

CHAPTER 30**NEW JERSEY BOARD OF DENTISTRY****Authority**

N.J.S.A. 45:6-3, 45:6-19.4 and 45:6-50.

Source and Effective Date

R.1995 d.191, effective March 10, 1995.
See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

Executive Order No. 66(1978) Expiration Date

Chapter 30, New Jersey Board of Dentistry, expires on March 10, 2000.

Chapter Historical Note

Chapter 30, New Jersey Board of Dentistry, was filed and became effective prior to September 1, 1969. Chapter 30 was readopted as R.1990 d.205, effective March 12, 1990. See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Pursuant to Executive Order No. 66(1978), Chapter 30 was readopted as R.1995 d.191. See: Source and Effective Date. As a part of R.1995 d.191, old Subchapter 2, Applicants for License to Practice Dental Hygiene, was repealed and a new Subchapter 2 was adopted, effective April 3, 1995. See, also, section annotations.

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SUBCHAPTER 1. APPLICANTS FOR LICENSE TO PRACTICE DENTISTRY**13:30-1.1 Qualifications of applicants**

(a) All persons desiring to practice dentistry in New Jersey must secure a license from the Board.

(b) To qualify as a candidate for dental licensure, an applicant must present satisfactory evidence that he or she has graduated with a dental degree from a dental school, college or department of a university approved by the Board and the Commission on Dental Accreditation.

(c) To obtain a license to practice dentistry, the candidate must pass the Northeast Regional Board Examination. The Board will recognize successful completion of the Northeast

Regional Board examination for up to five years. After five years, the Board will review each request on a case by case basis and may, in its discretion, recognize successful completion of the Northeast Regional Board Examination provided the candidate submits, at a minimum, evidence satisfactory to the Board that the candidate:

1. Holds a license in good standing in every state where currently licensed; and

2. Has successfully completed 40 hours of continuing dental education in the two years immediately preceding the application.

(d) As part of its review of applicants requesting recognition of the Northeast Regional Board Examination after five years as set forth in (c) above, the Board will consider and evaluate any prior record of disciplinary action or pending disciplinary action or investigation in any other state and the applicant's complete professional employment history.

(e) All candidates for licensure in dentistry in the State of New Jersey shall, in addition to any and all other requirements for licensure, be required to take and pass to the satisfaction of the Board an examination which tests the candidate's knowledge of the rules, regulations and statutes pertaining to the practice of dentistry in New Jersey. Such examination shall be offered at least twice each year in the English language, at such time and place as the Board shall determine.

(f) To obtain a license to practice dentistry, the candidate must pass all parts of the National Board Dental Examinations.

Amended by R.1973 d.194, eff. December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Amended by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Reorganized qualifications to this section.

Amended by R.1995 d.191, effective April 3, 1995.

See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

13:30-1.2 Resident permit

Prior to obtaining licensure, a graduate of an approved dental school who has passed Part I and Part II of the National Board Dental Examination may serve as a resident in an approved hospital upon obtaining a resident permit from the Board. A resident permit shall be renewed annually for the length of the residency program.

Repeal and New Rule: R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

The following annotations pertain to N.J.A.C. 13:30-1.2, Application process:

Amended by R.1973 d.194, effective December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Amended by R.1989 d.581, effective November 20, 1989.

See: 21 N.J.R. 2466(a), 21 N.J.R. 3670(a).

Deleted (d) regarding fees for simultaneous reexamination.

Amended by R.1995 d.191, effective April 3, 1995.

See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

13:30-1.3 (Reserved)

Amended by R.1973 d.194, effective December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.4 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.5 (Reserved)

Amended by R.1973 d.114, effective April 26, 1973.

See: 5 N.J.R. 51(a), 5 N.J.R. 166(c).

Amended by R.1973 d.194, effective December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Administrative correction to (b).

See: 21 N.J.R. 2386(a).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.6 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.7 (Reserved)

Amended by R.1973 d.194, eff. December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.8 (Reserved)

Amended by R.1973 d.194, eff. December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.9 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.10 (Reserved)

Repeal and New Rule, R.1973 d.194, eff. December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.11 (Reserved)

Repeal and New Rule, R.1973 d.194, effective December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.12 (Reserved)

Repeal and New Rule, R.1973 d.194, effective December 11, 1973.

See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

Amended by R.1974 d.110, effective May 3, 1974.

See: 6 N.J.R. 118(c), 6 N.J.R. 246(d).

Amended by R.1989 d.581, effective November 20, 1989.

See: 21 N.J.R. 2466(a), 21 N.J.R. 3670(a).

In (d)3: deleted text regarding fees and increased license fee from \$50.00 to \$100.00.

Repealed by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.13 (Reserved)

Repealed by R.1973 d.194, effective December 11, 1973.
See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

13:30-1.14 (Reserved)

Repealed by R.1973 d.194, effective December 11, 1973.
See: 5 N.J.R. 154(c), 5 N.J.R. 291(c).

13:30-1.15 (Reserved)

Administrative correction to (b).
See: 21 N.J.R. 2386(a).
Amended by R.1989 d.581, effective November 20, 1989.
See: 21 N.J.R. 2466(a), 21 N.J.R. 3670(a).
In (d): raised fee from \$50.00 to \$75.00.
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-1.16 (Reserved)

Administrative correction to (a)2.
See: 21 N.J.R. 2386(a).
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

SUBCHAPTER 2. APPLICANTS FOR LICENSE AND STANDARDS FOR PRACTICE FOR DENTAL AUXILIARIES

13:30-2.1 Qualifications of applicants for license to practice dental hygiene

(a) All persons desiring to practice dental hygiene in New Jersey must first secure a license from the Board.

(b) A candidate for licensure as a dental hygienist shall present proof satisfactory to the Board of the following:

1. National Dental Hygiene Board certification;
2. Northeast Regional Board certification;
3. Successful completion of the New Jersey jurisprudence examination; and
4. Graduation from an educational program in dental hygiene approved by the Board and the Commission on Dental Accreditation.

(c) The Board may, in its discretion, grant a waiver of Northeast Regional Board performance testing depending upon the record of the candidate. The candidate shall submit, at a minimum, evidence in the form required by the Board of the following:

1. Licensure in another state and licensure in good standing in all states where licensed;
2. Graduation from an educational program in dental hygiene approved by the Board and the Commission on Dental Accreditation;

3. Test results of any clinical examination other than the Northeast Regional Board; and

4. Ten credits of continuing education in dental hygiene earned within two years prior to the application.

(d) The Board will recognize successful completion of the Northeast Regional Board Examination for up to five years. After five years, the Board will review each request on a case by case basis and may, in its discretion, recognize successful completion of the Northeast Regional Board examination provided the candidate submits, at a minimum, evidence in the form required by the Board of the following:

1. Licensure in good standing in every state where currently licensed; and
2. Ten credits of continuing education in dental hygiene earned within two years prior to the application.

(e) As part of its review of applicants requesting waiver of Northeast Regional Board testing as set forth in (c) above or recognition of the Northeast Regional Board Examination after five years as set forth in (d) above, the Board will consider and evaluate any prior record of disciplinary action or pending disciplinary action or investigation in any other state and the applicant's complete professional employment history.

13:30-2.2 Qualifications of registered dental assistants

(a) A dental assistant desiring to secure registration from the Board shall have the following qualifications:

1. Satisfactorily completed and graduated, within the past 10 years, from an educational program for dental assistants approved by the Board and the Commission on Dental Accreditation; or
2. Successfully completed high school (or its equivalent) and obtained at least two years' work experience as a dental assistant during the five year period prior to making application for registration.

(b) The candidate shall have satisfactorily completed the Certification Examination administered by the Dental Assisting National Board within 10 years prior to the application.

(c) All registered dental assistants shall furnish the Board with proof of one of the following:

1. A certificate of graduation from an approved educational program in dental assisting in which the expanded functions or duties as listed in N.J.A.C. 13:30-2.4(a) are taught;
2. A certificate of successful completion of an examination for clinical competency in expanded functions in dental assisting administered by the Board or its delegated authority; or

3. A certificate of successful completion of an approved program in expanded functions in dental assisting. The Board may recognize the following as providers of approved programs in expanded functions:

- i. An institution approved by the Commission on Dental Accreditation;
- ii. Institutions of higher education which have met the standards of the Commission of Higher Education or a regional agency recognized by the Council on Post-Secondary Accreditation;
- iii. In-service training programs conducted at the graduate level by agencies of the Federal, State, or local government; and
- iv. Internship and residency programs conducted in hospitals which are approved by the Council on Hospital Dental Services of the American Dental Association.

