this Order, or the need to modify this Order, and shall execute any waiver or release upon request of the Board.

Licensee shall submit to a Board approved, random, supervised, urinalysis, hair, or blood testing program, at Licensee's expense, with the frequency of the testing to be determined by the Board, but initially at a minimum of 36 random tests per year. Licensee shall arrange for the results of all tests, both positive and negative, to be provided promptly to the Board.

Licensee shall advise the Board, within 72 hours, of any alcohol, illegal or prescription drug, or mind altering substance related relapse, any positive urinalysis test result, or any substantial failure to participate in any recommended recovery program.

Licensee shall personally appear before the Board, or its designated representative(s), at a frequency to be determined by the Board, but initially at a frequency of three times per year.

Licensee shall, within three days, report the arrest for any misdemeanor or felony and, within three days, report the conviction for any misdemeanor or felony.

Licensee shall assure that, at all times, the Board has the most current addresses and telephone numbers for residences and offices.

IF APPROPRIATE –

Licensee, agree to not order, store, inventory, audit, access, draw, administer, dispense, waste, or have unilateral access to any Scheduled controlled drugs for any clinic setting.

Licensee shall immediately begin using pre-numbered triplicate prescription pads for prescribing controlled substances. Said prescription pads will be provided to the Licensee, at his/her expense, by the Board. Said prescriptions shall be used in their numeric order. Prior to the 15th day of each month, Licensee shall submit to the Board office, one copy of each triplicate prescription used during the previous month. The second copy to the triplicate set shall be maintained in the file of the patient for whom the prescription was written. In the event of a telephone prescription, Licensee shall submit two copies of the prescription to the Board monthly. In the event any prescription is not used, Licensee shall mark all three copies void and submit them to the Board monthly.

Licensee shall maintain a dental practice environment in which nitrous oxide is not present or available for any purpose, or establish a Board approved plan to assure that Licensee does not have singular access to nitrous oxide. The Board must approve the proposed plan before implementation.

Licensee shall immediately surrender his/her Drug Enforcement Administration Registration.

**STANDARD ~~PROTOCOLS~~ GUIDELINES FOR CONSENT ORDERS SPECIFICALLY RELATED TO SEXUAL VIOLATIONS**

SEX RELATED VIOLATIONS

**The following language is typically included in Board settlement agreements,**

Licensee shall, for an indefinite length of time, be subject to the following conditions of this Consent Order:

Licensee shall not apply for relief from these conditions within five years of the effective date of the Order, and must do so in writing. Periods of time Licensee is not practicing dentistry as a dentist in Oregon, shall not apply to reduction of the five-year requirement.

Licensee shall undergo an assessment by a Board approved evaluator, within 30 days of the effective date of the Order, and make the written evaluation and treatment recommendations available to the Board.

Licensee shall adhere to, participate in, and complete all aspects of any and all residential care programs, continuing care programs and recovery treatment plans recommended by Board approved care providers and arrange for a written copy of all plans, programs, and contracts to be provided to the Board within 30 days of the effective date of the Order.

Licensee shall advise the Board, in writing, of any change or alteration to any residential care programs, continuing care programs, and recovery treatment plans 14 days before the change goes into effect.

Licensee shall instruct all health care providers participating in the residential, continuing care, and recovery programs to respond promptly to any Oregon Board of Dentistry inquiry concerning Licensee's compliance with the treatment plan and to immediately report to the Board, any substantial failure to fully participate in the programs by the Licensee. Licensee shall instruct the foregoing professionals to make written quarterly reports to the Board of Licensee's progress and compliance with the treatment programs.

Licensee shall waive any privilege with respect to any physical, psychiatric, or psychological evaluation or treatment in favor of the Board for the purposes of determining compliance with this Order, or the need to modify this Order, and shall execute any waiver or release upon request of the Board.

Licensee shall report all arrests or interaction with law enforcement within 72 hours.

Licensee shall advise the Board, within 72 hours, of any substantial failure to participate in any recommended recovery program.

Licensee shall personally appear before the Board, or its designated representative(s), at a frequency to be determined by the Board, but initially at a frequency of three times per year.

IF APPROPRIATE –

Require Licensee to advise his/her dental staff or his/her employer of the terms of the Consent Order at least on an annual basis. Licensee shall provide the Board with documentation attesting that each dental staff member or employer reviewed the Consent Order. In the case of a Licensee adding a new employee, the Licensee shall advise the individual of the terms of the Consent Order on the first day of employment and shall provide the Board with documentation attesting to that advice.

**STANDARD ~~PROTOCOLS~~ GUIDELINES FOR CONSENT ORDERS REQUIRING CLOSE SUPERVISION**

**The following language is typically included in Board settlement agreements where the Board has determined close supervision is appropriate:**

CLOSE SUPERVISION

For a period of at least (XX) months, Licensee shall only practice dentistry in Oregon under the close supervision of a Board approved, Oregon licensed dentist (Supervisor), in order to demonstrate that clinical skills meet the acceptable level of patient care. Periods of time Licensee does not practice dentistry as a dentist in Oregon, shall not apply to reduction of the (six) month requirement

Licensee will submit the names of any other supervising dentists for Board approval. Licensee will immediately advise the Board of any change in supervising dentists.

