

**OREGON BOARD OF DENTISTRY
MINUTES
JUNE 13, 2025**

MEMBERS PRESENT: Aarati Kalluri, D.D.S., President
Sheena Kansal, D.D.S., Vice President
Reza Sharifi, D.M.D.
Terrence Clark, D.M.D.
Olesya Salathe, D.M.D.
Sharity Ludwig, R.D.H., E.P.P.
Ginny Jorgensen
Kieshawn Lewis

STAFF PRESENT: Stephen Prisby, Executive Director
Angela Smorra, D.M.D., Dental Director/ Chief Investigator
Winthrop "Bernie" Carter, D.D.S., Dental Investigator
Haley Robinson, Office Manager
Kathleen McNeal, Licensing Manager
Gabriel Kubik, Investigator
Dawn Dreasher, Office Specialist

ALSO PRESENT: Joanna Tucker-Davis, Sr. Assistant Attorney General

VISITORS ALSO PRESENT: Barry Taylor, D.M.D., Executive Director, Oregon Dental Association (ODA); Brett Hamilton, Director of Government and Regulatory Affairs (ODA); Lisa Rowley, Advocacy & Membership Director (ODHA); Julie Spaniel, D.D.S.

VIA ZOOM*: Jenna Shanks, R.D.H., Katherine Landsberg DANB

*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 Aarati Kalluri welcomed everyone to the meeting and had the Board Members, Joanna Tucker-Davis, and Stephen Prisby introduce themselves. Dr. Kalluri announced that Board members Dr. Michelle Aldrich and Ms. Kristen Simmons had excused absences.

Dr. Kalluri announced that the Board had a quorum and 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.

NEW BUSINESS

Approval of April 25, 2025 Minutes

Dr. Kansal moved and Dr. Sharifi seconded that the Board approve the minutes from the April 25, 2025 Board Meeting as presented. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

ASSOCIATION REPORTS

Oregon Dental Association (ODA)

Brett Hamilton, Director of Government and Regulatory Affairs at the ODA, stated that we live in extraordinary times and that the ODA is monitoring potential impacts on dentistry and oral health. Mr. Hamilton clarified that nationally, as part of the ongoing reconciliation process, Congress is considering changes that could significantly impact the dental profession, most notably the elimination of the pass-through entity tax (PTET) deduction. Mr. Hamilton explained that this could result in a new tax increase on dentists who own or are partners in practices structured as pass-through entities. Mr. Hamilton added that this change alone could increase taxes for nearly one-third of all dental practices and, specifically, 1,629 practices in Oregon.

Mr. Hamilton stated that the ODA is also closely monitoring the One Big Beautiful Bill. We are also anxious about proposed student loan reforms, which include the elimination of the Graduate PLUS (Grad PLUS) loan program, the imposition of stricter limits on the Public Service Loan Forgiveness (PSLF) program, and the repeal of key income-driven repayment (IDR) plans, including Income-Contingent Repayment (ICR), Pay As You Earn (PAYE), and the Saving on a Valuable Education (SAVE) plan. Mr. Hamilton said the ODA is also advocating to preserve adult Medicaid dental benefits. Mr. Hamilton added that, of course, the national political landscape and uncertainties have direct implications on the state and our budgeting process.

Mr. Hamilton reminded the Board that we are about three weeks away from adjournment of the 2025 Legislative Session and that these final four weeks require the Legislature to advance major budgets and wrap up policy work. Mr. Hamilton stated that all focus has shifted to the Ways and Means, Revenue and Rules Committees with the closure of policy committees.

Mr. Hamilton stated that major policy issues remain outstanding including wildfire funding, a transportation package, campaign, education, and behavioral health and housing. Mr. Hamilton said the ODA still does not know the impacts this will have on the Oregon Health Plan but acknowledged they could be drastic. Mr. Hamilton added that, with a challenging revenue forecast released earlier this month, legislators have spent significant time and effort tempering expectations about the availability of state funding for state programs and budget requests.

Mr. Hamilton addressed two letters in the meeting packet. Mr. Hamilton clarified that the ODA has not taken a position on scaling assistants and reported that it is still being discussed by ODA's Board of Trustees. Mr. Hamilton reiterated to the Board that ODA

currently has no plans to propose legislation and that ODA is unaware of any other proposals in the state. Mr. Hamilton stated that ODA is discouraging the proposed rule changes because it takes flexibility away from the Board and removes a potential tool from its toolbox.

Mr. Hamilton also stated that the ODA does not oppose a dental assistant registry but thinks the Board should have more discussion and deliberation before moving forward with any changes.

Oregon Dental Hygienists' Association (ODHA)

Lisa Rowley, Advocacy & Membership Director of ODHA, informed the Board that the Nevada legislature considered a bill this year that included provisions that would have allowed individuals to obtain a dental hygiene license without graduating from a dental hygiene education program accredited by the Commission on Dental Accreditation (CODA). Instead, Ms. Rowley explained, candidates would have been eligible for dental hygiene licensure after completing a Board-approved on-the-job training program under the supervision of a licensed dentist. Ms. Rowley reminded the Board that graduation from a CODA accredited dental hygiene program is required for dental hygiene licensure in Oregon and that Oregon currently has eight CODA accredited dental hygiene programs. Ms. Rowley stated that this bill was supported by the American Dental Association and the Nevada Dental Association. Ms. Rowley added that the bill was opposed by the American Dental Hygienists' Association (ADHA), the Nevada Dental Hygienists' Association, the International Federation of Dental Hygienists, the Academy of General Dentistry, the American Academy of Oral Medicine, and the International Association of Orofacial Myology. Ms. Rowley reported that on June 2nd, this bill passed in the Senate, but "died" in the Assembly when the Nevada legislative session ended at midnight.