13:30-2.3 Duties of licensed dental hygienist

(a) A licensed dental hygienist practicing under the direct supervision of a licensed dentist may:

1. Perform a complete prophylaxis including the removal of all hard and soft deposits from all surfaces of human natural and restored teeth to the epithelial attachments and the polishing of natural and restored teeth. Root planing may be performed as a separate procedure or as part of the prophylaxis;
2. Provide prophylactic and preventive measures such as the application of fluorides and pit and fissure sealants and other recognized topical agents for the prevention of oral disease or discomfort;
3. Examine soft and hard tissue of the head, neck and oral cavity; note deformities, defects and abnormalities therein;
4. Fabricate athletic mouth guard appliances;
5. Place and remove rubber dams;
6. Place and remove matrices and wedges;
7. Place temporary sedative restorations;
8. Remove excess cement from crowns or other restorations and orthodontic appliances;
9. Remove sutures;
10. Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intra-oral occlusal adjustment;
11. Take impressions for diagnostic models and models to be used as counters for fixed or removable prostheses;
12. Place amalgam and gold foil in a tooth for condensation by the dentist;

13. Place and remove retraction cords and medicated pellets;

14. Perform bite registration procedures to determine occlusal relationship of diagnostic models only;

15. Place and remove periodontal dressings and other surgical dressings;

16. Trial size (pre-select) orthodontic bands, wires, stainless steel crowns and temporary crowns intra-orally;

17. Prepare teeth for bonding;

18. Remove arch wires and ligature wires;

19. Make radiographic exposures as permitted by the Department of Environmental Protection;

20. Provide oral health education such as, but not limited to, dietary analysis and clinical instruction in order to promote dental health;

21. Apply topical anesthetic agents;

22. Take and record vital signs;

23. Retract patient's cheek, tongue or other tissue parts during a dental operation;

24. Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes and water;

25. Isolate the operative field, not to include rubber dam;

26. Trial size (pre-select) orthodontic bands, wires, stainless steel crown and temporary crowns on a diagnostic model;

27. Hold a curing light in the process of restoring a tooth;

28. Take dental photographs including the use of intra-oral cameras;

29. Select shades for prosthetic appliances; and

30. Assist a licensed dentist in the administration of nitrous oxide, provided the licensed dentist is physically present in the operatory at all times during the procedure.

(b) A licensed dental hygienist practicing within an institution subject to the supervision of a New Jersey licensed dentist in the institution may:

1. Perform a complete prophylaxis including the removal of all hard and soft deposits from all surfaces of human natural and restored teeth to the epithelial attachments and the polishing of natural and restored teeth. Root planing may be performed as a separate procedure or as part of the prophylaxis;

2. Provide prophylactic and preventive measures such as the application of fluorides and pit and fissure sealants and other recognized topical agents for the prevention of oral disease or discomfort;

3. Examine soft and hard tissue of the head, neck and oral cavity, and note deformities, defects and abnormalities therein;

4. Make radiographic exposures as permitted by the Department of Environmental Protection;

5. Provide oral health education such as, but not limited to, dietary analysis and clinical instruction in order to promote dental health;

6. Take and record vital signs; and

7. Take dental photographs including the use of intra-oral cameras.

(c) Each licensed dentist may utilize no more than two licensed dental hygienists at one time in a dental office.

13:30-2.4 Duties of a registered dental assistant and a dental assistant without registration

(a) A registered dental assistant may perform the following duties under the direct supervision of a licensed dentist:

1. Place and remove rubber dams;
2. Place and remove matrices and wedges;
3. Place temporary sedative restorations;
4. Remove excess cement from crowns or other restorations and orthodontic appliances;
5. Remove sutures;
6. Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intra-oral occlusal adjustment;
7. Take impressions for diagnostic models and models to be used as counters for fixed or removable prostheses;
8. Place amalgam and gold foil in a tooth for condensation by the dentist;
9. Place and remove retraction cords and medicated pellets;
10. Perform bite registration procedures to determine occlusal relationships of diagnostic models only;
11. Place and remove periodontal dressings and other surgical dressings;
12. Trial size (pre-select) orthodontic bands, wires, stainless steel crowns and temporary crowns intra-orally;
13. Prepare teeth for bonding not to include prophylaxis;
14. Remove arch wires and ligature wires;

15. Take impressions for and perform laboratory fabrication of athletic mouth guards not to include insertion of the appliance;

16. Make radiographic exposures as permitted by the Department of Environmental Protection;

17. Provide oral health education such as, but not limited to, dietary analysis and clinical instruction in order to promote dental health;

18. Apply topical anesthetic agents;

19. Take and record vital signs;

20. Retract patient's cheek, tongue or other tissue parts during a dental operation;

21. Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes and water;

22. Isolate the operative field, not to include rubber dam;

23. Trial size (pre-select) orthodontic bands, wires, stainless steel crown, and temporary crowns on a diagnostic model;

24. Hold a curing light in the process of restoring a tooth;

25. Take dental photographs including the use of intra-oral cameras;

26. Select shades of prosthetic appliances; and

27. Assist a licensed dentist in the administration of nitrous oxide, provided the licensed dentist is physically present in the operatory at all times during the procedure.

(b) A dental assistant who has not obtained a registration from the Board may perform the following duties under the direct supervision of a licensed dentist:

1. Make radiographic exposures as permitted by the Department of Environmental Protection;
2. Provide oral health education such as, but not limited to, dietary analysis and clinical instruction in order to promote dental health;
3. Apply topical anesthetic agents;
4. Take and record vital signs;
5. Retract patient's cheek, tongue or other tissue parts during a dental operation;
6. Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes and water;
7. Isolate the operative field, not to include rubber dam;

8. Trial size (pre-select) orthodontic bands, wires, stainless steel crown, and temporary crowns on a diagnostic model only;

9. Hold a curing light in the process of restoring a tooth;

10. Take dental photographs including the use of intra-oral cameras;

11. Select shades for prosthetic appliances; and

12. Assist a licensed dentist in the administration of nitrous oxide, provided the licensed dentist is physically present in the operatory at all times during the procedure.

(c) A dental assistant may provide a written work authorization for emergency repair of a dental prosthesis provided that the prosthesis does not require any intra-oral procedure and will be thereafter inserted by a licensed dentist.

13:30-2.5 Continuing education requirements; dental hygienists and dental assistants

(a) All licensed dental hygienists and registered dental assistants shall submit proof of completion of 10 hours of continuing education every two years at the time of registration renewal. No more than four hours of continuing education in the two year period may be fulfilled through home study courses.

(b) An acceptable form of continuing education shall directly enhance the licensees or registrant's knowledge, skill or competence in dental service to the community.

(c) The following shall be considered acceptable forms of continuing education:

1. Scientific courses applicable to the delivery of dental care, including, but not limited to, preventive services, radiography, dental photography, nutrition, patient counseling, community health, C.P.R. certification, and infection control; and

2. Courses which directly relate to or concern the practice of dentistry, including, but not limited to, organization and office management, office design, communication skills, behavioral science, dental-legal matters and methods of health care delivery.

(d) The Board may recognize as acceptable the courses of study and amount of hours credited in continuing education programs approved by:

1. The American Dental Association and its constituents and components;

2. The Academy of General Dentistry and its constituents and components;

3. The American Dental Hygienists Association and its constituents and components;

4. The American Dental Assistants' Association and its constituents and components; and

5. Accredited colleges or universities which meet the definition of acceptable courses in (c) above.

(e) It shall be the responsibility of each licensee/registrant to maintain an authenticated record of all continuing education activity completed and to be prepared to submit evidence of completion of the credit requirements to the Board upon request. Each licensee/registrant shall obtain from the continuing education course sponsor and retain for a period of four years an authenticated record of attendance which shall include, at a minimum, the following:

1. The participant's name;

2. The title or subject area of the course;

3. The instructor;

4. The course sponsor;

5. The date and location of the course;

6. The number of hours; and

7. Verification of successful completion by the course sponsor.

(f) The Board may inspect the licensee/registrant's records as may be necessary to insure that the continuing education requirements have been met.

13:30-2.6 Resumption of active practice by inactive dental hygienists

(a) Any dental hygienist who has been on the inactive status list for any period of time and wishes to resume the active practice of dental hygiene shall, in addition to making application for a current certificate of registration and paying the appropriate fee, submit satisfactory evidence of completion of 10 hours of continuing education earned in the two years preceding the application for active status.

(b) The minimum standards which shall be met by applicants who have been on the inactive status list for five or more years and who want to resume the practice of dental hygiene are as follows:

1. The individual shall apply to the Board for a current biennial certificate of registration and pay the prescribed registration fee;

2. An individual licensed and practicing in another state shall furnish the Board with a certification from the other state that the license to practice dental hygiene is in good standing; and

3. An individual who has not practiced for five or more years shall:

i. Pass the Northeast Regional Board (N.E.R.B.) examination in dental hygiene; or

ii. Complete satisfactorily a Board approved clinical refresher course provided by an institution accredited by the American Dental Association Commission on Dental Accreditation.

(c) An individual who has not practiced for more than 10 years shall pass the N.E.R.B. examination in dental hygiene.