Licensee shall only treat patients when another Board approved Supervisor is physically in the office and shall not be solely responsible for emergent care.

The Supervisor will review and co-sign Licensee's treatment plans, treatment notes, and prescription orders.

Licensee will maintain a log of procedures performed by Licensee. The log will include the patient's name, the date of treatment, and a brief description of the procedure. The Supervisor will review and co-sign the log. Prior to the 15th of each month, Licensee will submit the log of the previous month's treatments to the Board.

For a period of two weeks, or longer if deemed necessary by the Supervisor, the Supervisor will examine the appropriate stages of dental work performed by Licensee in order to determine clinical competence.

After two weeks, and for each month thereafter for a period of six months, the Supervisor will submit a written report to the Board describing Licensee's level of clinical competence. At the end of six months, the Supervisor, will submit a written report attesting to the level of Licensee's competency to practice dentistry in Oregon.

At the end of the restricted license period, the Board will re-evaluate the status of Licensee's dental license. At that time, the Board may extend the restricted license period, lift the license restrictions, or take other appropriate action.

**STANDARD ~~PROTOCOLS~~ GUIDELINE DEFINITIONS**

**Group practice:** On 10/10/08, the Board defined "group practice" as two or more Oregon licensed dentists, one of which may be a respondent, practicing in the same business entity and in the same physical location.

**STANDARD ~~PROTOCOLS~~ LANGUAGE FOR SETTLEMENT AGREEMENTS – PARAGRAPHS**

WHEREAS, based on the results of an investigation, the Board has filed a Notice of Proposed Disciplinary Action, dated (**XX**), and hereby incorporated by reference; and

Licensee shall successfully complete the Board/OAGD Mentor Program at Licensee's expense. Licensee will remain in the Mentor Program until such time as the mentor advises the Board that Licensee achieved an acceptable level of skill in the listed areas of XXX and the Board advises Licensee in writing that he met the provisions of this Order. Participation in the Mentor Program requires that Licensee successfully complete continuing education and/or engage in a study club, as recommended by the Mentor and move to adopt the Mentor's recommendations on treatment. In the event Licensee's mentor agreement ends prematurely, the Board may require an alternative education program for Licensee.

**ARTICLES AND NEWS**

- DANB Spring 2026 State Updates
- California Attorney General Reaches Settlement with Aspen Dental Over Corporate Practice Claims

The Board discussed issues related to corporate dental practices and the Board's limited jurisdiction over them. Ms. Robinson shared that in the past the Board has invited the president or dental director of a corporate dental group to the Board office with DOJ present to clarify the corporate entity's role and the Board's expectations.

- A Cavity Doesn't Always Need a Filling - The New York Times
- Oregon Dental Shortages Leave Gaps in Access to Care

Ms. Ludwig pointed out a statement in the article that Oregon does not have a dental provider shortage but instead has a dental provider distribution problem.

- Tribes – Open Comment Period
- Open Public Comment Period – Public comment is limited to matters on the public meeting agenda or otherwise relevant to matters that may come before the OBD. Comments will not be allowed that are longer than the time allotted by the President or are disruptive to the OBD's conduct of its business.

Ms. Robinson presented commendations to Dr. Clark and Dr. Aldrich for their four years of service to the Board.

Dan Ta, attorney for the American Association of Orthodontists (AAO), introduced himself during the Open Public Comment Period to discuss the issues regarding EFODA certification. Mr. Ta clarified that the AAO's primary concern is not necessarily the length of the 6-month rule, but that questions remain as to how the credential pathway is intended to operate and whether the Board's interpretation is clearly reflected in the rule text.

Mr. Ta asked for the following clarifications:

- Does the 6-month limitation apply only to the exam pathway?
- May assistants pursuing that certification through the credential pathway perform EFODA duties while accumulating qualifying experience? And, if so, under what conditions?
- If certification by credential is intended to be limited to assistants already certified elsewhere, how should the licensees interpret subsection (b)?

Ms. Robinson responded to Mr. Ta that the Board would review the rules with their Assistant Attorney General and draft a response. Ms. Robinson also offered to schedule a meeting with Mr. Ta to discuss the issues.

**EXECUTIVE SESSION: The Board entered into Executive Session pursuant to ORS**

**192.660(2)(f)(L); ORS 676.165; ORS 676.175(1); and ORS 679.320 to review confidential investigations, consider exempt records and to consult with legal counsel.**

**OPEN SESSION:** The Board returned to Open Session at 12:15 p.m. President Kalia took roll call and confirmed the Board had a quorum.