Ms. Rowley stated that the ODHA is strongly opposed to allowing dental assistants to perform periodontal probing and dental scaling. Ms. Rowley explained that the ODHA believes that periodontal probing and dental scaling are advanced instrumentation skills that should only be performed by licensed dental providers who have completed a CODA accredited program. Ms. Rowley stated that ODHA's position is that allowing dental assistants to probe and scale is not an appropriate way to address the workforce shortage. Ms. Rowley announced that the ODHA has submitted a proposed rule amendment for OAR 818-042-0040 to clarify that dental assistants are prohibited from performing periodontal probing and dental scaling in Oregon. Ms. Rowley added that the Licensing, Standards & Competency Committee has recommended that the Board move this proposed rule amendment to the Rules Oversight Committee. Ms. Rowley noted that the ODA has stated that they strongly discourage the Board from moving forward with this proposal. Ms. Rowley stated that the ODHA respectfully requests that the Board move this proposed rule amendment to the Rules Oversight Committee so that it can continue through the Board's rulemaking process and allow an opportunity for further discussion of this issue.

The Board discussed issues related to scaling and probing and dental assistant duties.

Oregon Dental Assistants Association (ODAA)

Mary Harrison, Vice President of ODAA, submitted ODAA's report in writing for the June

13, 2025 Oregon Board of Dentistry Meeting as follows:

Exciting news for the dental team, several Oregon's EFDA's have already successfully completed the Local Anesthesia course, have received their Local Anesthesia Functions Certificate (LAFC) and are now able to perform local anesthetic injections on dental patients. We are so happy that assistants have chosen to advance their careers in a way that benefits dental practices, patient dental care access and to demonstrate that the dental assistant profession is a career that has growth and opportunity. Portland Community College, Pacific University and several others are now offering OBD approved courses.

HB 3223 will be effective this month and ODAA is so appreciative to DANB for the help in meeting the requirements stated in HB 3223.

DANB has gathered representatives to work on a Professional Model and ODAA has been working on how to combine Oregon's pathways in this model to make things easier to follow and understand.

ODAA will again be meeting with the Oregon Association of Dental Laboratories (OADL) in the fall, so we are busy with securing an education day that will interest assistants, hygienists and doctors. The date is Friday, September 12, 2025. Final information will be sent to all dental team associations, posted on the ODAA Website and social media accounts.

ODAA has supported the ADHA and ODHA in their concerns about the Oral Preventative Assistant (OPA) and other possible changes being voted on in many state Legislatures. Patient safety and proper education are so very important.

DAWSAC and the Licensing, Standards and Competency Committee have both received information regarding the Registered Dental Assistant recommendations. ODAA is in total support of some type of listing or way to contact, follow and communicate with all dental assistants working in dental practices. We ask that ODAA be part of this discussion, and we are happy to research and work on this project with the OBD.

I am sorry not to be able to be with you on the 13th for your meeting, I will miss you all. Please include or mention this report in Association Reports.

Thank you,

Mary Harrison CDA, Emiratis, EFDA, EFODA, FADAA

COMMITTEE AND LIAISON REPORTS

Dr. Salathe provided an overview of the May 20, 2025 Licensing, Standards and Competency Committee meeting.

Dr. Kansal moved and Dr. Clark seconded that the Board refer OAR 818-042-0040, OAR 818-035-0025, and OAR 818-035-0030 as presented to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0040

Prohibited Acts

No licensee may authorize any dental assistant to perform the following acts:

- (1) Diagnose or plan treatment.
- (2) Cut hard or soft tissue.
- (3) Any Expanded Function duty (OAR 818-042-0070 and OAR 818-042-0090) or Expanded Orthodontic Function duty (OAR 818-042-0100) or Restorative Functions (OAR 818-042-0095) or Expanded Preventive Duty (OAR 818-042-0113 and OAR 818-042-0114) or Expanded Function Anesthesia (OAR 818-042-0115) without holding the appropriate certification.
- (4) Correct or attempt to correct the malposition or malocclusion of teeth except as provided by OAR 818-042-0100.
- (5) Adjust or attempt to adjust any orthodontic wire, fixed or removable appliance or other structure while it is in the patient's mouth.
- (6) Administer any drug except as allowed under the indirect supervision of a Licensee, such as fluoride, topical anesthetic, desensitizing agents, topical tooth whitening agents, over the counter medications per package instructions or drugs administered pursuant to OAR 818-026-0050(5), OAR 818-026-0060(12), OAR 818-026-0065(12), OAR 818-026-0070(12) and as provided in OAR 818-042-0070, OAR 818-042-0090 and OAR 818-042-0115.
- (7) Prescribe any drug.
- (8) Place periodontal packs.
- (9) Start nitrous oxide.
- (10) Remove stains or deposits except as provided in OAR 818-042-0070.
- (11) Use ultrasonic equipment intra-orally except as provided in OAR 818-042-0100.
- (12) Use a high-speed handpiece or any device that is operated by a high-speed handpiece intra-orally except as provided in OAR 818-042-0095, and only for the purpose of adjusting occlusion, contouring, and polishing restorations on the tooth or teeth that are being restored.
- (13) Use lasers, except laser-curing lights.
- (14) Use air abrasion or air polishing.
- (15) Remove teeth or parts of tooth structure.
- (16) Cement or bond any fixed prosthesis or orthodontic appliance including bands, brackets, retainers, tooth moving devices, or orthopedic appliances except as provided in OAR 818-042-0100.
- (17) Condense and carve permanent restorative material except as provided in OAR 818-042-0095.
- (18) Place any type of retraction material subgingivally except as provided in OAR 818-042-0090.
- (19) Apply denture relines except as provided in OAR 818-042-0090(2).
- (20) Expose radiographs without holding a current Certificate of Radiologic Proficiency issued by the Board (OAR 818-042-0050 and OAR 818-042-0060) except while taking a course of instruction approved by the Oregon Health Authority, Oregon Public Health