SUBCHAPTER 3. APPLICANTS FOR LIMITED TEACHING CERTIFICATE IN A DENTAL SCHOOL

13:30-3.1 Qualifications of applicants

(a) All dentists desiring to teach dentistry in any of its branches, in this State, must hold a regularly issued license in dentistry, in the State of New Jersey, or must have procured a Limited Teaching Certificate from the New Jersey State Board of Dentistry, renewable annually prior to October 1.

(b) An applicant for such limited license must have general and technical knowledge similar to that required in this State for a license to practice dentistry without limitation.

(c) He must submit proof satisfactory to the Board of his graduation from a dental school approved by the Board.

Amended by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

(d) deleted and language replaced in section on fee schedule.

13:30-3.2 Application procedure

(a) The applicant shall:

1. Obtain from the Secretary of the Board an application for limited teaching certificate;
2. Complete an application in every detail, including a certification of graduation by proper official of dental school;
3. Give two character references, preferably from reputable New Jersey dentists; and
4. Have the completed application notarized.

Amended by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Language regarding fee reorganized in section on fee schedule.

13:30-3.3 Limitations on certificate

(a) Teaching certificates are only valid in and upon the premises designated in the certificate in which the science of dentistry in any of its branches is taught.

(b) No such limited certificate shall be deemed to authorize the licensee to engage in private practice of dentistry either within or without the said premises.

13:30-3.4 Educational institutions

(a) Every educational institution where the science of dentistry is practiced, demonstrated or taught in any of its branches shall submit to the Board each year prior to October 1, a roster of all persons engaged in teaching any of the clinical subjects or who act as demonstrators or teachers in the laboratories or clinics where the practice of dentistry of any kind is performed on patients.

(b) The Board shall prescribe a form for such roster and make rules governing their submission.

SUBCHAPTER 4. INDUSTRIAL OR CORPORATE CLINICS

13:30-4.1 Industrial or corporate clinic defined

"An industrial or corporate clinic" is a privately owned clinic maintained and operated by an industrial corporation, an organization composed of management of several industries, or a labor organization or organizations or any combinations thereof where dentistry in any or all of its branches is practiced, demonstrated or taught on a nonprofit basis for the benefit of the employees and their dependents of the industries involved or members of the labor organization or organizations and their dependents.

13:30-4.2 Application for permit

(a) All industrial or corporate agencies who wish to operate a dental clinic in New Jersey shall make application to the New Jersey State Board of Dentistry for permit to operate such a clinic.

(b) This permit shall be effective upon the date the Board grants the privilege and shall terminate on December 31, of the same year.

(c) All industrial or corporate agencies who wish to operate a dental clinic in New Jersey shall define the type of services to be rendered.

13:30-4.3 Documents submitted with application for permit

The following instruments shall accompany the application:

(a) Floor plan of clinic (to scale) setting forth:

1. Number of operatories;
2. Recovery rooms;
3. Reception room or rooms;
4. Rest-room facilities;
5. Laboratory facilities;

6. Storage-room facilities; and
 7. Record room.
- (b) Personnel connected with the clinic including:
1. Director—name, home address and license number;
 2. Dentists—name, home address and license number;
 3. Dental hygienists—name, home address and license number;
 4. Dental assistants—name and home address;
 5. Dental technicians—name and home address;
 6. Other personnel—names with titles and home addresses;
 7. If the clinic is to be operated by a public corporation, the names and addresses of all directors and officers;
 8. If the clinic is to be operated by a closed corporation, the names and addresses of all directors, officers and stockholders; and
 9. If the clinic is to be operated by other entity, the names and addresses of all persons having any responsibility with respect to the maintenance, operation, or establishment of clinic in either professional or business capacity.

(c) Contracts involving the clinic including:

1. List of services to which eligible persons are entitled;
2. Copy of contract between owner of clinic and the dental director;
3. Copy of contract between owner of clinic and dentists;
4. Copy of contract between owner of clinic and dental hygienists and all other personnel;
5. If dental director engages the services of dentists and dental hygienists and other personnel, a copy of these contracts;
6. If operators are to be remunerated on a fee for service basis, a copy of the fee schedule shall be included;
7. All contractors shall be filed with the New Jersey State Board of Dentistry and any changes in such contracts must have prior Board approval.

(d) A proposed budget for the operation of the clinic and the financial statement of the applicant shall accompany the application.

13:30-4.4 Permits not transferable

Clinic permits when issued shall not be transferable.

13:30-4.5 Annual registration renewal

(a) Every clinic in New Jersey that has a permit to operate shall procure from the Secretary-Treasurer of the Board on or before January 1 each year an annual certificate of renewal. Such certificate shall be issued by the Secretary-Treasurer.

(b) The Secretary-Treasurer of the Board shall on or before December 1 each year, mail to each holder of a clinic permit a printed renewal application to be properly filled out and returned by such holder of permit to said Secretary-Treasurer.

(c) Upon receipt of such application, the annual certificate of renewal shall be issued and transmitted.

(d) Any industrial or corporate clinic that fails to procure such annual registration, or fails to fill out a request for annual registration properly, or gives misleading or false information on request for annual registration shall, upon action of the Board, have its permit declared null and void.

13:30-4.6 Changes require Board approval

No industrial or corporate clinic shall make a fundamental change in its administrative organization, personnel, construction or physical plant changes or stated objectives without first apprising the Board of such contemplated changes and receiving written approval from the Board.

13:30-4.7 Qualifications

All dental clinics operated, conducted or maintained in this State shall not have any operations performed therein except by licensed dentists or licensed dental hygienists in accordance with the provisions of the Act.

13:30-4.8 Crimes involving moral turpitude

No clinic can be established by an organization where an officer, director, trustee or other executive official has been convicted of a crime involving moral turpitude.

13:30-4.9 Standards of service and facilities

(a) For the purpose of carrying on a dental health program, the following standards of service and facilities shall be maintained depending upon the scope of services rendered.

1. The services rendered shall be in keeping with accepted concepts, methods and degree of proficiency.
2. The facilities shall consist of adequate dental equipment and armamentarium, including proper and efficiently operating sterilizing and sanitary devices to make possible the satisfactory dental treatment in accordance with accepted concepts.
3. Adequate recovery rooms and emergency equipment that meet hospital standards shall be provided.

4. Rest rooms and waiting rooms in sufficient number and size to accommodate flow of traffic shall be provided.

5. The clinic shall comply with all rules and regulations adopted for such places of health service as promulgated by the New Jersey State Department of Health and any other State and/or local governmental agency.

13:30-4.10 Inspection; requirements of Director

(a) Members of the New Jersey State Board of Dentistry or their duly appointed representatives may visit the clinic for the purpose of inspection.

(b) The Director of the clinic shall be a dentist. The Director and all dentists or dental hygienists employed in the dental clinic shall be licensed to practice dentistry or dental hygiene in the State of New Jersey.

(c) The Director is responsible for activities of all professional and auxiliary personnel employed in clinic.

(d) If the facilities of the clinic are used in any way in the illegal practice of dentistry and offenders are found guilty, the Director shall be held equally responsible and liable to prosecution.

(e) All names of persons employed and titles of employment are to be furnished to the Board at the time of request for annual renewal permit. Branch office or main office registration information shall be included with each name.

(f) Dental hygienists shall be limited by State Laws and statutes regarding the type of services and supervision.

(g) Director shall furnish to the Board the method of operation as to control, direction and authority in dental matters including:

1. To whom the Director is responsible; and
2. Type of service rendered.

(h) All matters pertaining to the operation of a dental clinic shall be determined by the Dental Director.

SUBCHAPTER 5. STANDARDS FOR APPROVAL OF DENTAL SCHOOLS

13:30-5.1 Requisites for dental schools

(a) The Board will accept for licensure only graduates of dental schools approved by the Commission on Dental Accreditation.

(b) For purposes of granting limited teaching certificates, the Board will accept graduates of dental schools approved by the Commission on Dental Accreditation or graduates of dental schools approved at the discretion of the Board.

Repeal and New Rule: R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.2 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.3 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.4 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.5 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.6 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.7 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.8 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.9 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.10 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.11 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.12 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.13 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-5.14 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

SUBCHAPTER 6. STANDARDS FOR APPROVAL OF SCHOOLS OF ORAL HYGIENE

13:30-6.1 General requirements

All dental hygiene schools must be approved by the Commission on Dental Accreditation.

Repeal and New Rule: R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.2 (Reserved)

Petition for Rulemaking: Amend section.
See: 18 N.J.R. 1844(a).
Amended by R.1987 d.419, effective October 19, 1987.
See: 19 N.J.R. 849(a), 19 N.J.R. 1909(b).
Substantially amended.
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.3 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.4 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.5 (Reserved)

Amended by R.1987 d.419, effective October 19, 1987.
See: 19 N.J.R. 849(a), 19 N.J.R. 1909(b).
Substantially amended.
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.6 (Reserved)

Repealed by R.1987 d.419, effective October 19, 1987.
See: 19 N.J.R. 849(a), 19 N.J.R. 1909(b).
Section was dormitories.