***Note the Board Members' votes are identified by their initials.**

**CONSENT AGENDA**

**2026-0180, 2026-0163, 2026-0177, 2026-0188, 2026-0167, 2026-0187, 2026-0182, 2026-0171, 2026-0169, 2026-0172, 2026-0158, 2026-0185, 2026-0168, 2026-0184, 2026-0141, 2026-0183, 2026-0164, 2026-0181, 2026-0176, 2026-0186, 2026-0170, 2026-0165, 2026-0173**

Ms. Ludwig moved and Dr. Sharifi seconded that the Board close the matters with a finding of No Violation or No Further Action. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**COMPLETED CASES**

**2026-0072, 2026-0115, 2026-0114, 2026-0064, 2026-0124, 2026-0162, 2026-0106, 2026-0034**

Ms. Ludwig moved and Dr. Sharifi seconded that the Board close the matters with a finding of No Violation or No Further Action. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2025-0185**

Dr. Sharifi moved and Dr. Kalia seconded that the Board close the matter with a strongly worded Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**KARRILYN SUZANNE CLAYPOOL, R.D.H., E.P.D.H.; 2026-0150**

Dr. Clark moved and Dr. Aldrich seconded that the Board issue a notice of proposed discipline incorporating a Reprimand, suspension of Licensee's dental hygiene license until she cooperates with the Board by providing all requested documents and until further order of the Board, and Licensee shall pay a $500.00 civil penalty, by a single payment, in the form of a cashier's check, bank, or official check made payable to the Oregon Board of Dentistry and delivered to the Board offices within 90 days of the effective date of the Order. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2025-0176**

Dr. Aldrich moved and Dr. Kalia seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, and KL voting Aye. Ms. Jorgensen recused herself.

**2026-0013**
Ms. Simmons moved and Ms. Ludwig seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**JERRI HOLBROOK, R.D.H., E.P.P.; 2026-0099**
Dr. Salathe moved and Dr. Aldrich seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand and a $500.00 civil penalty to be paid within 30 days of the effective date of the order. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0127**
Mr. Lewis moved and Dr. Kalia seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**STACEY M. HUTSON, R.D.H.; 2026-0102**
Ms. Jorgensen moved and Dr. Sharifi seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand and a $500.00 civil penalty to be paid within 30 days of the effective date of the order. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0054**
Dr. Sharifi moved and Ms. Ludwig seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0024**
Dr. Clark moved and Dr. Aldrich seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0063**
Dr. Aldrich moved and Ms. Ludwig seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0156**
Ms. Simmons moved and Dr. Salathe seconded that the Board close the matter with a Letter of Concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2025-0101**
Dr. Salathe moved and Ms. Ludwig seconded that the Board close the matter to both Respondents 1 and 2. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**C. TODD, WILSON, D.D.S.; 2025-0196**
Mr. Lewis moved and Dr. Kalia seconded that the Board issue a notice of Proposed discipline including a reprimand and to pay a $2,000.00 civil penalty, by a single payment, in the form of a cashier's, bank, or official check, made payable to the Oregon Board of Dentistry and delivered to the Board offices within (**60**) days of the effective date of the Order. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

## PREVIOUS CASES REQUIRING BOARD ACTION

**2025-0202**
Ms. Jorgensen moved and Dr. Aldrich seconded that the Board affirm the Board's previous decision to close the matter with a letter of concern. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2025-0198 and 2026-0029**
Dr. Sharifi moved and Dr. Kalia seconded that the Board combine cases 2025-0198 and 2026-0029 and issue a Final Default Order. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**2026-0195**
Dr. Clark moved and Dr. Kalia seconded that the Board approve the reinstatement application by granting a probationary license within the requirement of twice-daily Soberlink testing for 24 months. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

## RATIFICATION OF LICENSES

Dr. Aldrich moved and Ms. Ludwig seconded that the Board ratify the licenses presented in Tab 16. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

## LICENSE, PERMIT & CERTIFICATION

Ms. Simmons moved and Ms. Jorgensen seconded that the Board approve the reinstatement of expired license for Michael J. Longlet, D.D.S. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

Dr. Salathe moved and Dr. Kalia seconded that the Board approve the reinstatement of expired license for Ashley Lee, D.D.S. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

Mr. Lewis moved and Ms. Jorgensen seconded that the Board approve Nitrous Oxide Course for McKenzie Dental Practices of Oregon. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

Ms. Jorgensen moved and Dr. Sharifi seconded that the Board approve Local Anesthesia Endorsement Course for DH and DA for McKenzie Dental Practices of Oregon. The motion passed with SK, SL, RS, TC, MA, OS, KS, GJ, and KL voting Aye.

**ADJOURNMENT**

The next Board Meeting was scheduled for August 21, 2026, at 8:00 a.m.

The meeting was adjourned at 12:29 p.m.

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Sheena Kalia, D.D.S., President