Division, Office of Environmental Public Health, Radiation Protection Services, or the Oregon Board of Dentistry.

(21) Use the behavior management techniques known as Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.

(22) Perform periodontal assessment.

(23) Place or remove healing caps or healing abutments, except under indirect supervision.

(24) Place implant impression copings, except under indirect supervision.

(25) Intraoral adjustment of fixed and removable prosthesis or appliances.

(26) Any act in violation of Board statute or rules.

818-035-0025

Prohibited Acts

A dental hygienist may not:

(1) Diagnose and treatment plan other than for dental hygiene services;

(2) Cut hard or soft tissue with the exception of root planing, except as provided in OAR 818-035-0065;

(3) Extract any tooth;

~~(4) Fit or adjust any correctional or prosthetic appliance except as provided by OAR 818-035-0030(1)(h);~~

(4) Intraoral adjustment of fixed and removable prosthesis or appliances.

(5) Prescribe, administer or dispense any drugs except as provided by OAR 818-035-0030, OAR 818-035-0040, OAR 818-026-0060(12), OAR 818-026-0065(12) and 818-026-0070 (12);

(6) Place, condense, carve or cement permanent restorations except as provided in OAR 818-035-0072, or operatively prepare teeth;

(7) Irrigate or medicate canals; try in cones, or ream, file or fill canals;

(8) Use the behavior management techniques of Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.

(9) Place or remove healing caps or healing abutments, except under indirect supervision.

(10) Place implant impression copings, except under indirect supervision.

(11) Any act in violation of Board statute or rules.

818-035-0030

Additional Functions of Dental Hygienists

(1) In addition to functions set forth in ORS 679.010, a dental hygienist may perform the following functions under the general supervision of a licensed dentist:

(a) Make preliminary intra-oral and extra-oral examinations and record findings;

(b) Place periodontal dressings;

(c) Remove periodontal dressings or direct a dental assistant to remove periodontal dressings;

(d) Perform all functions delegable to dental assistants and expanded function dental assistants providing that the dental hygienist is appropriately trained;

(e) Administer and dispense antimicrobial solutions or other antimicrobial agents in the performance of dental hygiene functions.

(f) Prescribe, administer and dispense fluoride, fluoride varnish, antimicrobial solutions for mouth rinsing or other non-systemic antimicrobial agents.

- (g) Use high-speed handpieces to polish restorations and to remove cement and adhesive material.
- (h) Apply temporary soft relines [after manufacturer required denture preparation](#) to complete dentures for the purpose of tissue conditioning.
- (i) Perform all aspects of teeth whitening procedures.
- (2) A dental hygienist may perform the following functions at the locations and for the persons described in ORS 680.205(1) and (2) without the supervision of a dentist:
 - (a) Determine the need for and appropriateness of sealants or fluoride; and
 - (b) Apply sealants or fluoride.
- (3) In addition to functions set forth in ORS 679.010, a dental hygienist may perform the following functions under the indirect supervision of a licensed dentist:
 - (a) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a dental hygienist 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.
 - (b) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a dental hygienist 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.

(4) Extraoral adjustment of fixed and removable prosthesis or appliances.

Ms. Ludwig moved and Ms. Jorgensen seconded that the Board refer OAR 818-042-0040 as presented to the Rules Oversight Committee for further investigation and discussion. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0040

Prohibited Acts

No licensee may authorize any dental assistant to perform the following acts:

- (1) Diagnose or plan treatment.
- (2) Cut hard or soft tissue.
- (3) Any Expanded Function duty (OAR 818-042-0070 and OAR 818-042-0090) or Expanded Orthodontic Function duty (OAR 818-042-0100) or Restorative Functions (OAR 818-042-0095) or Expanded Preventive Duty (OAR 818-042-0113 and OAR 818-042-0114) or Expanded Function Anesthesia (OAR 818-042-0115) without holding the appropriate certification.
- (4) Correct or attempt to correct the malposition or malocclusion of teeth except as provided by OAR 818-042-0100.
- (5) Adjust or attempt to adjust any orthodontic wire, fixed or removable appliance or other structure while it is in the patient's mouth.
- (6) Administer any drug except as allowed under the indirect supervision of a Licensee, such as fluoride, topical anesthetic, desensitizing agents, topical tooth whitening agents, over the counter medications per package instructions or drugs administered pursuant to OAR 818-026-0050(5), OAR 818-026-0060(12), OAR 818-026-0065(12), OAR 818-026-0070(12) and as provided in OAR 818-042-0070, OAR 818-042-0090 and OAR 818-042-0115.
- (7) Prescribe any drug.
- (8) Place periodontal packs.