13:30-6.7 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.8 (Reserved)

Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.9 (Reserved)

Petition for Rulemaking: Amend section.
See: 18 N.J.R. 1844(a).
Amended by R.1987 d.419, effective October 19, 1987.
See: 19 N.J.R. 849(a), 19 N.J.R. 1909(b).
Deleted (a), renumbered (b)-(c) to (a)-(b).
Administrative correction to (b)5.
See: 21 N.J.R. 2386(a).
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-6.10 (Reserved)

Administrative correction to (a).
See: 21 N.J.R. 2386(a).
Repealed by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

SUBCHAPTER 7. FORMS

13:30-7.1 (Reserved)

Repealed by R.1987 d.12, effective January 5, 1987.
See: 17 N.J.R. 2851(b), 19 N.J.R. 131(a).
Section was "Uniform penalty letter".

SUBCHAPTER 8. GENERAL PROVISIONS

13:30-8.1 Fee schedules

(a) The application fees charged by the Board of Dentistry shall be the following:

- 1. Dentists \$125.00
- 2. Dental Hygienists \$75.00
- 3. Dental Hygienists—expanded duties supplement \$25.00
- 4. Registered Dental Assistants \$35.00

(b) The Biennial Registration fees charged by the Board of Dentistry shall be the following:

- 1. Dentists:
 - i. Active registration \$160.00
 - ii. Inactive registration \$70.00
 - iii. Branch office \$40.00
- 2. Dental Hygienists:
 - i. Active registration \$50.00
 - ii. Inactive registration \$20.00
 - iii. Branch office \$20.00
- 3. Registered Dental Assistants
 - i. Active registration \$50.00

(c) Registrations submitted after due dates shall have the following late fees assessed:

- 1. Dentists:
 - i. Active registration \$35.00
 - ii. Inactive registration \$35.00
- 2. Dental Hygienists:
 - i. Active registration \$35.00
 - ii. Inactive registration \$35.00
- 3. Registered Dental Assistants:
 - i. Active registration \$35.00

(d) Other fees:

- 1. Limited teaching certificate
 - i. Application \$10.00
 - ii. Annual Renewal \$5.00
- 2. Resident permit \$10.00

- 3. Registration of dentists by reciprocity—
application fee \$250.00
- 4. Registration of dental hygienists by
credentials—application fee \$125.00
- 5. Verification of licensure \$25.00
- 6. Duplicate wall certificate \$50.00
- 7. Duplicate license \$50.00

(e) Except for the fee herein established, other fees prescribed by statute shall continue to be assessed by the Board in the lawful amount.

New Rule, R.1975 d.259, effective August 25, 1975.
See: 7 N.J.R. 482(b).
Amended by R.1976 d.11, effective January 14, 1976.
See: 7 N.J.R. 508(a), 8 N.J.R. 84(a).
Repeal and New Rule, R.1980 d.527, effective December 4, 1980.
See: 11 N.J.R. 453(a), 13 N.J.R. 41(d).
Section was "Fee schedule".
Amended by R.1985 d.196, effective April 15, 1985.
See: 17 N.J.R. 378(a), 17 N.J.R. 972(a).
Amended by R.1986 d.168, effective May 5, 1986.
See: 18 N.J.R. 398(a), 18 N.J.R. 995(b).
Fees raised; new (b); old (b) recodified to (c).
Amended by R.1989 d.581, effective November 20, 1989.
See: 21 N.J.R. 2466(a), 21 N.J.R. 3670(a).
Fees increased throughout. Added new (a); relettered old (a)-(c) as new (b)-(d), with new (b)2ii and (c)2ii.
Amended by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).
New (d) added regarding other fees, (d) recodified to (e).
Amended by R.1993 d.598, effective November 15, 1993.
See: 25 N.J.R. 3927(a), 25 N.J.R. 5352(d).

Case Notes

Board obligated to refund monies collected in excess of statutory authority pursuant to former fee regulation judicially invalidated. In Re Fees of the State Bd. of Dentistry, 84 N.J. 582, 423 A.2d 640 (1980).

Former rule held invalid as establishing fees in excess of those required to defray Board's proper expenses. In re Increase in Fees by the New Jersey State Bd. of Dentistry, 166 N.J.Super. 219, 399 A.2d 665 (App.Div.1979), reversed on other grounds 84 N.J. 582, 423 A.2d 640 (1980).

13:30-8.2 Parenteral conscious sedation

(a) The use of parenteral conscious sedation (hereinafter referred to as "PCS") by a dentist without first having met the minimum standards of training and procedure as stated herein shall constitute a deviation from the normal standards of practice required of a licensee.

(b) Parenteral conscious sedation is defined as a depressed level of consciousness produced by the parenteral administration of pharmacologic substances that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command. This modality includes administration of medications via all parenteral routes, that is, intravenous, intramuscular, subcutaneous, submucosal, or inhalation, but does not include nitrous-oxide inhalation analgesia.

(c) No dentist shall use PCS for dental patients unless such dentist possesses a PCS permit issued by the State Board of Dentistry. The dentist holding such permit shall

be subject to review, and such permit shall be renewed biennially.

(d) Any dentist who wishes to obtain a Board permit to employ PCS shall complete an application as provided by the Board office and shall provide certified or verifiable proof that the dentist has completed a minimum of 100 hours of continuing education in didactic training and 100 hours in clinical training in PCS within three years preceding the application.

(e) Every applicant for a permit to use PCS shall obtain emergency training by completing "Basic Life Support: Course C" of the American Heart Association or its equivalent and shall maintain current certification in the course. The applicant shall furnish proof of this training and certification to the Board upon application for a permit and proof of recertification upon biennial renewal of the permit.

(f) Every applicant for a permit to use PCS additionally shall certify to the Board that the dentist employs no fewer than two persons who will be present in the office, at least one of whom will assist in monitoring the patient whenever PCS is employed. The applicant shall further certify that these persons are trained in and capable of monitoring vital signs and of assisting in emergency procedures and that they maintain current certification in "Basic Life Support: Course C" or its equivalent.

(g) Every applicant for a permit to use PCS shall certify as part of the application that he or she possesses basic equipment and supplies to deal with emergency situations. The permit holder's facility shall contain the following readily accessible and properly operating equipment: emergency drug kit; positive pressure oxygen; stethoscope; suction; nasopharyngeal tubes; oropharyngeal tubes; and a blood pressure monitoring device.

(h) Any licensee who holds a current general anesthesia permit issued by the Board of Dentistry shall be authorized to use PCS and shall not be required to make application for a permit pursuant to this section.

(i) Any dentist who utilizes the services of a PCS permit holder or an M.D. or D.O. who is a member of the anesthesiology staff of an accredited hospital shall not be deemed to be practicing PCS, provided that such permit holder or anesthesiologist must remain present and bears full responsibility during the entire procedure and until any patient has recovered fully and has been dismissed. Any permit holder invited by a dentist to provide PCS services shall bear full responsibility for compliance with all terms and conditions of this rule including, but not limited to, the minimum requirements for equipment and assisting staff.

(j) Prior to the administration of a PCS agent for the purpose of controlling pain, a physical evaluation shall be made by the permit holder and a complete medical history shall be obtained which shall include previous medications,

allergies and sensitivities. Said history shall be maintained in the files of each dentist for a period of not less than seven years. Specific records on the use of PCS shall be kept as part of every patient chart and shall include the type of agent, the dosage and the duration of sedation.

(k) Every licensee who holds a PCS permit shall present satisfactory proof to the Board upon biennial renewal that the holder has completed at least 20 credit hours during the previous two year period in continuing education courses devoted to PCS and presented by an accepted program in a suitable institution. Satisfactory credit hours to fulfill this continuing education requirement may be obtained from the following:

1. Professional service review organizations;
2. Teaching;
3. Lectures;
4. Seminars; or
5. Other methods approved by the Board.

(l) Any designee of the Board shall be authorized during ordinary business hours to enter and inspect any dental office for the purpose of enforcing the provisions of this rule.

(m) Any licensee who administers PCS without first having obtained a permit from the Board or any licensee who fails to comply with the rules set forth herein, shall be deemed to have engaged in professional misconduct and/or gross malpractice or negligence and may be subjected to appropriate disciplinary action including an action for the suspension or revocation of the licensee's license to practice dentistry in the State of New Jersey.

New Rule, R.1976 d.353, eff. November 10, 1976.
 See: 8 N.J.R. 199(a), 8 N.J.R. 561(a).
 Repealed by R.1987 d.419, effective October 19, 1987.
 See: 19 N.J.R. 849(a), 19 N.J.R. 1909(b).
 Section was "Additional dental hygiene functions".
 New Rule, R.1990 d.174, effective March 19, 1990.
 See: 21 N.J.R. 3060(a), 22 N.J.R. 976(a).
 Amended by R.1995 d.191, effective April 3, 1995.
 See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

13:30-8.3 Use of general anesthesia

(a) The use or employment of general anesthesia by a dentist without first having met the minimum standards of training and procedure as stated herein shall constitute a deviation from the normal standards of practice required of a licensee.