- (9) Start nitrous oxide.
- (10) Remove stains or deposits except as provided in OAR 818-042-0070.
- (11) Use ultrasonic equipment intra-orally except as provided in OAR 818-042-0100.
- (12) Use hand instruments, air polishers, ultrasonic equipment or other devices to remove supragingival and subgingival stains and deposits from tooth surfaces.
- (123) Use a high-speed handpiece or any device that is operated by a high-speed handpiece intra-orally except as provided in OAR 818-042-0095, and only for the purpose of adjusting occlusion, contouring, and polishing restorations on the tooth or teeth that are being restored.
- (134) Use lasers, except laser-curing lights.
- (145) Use air abrasion or air polishing.
- (156) Remove teeth or parts of tooth structure.
- (167) Cement or bond any fixed prosthesis or orthodontic appliance including bands, brackets, retainers, tooth moving devices, or orthopedic appliances except as provided in OAR 818-042-0100.
- (178) Condense and carve permanent restorative material except as provided in OAR 818-042-0095.
- (189) Place any type of retraction material subgingivally except as provided in OAR 818-042-0090.
- (1220) Apply denture relines except as provided in OAR 818-042-0090(2).
- (201) Expose radiographs without holding a current Certificate of Radiologic Proficiency issued by the Board (OAR 818-042-0050 and OAR 818-042-0060) except while taking a course of instruction approved by the Oregon Health Authority, Oregon Public Health Division, Office of Environmental Public Health, Radiation Protection Services, or the Oregon Board of Dentistry.
- (242) Use the behavior management techniques known as Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.
- (223) Perform periodontal assessment and periodontal probing.
- (234) Place or remove healing caps or healing abutments, except under indirect supervision.
- (245) Place implant impression copings, except under indirect supervision.
- (256) Any act in violation of Board statute or rules.

Dr. Salathe moved and Dr. Kalluri seconded that the Board refer OAR 818-035-0030 as presented to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-035-0030

Additional Functions of Dental Hygienists

- (1) In addition to functions set forth in ORS 679.010, a dental hygienist may perform the following functions under the general supervision of a licensed dentist:
 - (a) Make preliminary intra-oral and extra-oral examinations and record findings;
 - (b) Place periodontal dressings;
 - (c) Remove periodontal dressings or direct a dental assistant to remove periodontal dressings;
 - (d) Perform all functions delegable to dental assistants and expanded function dental assistants providing that the dental hygienist is appropriately trained;

- (e) Administer and dispense antimicrobial solutions or other antimicrobial agents in the performance of dental hygiene functions.
- (f) Prescribe, administer and dispense fluoride, fluoride varnish, antimicrobial solutions for mouth rinsing or other non-systemic antimicrobial agents.
- (g) Use high-speed handpieces to polish restorations and to remove cement and adhesive material.
- (h) Apply temporary soft relines to complete dentures for the purpose of tissue conditioning.
- (i) Perform all aspects of teeth whitening procedures.

(2) A dental hygienist may perform the following functions at the locations and for the persons

described in ORS 680.205(1) and (2) without the supervision of a dentist:

- (a) Determine the need for and appropriateness of sealants or fluoride; and
- (b) Apply sealants or fluoride.

(3) In addition to functions set forth in ORS 679.010, a dental hygienist may perform the following functions under the indirect supervision of a licensed dentist:

- (a) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a dental hygienist 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.
- (b) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a dental hygienist 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.

(4) A dental hygienist with a local anesthesia endorsement may utilize Botulinum Toxin Type A to treat conditions that are within the oral and maxillofacial region after completing a minimum of 10 hours in a hands on clinical course(s) in Botulinum Toxin Type A, and the provider is 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). Alternatively, a dental hygienist with a local anesthesia endorsement may meet the requirements of subsection (4) by successfully completing training in Botulinum Toxin Type A as part of a CODA accredited program.

Ms. Ludwig moved and Dr. Kalluri seconded that the Board refer 818-012-0010 as presented to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

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.

The Board discussed the topic of creating a dental assistant registry. Dr. Julie Spaniel spoke in support of a dental assistant registry.

Ms. Ludwig moved and Dr. Kalluri seconded that the Board direct staff to research other states where dental assistants are registered and draft a rule for Board discussion and review. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

The Board discussed the topic of dental hygienist administering vaccines.

Ms. Jorgensen moved and Dr. Kalluri seconded that the Board direct Mr. Prisby to write a letter to the governor in support of future legislation allowing dental hygienists to administer vaccines. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

Dr. Kansal moved and Dr. Kalluri seconded that the Board refer OAR 818-042-0096 as presented to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0096

Local Anesthesia Functions of Dental Assistants

(1) The Board shall issue a Local Anesthesia Functions Certificate (LAFC) to a dental assistant who holds an Oregon EFDA Certificate, and has successfully completed 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.

(2) The Board shall issue a Local Anesthesia Functions Certificate (LAFC) to a dental assistant who holds an Oregon Certified Anesthesia Dental Assistant Certificate, and has successfully completed 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.

(23) A dental assistant may administer local anesthetic agents and local anesthetic reversal agents under the indirect supervision of a licensed dentist. Local anesthetic reversal agents shall not be used on children less than 6 years of age or weighing less than 33 pounds.

Dr. Clark moved and Dr. Kansal seconded that the Board refer OAR 818-042-0080, OAR 818-042-0110, and OAR 818-042-0113 as presented to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0080

Certification – Expanded Function Dental Assistant (EFDA)

The Board may certify a dental assistant as an expanded function assistant:

(1) By credential in accordance with OAR 818-042-0120, or

(2) If the assistant submits a completed application, pays the fee and provides evidence of;

(a) Certification of Radiologic Proficiency (OAR 818-042-0060); and satisfactory completion of a course of instruction in a program accredited by the Commission on Dental Accreditation; or

(b) Certification of Radiologic Proficiency (OAR 818-042-0060); and passage of the ~~Oregon Basic, Infection Control or Certified Dental Assisting (CDA) examination, and the Expanded Function Dental Assistant examination;~~ Oregon Expanded Functions with Infection Control examination, or equivalent successor examinations, administered by the Dental Assisting National Board, Inc. (DANB), or any other testing entity authorized by the Board, or prior passage of the Certified Dental Assistant examination or Infection Control Examination and passage of the Oregon Expanded Functions General Dental Assisting exam, or equivalent successor examinations, administered by DANB or any other testing entity authorized by the Board; and certification by an Oregon licensed dentist that the applicant has successfully removed supra-gingival excess cement from four (4) crowns and/or fixed partial dentures (bridges) with hand instruments; placed temporary restorative material in three (3) teeth; preliminarily fitted four (4) crowns to check contacts or to adjust occlusion outside the mouth; removed four

(4) temporary crowns for final cementation and cleaned teeth for final cementation; fabricated four (4) temporary crowns and/or fixed partial dentures (bridges) and temporarily cemented the crowns and/or fixed partial dentures (bridges); polished the coronal surfaces of teeth with a brush or rubber cup as part of oral prophylaxis in six (6) patients; placed matrix bands on four (4) teeth prepared for Class II restorations. The dental assistant must submit within six months' certification by a licensed dentist that the dental assistant is proficient to perform all the expanded function duties in subsection (b). If no expanded function certificate is issued within the six months, the dental assistant is no longer able to continue to perform expanded function duties until EFDA certification is achieved.

818-042-0110

Certification - Expanded Function Orthodontic Dental Assistant (EFODA)

The Board may certify a dental assistant as an expanded function orthodontic assistant:

- (1) By credential in accordance with OAR 818-042-0120, or
- (2) Completion of an application, payment of fee and satisfactory evidence of:
 - (a) Completion of a course of instruction in a program in dental assisting accredited by the American Dental Association Commission on Dental Accreditation; or
 - (b) Passage of the ~~Oregon Basic, Infection Control, Certified Dental Assistant (CDA) or Certified Orthodontic Assistant (COA) examination, and Expanded Function Orthodontic Assistant examination,~~ Oregon Orthodontic Expanded Functions with Infection Control examination, or equivalent successor examinations, administered by the Dental Assisting National Board, Inc. (DANB), or any other testing entity authorized by the Board, or prior passage of the Certified Dental Assistant, Certified Orthodontic Assistant or Infection Control Examination administered by DANB and passage of the Oregon Expanded Functions Orthodontic Assisting exam, or equivalent successor examinations, administered by DANB, or any other testing entity authorized by the Board; and certification by an Oregon licensed dentist that the applicant has successfully placed and ligated orthodontic wires on ten (10) patients and removed bands/brackets and remaining adhesive using an ultrasonic, hand scaler or a slow speed hand piece from teeth on four (4) patients.

818-042-0113

Certification — Expanded Function Preventive Dental Assistants (EFPDA)

The Board may certify a dental assistant as an expanded function preventive dental assistant:

- (1) By credential in accordance with OAR 818-042-0120, or
- (2) If the assistant submits a completed application, pays the fee and provides evidence of:
 - (a) Certification of Radiologic Proficiency (OAR 818-042-0060); and satisfactory completion of a course of instruction in a program accredited by the Commission on Dental Accreditation of the American Dental Association; or
 - (b) Certification of Radiologic Proficiency (OAR 818-042-0060); and passage of the ~~Oregon Basic or Infection Control examination, and Certified Preventive Functions Dental Assistant (CPFDA) examination, or the Expanded Function Dental Assistant examination, or the Coronal Polishing (CP) examination,~~ Oregon Expanded Functions with Infection Control examination; or passage of the Coronal Polishing with Infection Control examination, or equivalent successor examinations, administered by the Dental Assisting

National Board, Inc. (DANB), or any other testing entity authorized by the Board, or prior passage of the Infection Control Examination and passage of the Oregon Expanded Functions General Dental Assisting exam or Coronal Polishing exam, or equivalent successor examinations, administered by DANB, or any other testing entity authorized by the Board; and certification by an Oregon licensed dentist that the applicant has successfully polished the coronal surfaces of teeth with a brush or rubber cup as part of oral prophylaxis to remove stains on six (6) patients. The dental assistant must submit within six months' certification by a licensed dentist that the dental assistant is proficient to perform all the expanded function preventive duties in subsection (b). If no expanded function preventive certificate is issued within the six months, the dental assistant is no longer able to continue to perform expanded function preventive duties until EFPDA certification is achieved.