(b) General anesthesia consists of the deliberate use of any drug, combination of drugs, element or other material with the specified intent to induce a loss of sensation and consciousness.

(c) No dentist shall employ or use general anesthesia on an outpatient basis for dental patients unless such dentist possesses a permit or authorization issued by the State Board of Dentistry. The dentist holding such permit shall be subject to review, and such permit shall be renewed biennially.

(d) In order to receive such a permit, the dentist shall apply on an official application form and submit certified or verifiable proof that he or she:

- i. Has completed a minimum of three years post-doctoral training in oral surgery, or a minimum one-year training course in anesthesiology; or
- ii. Is a diplomate in oral surgery or is Board-eligible in oral surgery; or
- iii. Is a fellow of the American Dental Society of Anesthesiology, or is a member of the American Society of Oral Surgeons and/or is a member of the New Jersey Society of Oral Surgeons.

(e) Every applicant for a general anesthesia permit must certify that he or she employs no fewer than two persons who must be present in the office, at least one of whom shall assist in monitoring the patient under general anesthesia. Such personnel shall be certified by the permit holder as being trained in and capable of monitoring vital signs, and of assisting in emergency procedures.

(f) Every applicant for a general anesthesia permit must certify that he or she possesses basic equipment and supplies to deal with emergency situations, which equipment and supplies shall be readily accessible and in good order. This shall consist of no less than the list that shall be supplied by the Board.

(g) The dental facility of any permit holder shall be inspected and approved by the State Board of Dentistry or its designee, once every six years.

(h) This permit shall be renewed biennially upon satisfactory proof being submitted to the Board that the holder has completed at least 20 hours during the previous two year period in continuing education courses devoted to general anesthesia and approved by the Board.

(i) Satisfactory credit hours to fulfill the continuing education requirement may be obtained in any one of the following areas:

1. Professional service review organizations;
2. Teaching;
3. Lectures;
4. Seminars; or
5. Other methods approved by the Board.

(j) Prior to the administration of an anesthetic agent for the purpose of controlling pain, a physical evaluation shall be made by the permit holder and a complete medical history which shall include previous medications, allergies and sensitivities shall be obtained. Said history shall be maintained in the files of each dentist for a period of not less than seven years succeeding the taking of same. Specific records on use of general anesthesia shall be kept and shall include type of agent, dosage and duration.

(k) Any dentist who utilizes the services of a permit holder or an M.D. or D.O. who is a member of the anesthesiology staff of an accredited hospital shall not be deemed to be practicing general anesthesia provided that such permit holder or anesthesiologist remains present and bears full responsibility during the entire procedure and until any patient regains consciousness. Any permit holder invited by a dentist to provide general anesthesia services shall bear full responsibility for compliance with all terms and conditions of this rule including, but not limited to, the minimum requirements for equipment and assisting staff.

(l) Every applicant for a permit to use general anesthesia must obtain emergency training by completing the "Basic Life Support: Course C" of the American Heart Association or its equivalent and must maintain current certification in said course. This training also shall be required of all persons who assist in monitoring a patient under general anesthesia. The permit applicant must furnish proof of said training and certification to the Board.

(m) Any designee of the Board shall be authorized during ordinary business hours to enter and inspect any dental office for the purpose of enforcing the provisions of this rule.

(n) Any licensee who administers general anesthesia without first having obtained a permit from the Board or any licensee who fails to comply with the rules set forth herein, shall be deemed to have engaged in professional misconduct and/or gross malpractice or negligence and may be subjected to appropriate disciplinary action including an action for the suspension or revocation of the licensee's license to practice dentistry in the State of New Jersey.

New Rule, R.1976 d.367, eff. November 19, 1976.

See: 8 N.J.R. 198(b), 8 N.J.R. 561(b).

Amended by R.1977 d.206, eff. June 9, 1977.

See: 9 N.J.R. 128(c), 9 N.J.R. 346(a).

Amended by R.1978 d.120, eff. April 6, 1978.

See: 9 N.J.R. 483(a), 10 N.J.R. 203(b).

Amended by R.1980 d.423, eff. September 30, 1980.

See: 12 N.J.R. 430(a), 12 N.J.R. 672(b).

(c)3 added;

(d) amended to include last sentence concerning penalty.

Amended by R.1985 d.196, effective April 15, 1985.

See: 17 N.J.R. 378(a), 17 N.J.R. 972(a).

Amended by R.1985 d.548, effective November 4, 1985.

See: 17 N.J.R. 1864(b), 17 N.J.R. 2669(a).

Amended by R.1990 d.173, effective March 19, 1990.

See: 21 N.J.R. 3062(a), 22 N.J.R. 975(a).

In (a), use of anesthesia without meeting training standards shall constitute deviation of practice. Stylistic and codification revisions to (c)-(h). Deleted old (f) and (h). Added new (l)-(n).

13:30-8.4 Announcement of practice in a special area of dentistry

(a) Any licensee who seeks to announce to the public that he or she is a specialist or specializes in one or more area(s) of dental practice listed in (b) below shall first obtain a permit to do so from the Board of Dentistry.

(b) The following special areas of dentistry are hereby recognized as suitable for the announcement of specialty dental practices:

1. Endodontics;
2. Oral surgery;
3. Oral pathology;
4. Orthodontics;
5. Pediatric dentistry (also called Pedodontics);
6. Periodontics;
7. Prosthodontics;
8. Public health.

(c) The Board shall grant permission to announce specialty or specialization to:

1. Any licensed dentist who is currently certified or currently eligible for certification by a specialty board recognized by the American Dental Association appropriate to that area of dental practice listed in (b) above; or

2. Any licensed dentist who first meets the educational requirements and standards approved by the Board. The educational requirements and standards of the Board shall be the successful completion of a post-doctoral education of two or more years in duration in one or more of the special areas listed in (b) above and which, at the time of completion, was accredited or provisionally accredited by the American Dental Association Council on Dental Education.

- i. The Board may review the credentials and educational background of any licensed dentist eligible by (c)2 above and approve or deny permission to announce specialization in a special area of dentistry.

(d) A licensed dentist permitted to announce by (c) above shall avoid any inference, implication or announcement by press, sign, card, letterhead or printed matter or any other means of public advertising that another licensed dentist not permitted to announce, and associated or employed in the same practice, is also qualified for the announcement in the specialty practice area.

(e) These rules regarding the announcement of specialty practice shall not prohibit any licensed dentist from engag-

ing in any aspect of the practice of dentistry in accord with applicable laws or other rules and regulations of the Board.

(f) Prior to making any announcement of specialty in accord with the preceding paragraphs, a licensed dentist shall apply to the Board for permission to do so. Application to the Board for permission to announce in a special area of dental practice shall be upon such form and contain such information as the Board may direct. When granted a permit of announcement of specialty in a designated area(s) of dentistry, a licensee shall display this permit or a copy thereof in all office location(s) during the period of specialty practice. If a licensee discontinues a specialty practice, the Board shall be so notified.

(g) All advertisements and public representations of a licensee granted a permit of announcement of specialization shall contain the licensee's name and the phrase "N.J. Specialty Permit No. _____." A licensee advertising or publicly representing that his or her practice specializes in or has licensees on staff who specialize in one or more of the special areas of dentistry in (b) above shall list the licensee's name and the phrase "N.J. Specialty Permit No. _____."

(h) If a dentist, other than a specialist granted a permit by the Board, wishes to advertise services in one or more of the special areas of dentistry in (b) above, such advertisement shall contain the licensee's name and the phrase "General Dentist" immediately preceding or following each specialty area claim in a type size and style at least as prominent as any service described as being offered in the practice. The advertisement shall not use the terms "specialist," "specialty," "specializing," "practice limited to," or any other word or phrase connoting that the licensee is a specialist. The advertisement of services exclusively in one specialty area shall be limited to those licensees who practice that specialty at all times and in all locations.

(i) If a dentist advertises under a banner heading for any of the special areas of dentistry in (b) above in any directory (for example, telephone book yellow pages), such advertisement shall contain the licensee's name and either the phrase "General Dentist" or "N.J. Specialty Permit No. _____."

(j) If a dentist wishes to advertise services in an area of dentistry other than the recognized special areas of dentistry in (b) above, such advertisement shall not use the terms "specialist," "specialty," "specializing," "practice limited to," or any other word or phrase connoting that the licensee is a specialist or that the area of dentistry is a recognized specialty.

(k) The Board may require a licensee to substantiate the truthfulness of any objective assertion or representation set forth in an advertisement.

(l) Noncompliance with these rules may be deemed professional misconduct and may subject the licensee to suspension or revocation of his or her license to practice dentistry.

(m) Applications for a permit pursuant to (a) above may be obtained by writing to the Office of the Board of Dentistry, 124 Halsey Street, P.O. Box 45005, Newark, New Jersey 07101.