Ms. Jorgensen gave an overview of the May 13, 2025 DAWSAC meeting and various dental assisting issues. Ms. Jorgensen announced that the next DAWSAC meeting would be sometime in September, 2025.

Dr. Clark moved and Dr. Kansal seconded that the Board direct Mr. Prisby to write a letter to the governor in support of making DAWSAC a standing committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

Dr. Kalluri announced that the next Rules Oversight Committee meeting is on July 17, 2025 at 5:00 p.m. - 6:30 p.m.

EXECUTIVE DIRECTOR'S REPORT

Staff Updates

Mr. Prisby reported that the OBD conducted an internal recruitment for the open Investigator position. Mr. Prisby stated that the OBD announced that Dr. Bernie Carter applied and accepted the position. Mr. Prisby added that Dr. Carter was back to full-time employment effective June 1, 2025.

Mr. Prisby announced Work Anniversaries for the following OBD Staff:

Gabriel Kubik celebrated his 1-year OBD Work Anniversary on May 1.

Dr. Angela Smorra celebrated her 4-year OBD Work Anniversary on May 1.

Haley Robinson will celebrate her 9-year OBD Work Anniversary on June 20.

OBD Budget Status Report & FY Close Info

Mr. Prisby presented the attached the budget report for the 2023 - 2025 Biennium. Mr. Prisby explained that this report, which is from July 1, 2023, through April 30, 2025, shows revenue of \$3,827,176.41 and expenditures of \$3,277,405.05. Fiscal Year close information is also provided.

Gold Star Certificate for FY 2024

Mr. Prisby announced that the OBD once again has achieved the Gold Star Certificate for providing accurate and complete fiscal year information in a timely manner. Mr. Prisby acknowledged that the OBD utilized OMB staff and DAS staff throughout the past year to achieve this, along with outstanding support and contributions from Haley Robinson and

Kathleen McNeal. Mr. Prisby shared that the OBD has achieved this every year throughout my 10+ years as Executive Director.

OBD 2025 – 2027 Budget Bill Update

Mr. Prisby directed the Board's attention to various budget documents regarding the OBD's budget bill (SB 5512).

2025 Legislative Session

Mr. Prisby referred to a report showing bills being tracked for the OBD.

Customer Service Survey

Mr. Prisby presented the legislatively mandated survey results from July 1, 2024, through May 31, 2025. Mr. Prisby reported that the results of the survey show that the OBD continues to receive positive ratings from the majority of those that submit a survey.

OBD Bylaws

Mr. Prisby pointed out that the OBD Bylaws were originally adopted in 2018 and were included for annual review by the Board.

Staff Speaking Engagements

Mr. Prisby reported that he gave a "Board Updates" presentation to the OHSU - School of Dentistry 3rd year students on Tuesday, April 14, 2025.

Mr. Prisby reported that Dr. Angela Smorra and Dr. Bernie Carter gave a "Board Updates – Rules and Enforcement" presentation to the same 3rd year students on Tuesday, April 21, 2025.

Mr. Prisby reported that Kathleen McNeal gave four License Application virtual presentations to graduating Dental Hygiene Students in May:

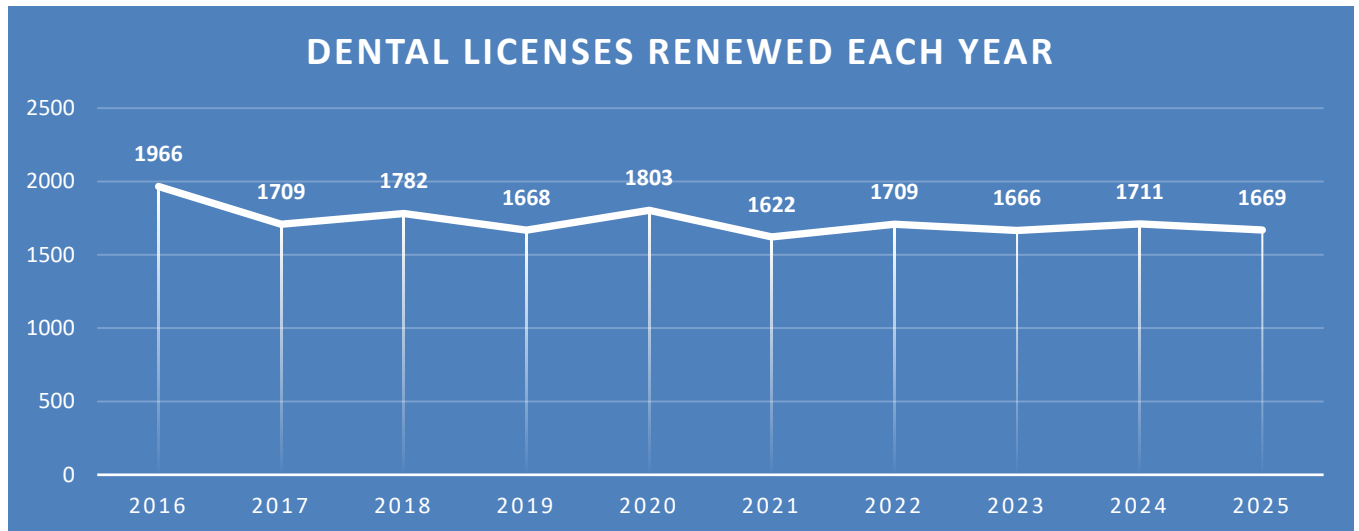
Monday, 5/12 Lane Community College
Monday, 5/12 Mt. Hood Community College
Tuesday, 5/13 Portland Community College
Friday, 5/30 Pacific University