New Rule, R.1976 d.370, eff. November 19, 1976.
See: 8 N.J.R. 198(a), 8 N.J.R. 562(a).
Amended by R.1980 d.368, eff. August 13, 1980.
See: 12 N.J.R. 429(a), 12 N.J.R. 609(a).
Amended by R.1985 d.253, effective May 20, 1985.
See: 17 N.J.R. 378(a), 17 N.J.R. 1320(a).
Amended by R.1986 d.269, effective July 7, 1986.
See: 18 N.J.R. 816(a), 18 N.J.R. 1394(a).
(b)8 added text "Pediatric dentistry".
Amended by R.1992 d.165, effective April 6, 1992.
See: 23 N.J.R. 3429(a), 24 N.J.R. 1365(b).
Revised text.

13:30-8.5 Complaint review procedures

(a) Complaints to the Board shall be in writing.

1. The complaint shall specify the name and address of the licensee(s) involved, the name and telephone number of the complainant, the date(s) of the alleged misconduct, and a brief but detailed explanation of the grounds for the complaint.

2. The Executive Director of the Board shall review all complaints for sufficiency. When insufficient information is given, he or she shall notify the complainant to supply the needed information without delay. Complaints may be received by telephone, but shall be confirmed in writing as indicated above.

(b) The Executive Director shall then forward the completed complaint to the licensee(s) involved with a request for all records, X-rays, models, and any other pertinent materials as well as a complete narrative in response to allegations contained in the complaint. Should sensitive material be contained in the complaint, the Executive Director may, with the consent of the Board, withhold all or part of said complaint from forwarding to the licensee(s).

1. The Executive Director shall review all responses for sufficiency. When insufficient information is given, he or she shall notify the licensee(s) to supply the information without delay.

(c) All completed complaints along with the responses of the licensee(s) shall then be forwarded to a dentist member of the Board for review and to report for consideration at the next scheduled Board meeting concerning review of complaints.

(d) The Board shall review each complaint in order to make one or more of the following determinations:

1. That the information contained in the complaint and/or the response is insufficient. In such cases, the Board shall notify the complainant or the licensee(s) to provide the needed information without delay;

2. That the information contained in the complaint and/or response is insufficient and requires information from a subsequent treating licensee(s). In such cases, the Board shall request needed information from said subsequent treating licensee(s) without delay;

3. That the complaint is of a nature that requires the complainant to be directly examined by another dentist to determine the state of the patient's dental health and the quality of the services which are the subject matter of the complaint;

4. That the complaint requires an investigative hearing as provided by N.J.S.A. 45:1-18; and/or

5. That the complaint is of a nature that requires referral for investigative purposes to the appropriate governmental agency.

(e) Upon completion of its review of a complaint the Board shall make one of the following determinations:

1. No cause for Board action;

2. Probable cause for action with attendant offer of settlement by mutual consent;

3. Referral to the Division of Law for action pursuant to N.J.S.A. 45:1-14 et seq.; and/or

4. Other direction or informal resolution as the Board shall deem appropriate.

New Rule, R.1976 d.422, effective December 17, 1976.

See: 8 N.J.R. 248(a), 9 N.J.R. 41(a).

Amended by R.1989 d.63, effective February 6, 1989.

See: 20 N.J.R. 2680(a), 21 N.J.R. 338(a).

Repealed (a)3.

Amended by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

(b)-(g) deleted, new (b)-(e) added.

Amended by R.1995 d.191, effective April 3, 1995.

See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

Case Notes

Telephone complaints permitted, but must be confirmed in writing; Board secretary required to maintain complaint log book; complainant's identity and complaint contents may be withheld during investigation, but professional has a right to disclosure of that information upon completion of the investigation. *Grodjesk v. Faghani*, 198 N.J.Super. 449, 487 A.2d 759 (App.Div.1985) modified and remanded 104 N.J. 89, 514 A.2d 1328 (1986).

13:30-8.6 Professional advertising

(a) Definitions:

1. The term "advertisement" shall refer to the attempt directly or indirectly by publication, dissemination, solicitation, endorsement or circulation or in any other way to attract directly or indirectly any person to enter into an

express or implied agreement to accept dental services or treatment related thereto.

2. The term "routine professional service" shall refer to a service which the advertising licensee, professional association or institution providing dental care routinely performs.

3. The term "print media" shall refer to newspapers, magazines, periodicals, professional journals, telephone directories, circulars, handbills, flyers and other similar documents or comparable publications, the content of which is disseminated by means of the printed word.

4. The term "electronic media" shall include radio and television, but shall not include communications made by sound equipment from a motor vehicle.

5. The term "range of fees" shall refer to an expressly stated upper and lower limit on the fee charged for a professional service.

(b) A licensed dentist who is actively engaged in the practice of dentistry in the State of New Jersey may provide information to the public by advertising in print or electronic media.

(c) A licensee who engages in the use of advertising which contains the following shall be deemed to be engaged in professional misconduct:

1. Any statement, claim or format which is false, fraudulent, misleading or deceptive.

2. Claims that the service performed or the materials used are professionally superior to that which is ordinarily performed or used unless such claims can be substantiated by the licensee and are not misleading or deceptive.

3. Promotion of a professional service which the licensee knows or should know is beyond the licensee's ability to perform.

4. Techniques of communication which appear to intimidate, exert undue pressure or undue influence over a prospective patient.

5. The communication of personally identifiable facts, data, or information about a patient without first obtaining written consent.

6. The use of any misrepresentation.

7. The suppression, omission or concealment of any material fact under circumstances which a Board licensee knows or should know that the omission is improper or prohibits a prospective patient from making a full and informed judgment, on the basis of the information set forth in the advertisement.

8. Any print, language or format which directly or indirectly obscures a material fact.

(d) The Board may require a licensee to substantiate the truthfulness of any objective assertion or representation set forth in an advertisement. Failure of a licensee to provide factual substantiation to support a representation or assertion shall be deemed professional misconduct.

(e) A Board licensee shall not engage in uninvited, in-person solicitation of actual or potential patients who, because of their particular circumstances, are vulnerable to undue influence. This subsection shall not prohibit the offering of services by a Board licensee to any bona fide representative of prospective patients including, but not limited to employers, labor union representatives, or insurance carriers.

(f) Advertising making reference to setting forth a fee shall be limited to that which contains a fixed or a stated range of fees for a specifically described professional service.

1. A licensee who advertises shall disclose all the relevant variables and considerations which are ordinarily included in such a service so that the fees will not be misunderstood. In the absence of such a disclosure, the stated fees shall be presumed to include everything ordinarily required for such a service. No additional charges shall be made for an advertised service unless the advertisement includes the following disclaimer: "Additional charges may be incurred for related services which may be required in individual cases". The disclaimer cannot be used for treatment where related services are ordinarily required.

(g) Offers of discounts or fee reductions or free services shall indicate the advertiser's fixed or stated range of fees against which said discount is to be made and/or the value of the free service.

1. The fixed or stated range of fees or value of free service shall mean and be established on the basis of the advertiser's most commonly charged fee for the stated service within the most recent 60 days prior to, or to be charged in the first 60 days following, the effective date of the advertisement.

2. Offers of across-the-board discounts shall include a representative list of services and the fixed or stated range of fees against which discounts are to be made for these services. The list for general dentistry shall include a sampling of the advertiser's most frequently performed services from the areas of preventive, diagnostic, restorative, endodontic, periodontic, prosthodontic (fixed and removable) dentistry, and oral surgery.

i. "Across-the-board discounts" shall mean the offer of a specified discount on an undefined class of services or the offer of a specified discount to a defined class of patients (for example, "15 percent discount during

April on all dental services" or "15 percent discount to senior citizens on all dental services").

ii. Example of Representative List of Services:

	Regular Fee	Discount Fee
Prophylaxis	\$	\$
Examination		
Complete X-Rays		
One Surface Filling		
Root Canal		
Crown		
Gingivectomy		
Complete Denture		
Simple Extraction		

3. Licensees who limit their practice to one or more areas of dentistry, as permitted by N.J.A.C. 13:30-8.4, shall in similar manner, as in (g)2 above, include a representative list of the most frequently performed services in the advertiser's office.

(h) All licensee advertisements and public representations shall contain the name and address or telephone number of the licensee, professional service corporation or trade name under which the practice is conducted and shall also set forth the names of at least one licensee responsible for the dental practice in the facility identified in the advertisement and/or public representation.

(i) A licensee shall be presumed to have approved and shall be personally responsible for the form and contents of an advertisement which contains the licensee's name, office address, or telephone number. A licensee who employs or allows another to employ for his benefit an intermediary source or other agent in the course of advertising shall be personally responsible for the form and contents of said advertisement.

(j) The effective period during which a fee or discount shall remain in effect shall be set forth on the face of the advertisement. In the absence of such disclosure and solely for the purposes of enforcement, the effective period shall be deemed to be 30 days from the date of the advertisement's initial publication.

(k) A video or audio tape of every advertisement communicated by electronic media shall be retained by the licensee and made available for review upon request by the Board or its designee.