Kieshawn Lewis stepped out of the meeting.

2025 Dental License Renewal

Mr. Prisby stated that the 2025 Dental License renewal period ended on March 31, 2025 and shared 2025 Dental license renewal information: 1669 renewed, 153 expired, 19 retired and 1 deceased.

Previous years of dental license renewal data:



American Association of Dental Administrators Meetings

Mr. Prisby reported that he attended and participated in the AADA Mid-Year Meeting on April 29, 2025. The Annual Meeting is scheduled for Oct 15-16, 2025, in Grapevine, Texas. Mr. Prisby asked the Board to approve his travel & attendance at the meeting.

Ms. Ludwig moved and Dr. Kalluri seconded that the Board approve Director Prisby's travel and attendance at AADA Meeting in Grapevine, Texas on October 15-16, 2025. The motion passed with AK, SK, RS, TC, OS, SL, and GJ voting Aye.

Kieshawn Lewis rejoined the meeting.

Board Meeting Preparation

Mr. Prisby suggested to the Board that the OBD eliminate producing a Case Book (all investigative reports) before each board meeting. Mr. Prisby pointed out that the Case Book is not reviewed by all board members, and the feedback is typically minor edits and clarification of data. Mr. Prisby elaborated that OBD Investigators consult with the OBD assigned attorney and are well versed on investigations and report writing. Mr. Prisby further stated that the Case Book is extra work, delaying more cases being ready for the next board meeting. The Board briefly discussed the issue, with some members expressing concern about a truncated timeframe to review meeting materials. Mr. Prisby offered that Board members would receive the meeting packet ten calendar days before the Board meeting to allow more time to review it. The public packet would still be available on the OBD website approximately one week before the Board meeting. Submissions for the meeting packet would be due 14 calendar days before the meeting.

Dr. Clark moved and Dr. Kalluri seconded that the Board eliminate production of Case Book before each Board Meeting. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

Strategic Planning

Mr. Prisby counseled the Board to consider thinking about the next strategic plan to replace the current 2022-2025 plan. Mr. Prisby offered some documents to help start the conversation and the Board briefly discussed next steps. Dr. Sharifi recounted his positive experience with the strategic planning process in the past. Mr. Prisby also included a summary of work completed in support of the current plan. Mr. Prisby mentioned that the email upgrade that is part of the OBD's new budget would help facilitate the strategic planning process.

Newsletter

Mr. Prisby announced that the next OBD Newsletter will be published in August 2025.

UNFINISHED BUSINESS AND RULES

Mr. Prisby presented the OBD's proposed temporary rule changes regarding fee increases (SB 5512) and updates to dental assisting rules in compliance with HB 3223 (2024).

Dr. Kansal moved and Dr. Clark seconded that the Board approve temporary rule changes to OAR 818-001-0087, OAR 818-042-0080, OAR 818-042-0110 and OAR 818-042-0113 as presented to be effective July 1, 2025. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

Mr. Prisby presented proposed rule changes to address inconsistencies and correct a typographical error related to certain dental assisting functions.

Ms. Ludwig moved and Dr. Salathe seconded that the Board refer OAR 818-042-0115 to the Rules Oversight Committee. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0115

Expanded Functions — Certified Anesthesia Dental Assistant

(1) A dentist holding the appropriate anesthesia permit may verbally authorize a Certified Anesthesia Dental Assistant, who possesses a Certified Anesthesia Dental Assistant certificate from the Oregon Board of Dentistry to:

(a) Administer medications into an existing intravenous (IV) line of a patient under sedation or anesthesia under direct visual supervision.

(b) Administer emergency medications to a patient in order to assist the licensee in an emergent situation under direct visual supervision.

(c) Perform phlebotomy for dental procedures [in accordance with OAR](#)

[818-042-0117](#)

(2) A dentist holding the appropriate anesthesia permit may verbally authorize a Certified Anesthesia Dental Assistant to dispense to a patient, oral medications that have been prepared by the dentist and given to the anesthesia dental assistant by

the supervising dentist for oral administration to a patient under Indirect Supervision.