(l) A licensee shall be required to keep a copy of all advertisements for a period of three years. All advertisements in the licensee's possession shall indicate the accurate date and place of publication.

(m) An advertisement may contain either a lay or expert testimonial, provided that such testimonial is based upon personal knowledge or experience obtained from a provider relationship with the licensee or direct personal knowledge of the subject matter of the testimonial. A lay person's testimonial shall not attest to any technical matter beyond the testimonial giver's competence to comment upon. An expert testimonial shall be rendered only by an individual possessing specialized expertise sufficient to allow the rendering of a bona fide statement or opinion. An advertiser shall be able to substantiate any objective, verifiable statement of fact appearing in a testimonial, and the failure to do so, if required by the Board, may be deemed professional misconduct. Where an advertiser directly or indirectly provides compensation to a testimonial giver, the fact of such compensation shall be conspicuously disclosed in a legible and readable manner in any advertisement in the following language or its substantial equivalent:

**COMPENSATION HAS BEEN PROVIDED
FOR THIS TESTIMONIAL.**

New Rule, R.1978 d.170, effective May 23, 1978.
See: 10 N.J.R. 117(b), 10 N.J.R. 261(c).
Repeal and New Rule, R.1980 d.540, effective December 15, 1980.
See: 12 N.J.R. 668(a), 13 N.J.R. 103(a).
Section was "Providing information to the public."
Amended by R.1985 d.253, effective May 20, 1985.
See: 17 N.J.R. 378(a), 17 N.J.R. 1320(a).
Amended by R.1987 d.158, effective April 6, 1987.
See: 18 N.J.R. 2419(a), 19 N.J.R. 552(a).
Deleted (c)6; renumber (c)8-12 to (c)7-11.
Amended by R.1987 d.417, effective October 19, 1987.
See: 19 N.J.R. 1053(a), 19 N.J.R. 1910(a).
Substantially amended.
Correction: Delete "routine" from (f).
See: 20 N.J.R. 1959(a).
Amended by R.1993 d.332, effective July 6, 1993.
See: 24 N.J.R. 2801(a), 25 N.J.R. 2898(a).
Amended by R.1993 d.651, effective December 20, 1993.
See: 25 N.J.R. 2823(a), 25 N.J.R. 5934(a).

13:30-8.7 Patient records

(a) A contemporaneous, permanent patient record shall be prepared and maintained by a licensee for each person seeking or receiving dental services, regardless of whether any treatment is actually rendered or whether any fee is charged. Licensees also shall maintain records relating to charges made to patients and third party carriers for professional services. All treatment records, bills and claim forms shall accurately reflect the treatment or services rendered. Such records shall include, as a minimum:

1. The name, address, and date of birth of the patient and, if a minor, the name of the parent or guardian;
2. The patient's medical history;
3. A record of results of a clinical examination where appropriate or an indication of the patient's chief complaint;
4. A treatment plan where appropriate;

5. The dates of each patient visit and a description of the treatment or services rendered at each visit;

6. A description of all radiographs taken and diagnostic models made properly identified with the patient's name and date;

7. The date and a description of any medications prescribed, dispensed or sold including the dosage or a copy of any written prescriptions;

8. Complete financial records, including an itemized statement of the amount billed to and received on the patient's account from the patient or a third party payor and copies of all insurance claim forms and payment vouchers; and

9. A record of any recommendations or referrals for treatment or consultation by a specialist, including those which were refused by the patient.

(b) Patient records, including all radiographs, shall be maintained for at least seven years from the date of the last entry, except that diagnostic models need be maintained only for three years.

(c) Licensees shall provide patient records to the patient or the patient's authorized representative or another dentist in accordance with the following:

1. Upon receipt of a written request from a patient or the patient's authorized representative and within 14 days thereof, legible copies of the patient record including, if requested, duplicates of models and copies of radiographs, shall be furnished to the patient or an authorized representative or a dentist. "Authorized representative" means, but is not necessarily limited to, a person who has been designated by the patient or a court to exercise rights under this section. An authorized representative may be the patient's attorney or an agent of an insurance carrier with whom the patient has a contract which provides that the carrier be given access to records to assess a claim for monetary benefits or reimbursement. If the patient is a minor, a parent or guardian who has custody (whether sole or joint) will be deemed to be an authorized representative.

2. A licensee may require any unpaid balance for diagnostic services be paid prior to release of such records. Where treatment of a patient whose dental expenses are paid through Medicaid is discontinued by the dentist prior to completion of the treatment, no charge for the records shall be made or payment required.

3. The licensee may charge a reasonable fee for the reproduction of records, which shall be no greater than an amount reasonably calculated to recoup the cost of copying or duplicating. To the extent that the record is illegible or prepared in a language other than English, the licensee shall provide a typed transcription and/or translation at no additional cost to the patient.

(d) Licensees shall maintain the confidentiality of patient records, except that:

1. The licensee shall release patient records as directed by the Board of Dentistry or the Office of the Attorney General, or by a Demand for Statement in Writing under Oath, pursuant to N.J.S.A. 45:1-18. Such records shall be originals, unless otherwise specified, and shall be unedited, with full patient names. To the extent that the record is illegible, the licensee, upon request, shall provide a typed transcription of the record. If the record is in a language other than English, the licensee shall also provide a translation. All radiographs, models, and reports maintained by the licensee, including those prepared by other dentists, also shall be provided. The costs of producing such records shall be borne by the licensee.

2. The licensee, in the exercise of professional judgment and in the best interests of the patient (even absent the patient's request), may release pertinent information about the patient's treatment to another licensed health care professional who is providing or who has been asked to provide treatment to the patient, or whose expertise may assist the licensee in his or her rendition of professional services.

3. The licensee shall release information as required by law or regulation, such as the reporting of communicable diseases or gunshot wounds or suspected child abuse, etc., or when the patient's treatment is the subject of peer review.

(e) If a licensee ceases to engage in practice or it is anticipated that he or she will remain out of practice for more than six months, the licensee or a designee shall:

1. Establish a procedure by which patients can obtain treatment records or agree to the transfer of those records to another licensee who is assuming the responsibilities of that practice;

2. If the practice will be unattended by another licensee, publish a notice of the cessation and the established procedure for the retrieval of records in a newspaper of general circulation in the geographic location of the licensee's practice, at least once each month for the first three months after the cessation;

3. File a notice of the established procedure for the retrieval of records with the Board of Dentistry;

4. Make reasonable efforts to directly notify any patient treated during the six months preceding the cessation of practice providing information concerning the established procedure for retrieval of records; and

5. Conspicuously post a notice on the premises of the procedure for the retrieval of records when possible.

(f) The provisions of this section shall not apply to situations where no patient-dentist relationship exists, such as where the professional services of a dentist are rendered at the behest of a third party for the purposes of examination and evaluation only or at the behest of the Board pursuant to N.J.A.C. 13:30-8.5 or in the course of any investigation.

New Rule, R.1980 d.457, effective October 16, 1980.

See: 12 N.J.R. 347(a), 12 N.J.R. 672(f).

Amended by R.1986 d.269, effective July 7, 1986.

See: 18 N.J.R. 816(a), 18 N.J.R. 1394(a).

Added text to (c) "provided, however, where ... or payment required."

Amended by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Repeal and New Rule, R.1993 d.650, effective December 20, 1993.

See: 25 N.J.R. 1833(a), 25 N.J.R. 5935(a).

13:30-8.8 Reporting of incidents or deaths

(a) All licensees shall report to the main office of the State Board of Dentistry within seven days, in writing, any incident occurring in a dental office, clinic or any other dental facility which requires the removal of a patient to a hospital for observation or treatment.

(b) All licensees shall likewise report any death which may be related to dental treatment, whether or not the death occurred in the dental facility.

New Rule, R.1980 d.503, effective November 18, 1980.

See: 12 N.J.R. 607(c), 13 N.J.R. 40(a).

Recodification, R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Recodified from N.J.A.C. 13:30-8.9.

13:30-8.9 Display of names; identifying badges

(a) Every facility offering dental care to the public shall legibly display on all exterior signs or other means of exterior display only those names of the licensees who are responsible for the administration of said facility.

(b) Every dental care facility wherein two or more dental licensees are engaged in providing dental care shall legibly display in its office, the names and professional status of all licensees associated with said facility.

(c) Any licensee associated with such facility shall be required to wear an identifying badge indicating his or her name and professional status.

New Rule, R.1980 d.509, effective November 21, 1980.

See: 12 N.J.R. 608(a), 13 N.J.R. 41(a).

Recodification, R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Recodified from N.J.A.C. 13:30-8.10.

13:30-8.10 Dental insurance forms; professional misconduct

(a) Professional misconduct shall be construed to include but not be limited to the use or employment of dishonesty, fraud, deception or misrepresentation, by a licensee in submitting any claim form, bill, or governmental assistance form to a third party payor for dental services or services rendered to a patient enrolled in a dental prepayment contract plan.