Ms. Ludwig moved and Dr. Kansal seconded that the Board direct staff to draft proposed language and refer OAR 818-042-0117 to the Licensing, Standards and Competency Committee for review. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

818-042-0117

Initiation of IV Line and Phlebotomy Blood Draw

The Board may certify an Anesthesia Dental Assistant or an Expanded Function Dental Assistant with a Local Anesthesia Functions Certificate 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.

(3) Upon successful completion of a course in intravenous access or phlebotomy approved by the Board, a Dental Assistant who holds a Local Anesthesia Function certificate 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.

Mr. Prisby provided an update on money owed to the Board from former Licensee regarding Case 2021-0109 & 2021-0176.

CORRESPONDENCE

- American Academy of Pediatric Dentistry – April 28, 2025 Email, Letter & Framework

The Board briefly discussed issues related to pediatric sedation.

- American Academy of Dental Sleep Medicine – April 30, 2025 Email & Letter

OTHER

Items were in the Board meeting packet for informational purposes.

- CSG D-DH License Compact Commission Information & Comments Submitted.
- Tribes (no comments)
- Other Public Comment (no comments)

Mr. Hamilton asked the Board to consider putting links to ODA wellness resources on the OBD website. The Board discussed the issue.

Ms. Ludwig moved and Dr. Clark seconded that the Board add links to the ODA, ODHA, and ODAA to the OBD website. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

ARTICLES AND NEWS

- DANB Exams Now Offered in Spanish
- ADEA Trends in dental education Summary 2024-25
- Article – Public Meetings Law

The Board discussed and clarified issues related to current Public Meetings Law.

EXECUTIVE SESSION: The Board entered into Executive Session pursuant to ORS 192.606 (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 12:41 p.m. President Kalluri took roll call and announced the Board had a quorum.

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

CONSENT AGENDA

2025-0177, 2025-0163, 2025-0151, 2025-0157, 2025-0150, 2025-0167, 2025-0168, 2025-0165, 2025-0178, 2025-0174, 2025-0153, 2025-0155, 2025-0152

Dr. Kansal 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 AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

COMPLETED CASES

2025-0089, 2025-0092, 2025-0151, 2025-0141, 2025-0107, 2025-0072, 2024-0155, 2025-0088, 2024-0133, 2025-0140, 2025-0076, 2025-0063

Dr. Kansal 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 AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

LICENSEE; 2025-0180

Dr. Clark moved and Dr. Kansal seconded that the Board issue a Notice of Proposed Disciplinary Action and offer the Licensee a Consent Order incorporating a reprimand, remove Licensee from HPSP, require Licensee successfully take and pass a Board approved clinical exam prior to returning to practice, require Licensee to enroll in Soberlink for 48-months with twice daily testing, and require Licensee to submit to drug testing every 90-days for 48-months. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

LINDA KWON RIDDER, D.D.S.; 2025-0065

Dr. Salathe moved and Dr. Kansal seconded that the Board issue a Notice of Proposed Disciplinary Action and offer the Licensee a Consent Order incorporating a reprimand; a \$1,000 civil penalty, payable within 30 days of the effective date of the Order; and a requirement that the licensee complete 4 hours of Board approved continuing education (CE) in the area of record keeping within 90 days after the effective date of the Order. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

2025-0102

Mr. Lewis moved and Dr. Kansal seconded that the Board close the matter with a finding of No Violation and deny the May 12, 2025 request for complaint and investigation materials under 676.1751. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

JOHN K. SULLIVAN, D.D.S.; 2025-0106, 2025-0126, 2025-0130, 2025-0136, 2025-0147, 2025-0148, and 2025-0154

Ms. Ludwig moved and Dr. Kansal seconded that the Board issue a Notice of Proposed Dental License Suspension and offer Licensee a Consent Order suspending Licensee's license until all previously requested documents are provided and approved by the Board. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

PREVIOUS CASE REQUIRING BOARD ACTION**NATHAN M. TANNER, D.M.D.; 2024-0065, 2024-0100, and 2024-0127**

Ms. Jorgensen moved and Dr. Kansal seconded that the Board offer Licensee a Consent Order incorporating (1) a Reprimand; (2) a \$9,000 civil penalty to be paid within 210 days of the effective date of the order; (3) after September 11, 2025, Licensee shall be permanently restricted from providing orthodontic treatment and dentofacial orthopedics to patients until licensee satisfactorily completes a 3 year CODA accredited program in Orthodontics and Dentofacial Orthopedics and further order of the Board; (4) Licensee shall be permanently restricted from providing oral airway appliances or any associated airway treatment for patients who do not have a documented diagnosis, within the previous 6 months, of Obstructive Sleep Apnea (OSA), or other sleep-related breathing disorders (SRBD) from a licensee of the Oregon Medical Board (OMB), and (5) Licensee shall document in the patient record the name of the OMB licensee who has diagnosed the condition to be treated, their diagnosis, the baseline data obtained that assisted with their medical diagnosis, and copies of their referrals prescribing oral appliance therapy or associated airway treatment. The motion passed with AK, SK, RS, TC, OS, SL, GJ, and KL voting Aye.

RATIFICATION OF LICENSES

LICENSE, PERMIT & CERTIFICATION

ADJOURNMENT

The meeting was adjourned at 1:02 p.m.

June 13, 2025
Board Meeting Minutes
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