(b) In addition, it shall be professional misconduct for a licensee rendering dental services or procedures to a patient enrolled in any dental prepayment contract plan to submit to a third party payor any claim form, bill, or governmental assistance form which contains any of the following:

1. Any treatment date which does not accurately reflect the date when the service and procedures were actually completed;
2. Any description of a dental service or procedure which does not accurately reflect the actual work completed;
3. Any service or procedure which cannot be justified by the licensee as necessary and proper.

(c) A licensee who renders dental services or procedures to a patient enrolled in any dental prepayment contract plan with co-payment features and intends to waive any part of or all of the co-payment by the patient shall, when submitting any claim form or bill to the third party payor, conspicuously disclose on the face of the claim form or bill in a legible and readable manner that co-payment, or a portion of co-payment, will not be billed to or collected from the patient.

(d) All submissions to a third party payor, including, but not limited to, predetermination forms, claim forms, bills, or governmental assistance forms, shall be manually signed by the patient's treating dentist. The form may be completed by an employee for the signature of the treating dentist, but the treating dentist shall be responsible for the accuracy of all information contained on the form. In the event the patient is treated by more than one dentist in a multi-dentist practice, the duty to verify the accuracy of the information on the form and to manually sign the form shall be that of the designated dentist of record pursuant to N.J.A.C. 13:30-8.17.

(e) Subparagraph (d) above notwithstanding, a treating dentist need not manually sign individual claim forms if the respective third party payors have agreed in writing to an electronic method for claims submission. In that case, the treating dentist (or the dentist of record if one is so designated pursuant to N.J.A.C. 13:30-8.17) shall review and manually sign a written confirmation of the accuracy of the claim data no less frequently than every three months. The dentist shall keep copies of such written confirmations on file for a period of seven years.

(f) Any dentist who verifies claim data pursuant to (e) above is responsible for all of the claim data submitted as if it were submitted and a form manually signed on an individual claim basis.

New Rule, R.1981 d.175, eff. June 4, 1981.

See: 13 N.J.R. 102(c), 13 N.J.R. 366(a).
Amended by R.1985 d.196, effective April 15, 1985.
See: 17 N.J.R. 378(a), 17 N.J.R. 972(a).
Recodified from N.J.A.C. 13:30-8.12 by R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).
Amended by R.1990 d.311, effective June 18, 1990.
See: 21 N.J.R. 2226(a), 22 N.J.R. 153(a), 22 N.J.R. 1914(a).
New (d)-(f) added regarding signature of forms by treating dentist.
Amended by R.1995 d.191, effective April 3, 1995.
See: 27 N.J.R. 293(a), 27 N.J.R. 1424(b).

13:30-8.11 Removable prosthesis identification

(a) Definitions:

1. The term "prosthesis" shall refer to an artificial substitute for a missing part of the oral cavity, such as a tooth, used for functional and/or cosmetic reasons.
2. The term "rebasement" means the act of replacing the base material of a denture without changing the occlusal relationship of the teeth.

(b) Every complete maxillary and mandibular denture and removable partial denture prosthesis constructed by a Board licensee or fabricated pursuant to his work order shall be marked in an appropriate area with the name and social security number of the patient for whom the prosthesis is prepared unless the patient objects thereto. In the event the patient, after being so informed, objects to the marking of the prosthesis, the licensee shall place such objection on the patient's permanent dental record.

(c) The marking of a dental prosthesis shall be accomplished during processing and shall be permanent, legible and cosmetically acceptable. The exact location of the markings and the methods used to place them shall be determined by the licensee.

(d) If, in the licensee's professional judgment, marking of the prosthesis with the patient's complete name and social security number is not practicable, identification shall be provided as follows:

1. The social security number may be omitted if the patient's complete name is marked; or
2. The initials of the patient may be marked alone if the marking of the patient's full name is impracticable; or
3. The identification marks may be omitted in their entirety if none of the forms of identification specified in (d)1 and 2 above are practicable or clinically safe.

(e) Any complete or partial removable dental prosthesis in existence prior to the effective date of this regulation, which has not been marked in accordance with (b) above, shall be so marked at the time of any subsequent rebasing or repair.

(f) A reasonable fee may be charged for the marking of the complete or partial removable dental prosthesis.

New Rule, R.1985 d.196, effective April 15, 1985.

See: 17 N.J.R. 378(a), 17 N.J.R. 972(a).

Repealed by R.1990 d.174, effective March 19, 1990.

See: 21 N.J.R. 3060(a), 22 N.J.R. 976(a).

Section was "intravenous sedation".

Recodified from N.J.A.C. 13:30-8.13 by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

The following annotations pertain to the prior rule at N.J.A.C. 13:30-8.11:

New Rule, R.1980 d.541, eff. December 15, 1980.

See: 12 N.J.R. 669(a), 13 N.J.R. 103(b).

Amended by R.1985 d.196, effective April 15, 1985.

See: 17 N.J.R. 378(a), 17 N.J.R. 972(a).

13:30-8.12 Notification of change of address; service of process

(a) A licensee of the Board of Dentistry shall notify the Board in writing of any change of address from the address currently registered with the Board and shown on the most recently issued certificate. Such notice shall be sent to the Board by certified mail, return receipt requested, not later than 30 days following the change of address.

(b) Failure to notify the Board of any change of address pursuant to (a) above may result in disciplinary action in accordance with N.J.S.A. 45:1-21(h), including, but not limited to, a civil penalty of \$200.00.

(c) Service of an administrative complaint or other Board-initiated process at a licensee's address currently on file with the Board shall be deemed adequate notice for the purposes of N.J.A.C. 1:1-7.1 and the commencement of any disciplinary proceedings.

New Rule, R.1985 d.548, effective November 4, 1985.

See: 17 N.J.R. 1864(b), 17 N.J.R. 2669(a).

Recodified from N.J.A.C. 13:30-8.14 by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-8.13 Referral fees

It shall be professional misconduct for a licensee to pay to, receive from, or split a fee or other form of compensation with any person other than an employee or associate dentist for the referral of a patient.

New Rule, R.1987 d.158, effective April 6, 1987.

See: 18 N.J.R. 2419(a), 19 N.J.R. 552(a).

Recodified from N.J.A.C. 13:30-8.15 by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-8.14 Dental X-rays; lead shields

Every licensee, as well as any employee or agent of such licensee duly licensed by the Department of Environmental Protection shall be required to use a lead shield to provide protection to the greatest extent possible to the torso and thyroid areas of patients during all dental X-ray procedures.

New Rule, R.1987 d.98, effective February 2, 1987.

See: 18 N.J.R. 2113(c), 19 N.J.R. 296(b).

Recodified from N.J.A.C. 13:30-8.16 by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-8.15 Dentist of record; fee reimbursement

(a) Each patient shall have a dentist of record who shall remain primarily responsible for assuring the proper implementation of the dental treatment plan on such patient regardless of whether the treatment is rendered by the dentist of record, by another dentist or by a dental hygienist rendering such treatment in conjunction with, in the employ of, at the direction or request of, or under the supervision of such dentist of record.

(b) The name of the dentist of record shall be conspicuously identified on the patient record. If the dentist of record is not identified on the patient record, it shall be presumed that the dentist of record is the owner(s) of the practice in which the patient was treated.

(c) Each dentist or dental hygienist shall sign or initial each entry on the patient record pertaining to the treatment he or she rendered. If no such entry appears on the patient record, it shall be presumed that such treatment was rendered by the dentist of record, unless the latter shall establish, to the satisfaction of the Board, the identity of the individual who rendered such treatment.

(d) In a multi-dentist practice, the dentist of record shall not change unless the subsequent treating dentist acknowledges in writing in the patient record that he or she is currently the dentist of record for the patient. The dentist of record shall be changed when such individual leaves the practice where treatment was provided and the patient elects to continue treatment in the facility in which treatment began.

(e) A new dentist of record shall be presumed to have obtained or reviewed the patient's medical history and dental records, examined the patient, and either developed a new treatment plan or concurred with the continuance of the pre-existing treatment plan.

(f) Any licensee found to have rendered deficient treatment and the owner of the facility in which the licensee rendered the deficient treatment shall be jointly and severally responsible for the reimbursement to the patient of any fees as may be directed by the Board.

New Rule, R.1988 d.81, effective February 16, 1988.

See: 19 N.J.R. 1629(a), 20 N.J.R. 403(c).

Recodified from N.J.A.C. 13:30-8.17 by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-8.16 Right to hearing

Prior to any suspension, revocation or refusal to renew a license, the licensee shall have the right to request a hearing which shall be conducted pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq. and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.

New Rule, R.1990 d.205, effective April 2, 1990.
See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

13:30-8.17 Delegation of physical modalities to unlicensed dental assistants

(a) A dentist may direct an unlicensed assistant to administer to the dentist's patients certain physical modalities in the limited circumstances set forth in this section.

(b) Physical modalities, for the purpose of this section, shall be limited to heat, cold, ultrasound, and electrogalvanic stimulation. An unlicensed assistant shall not be permitted to perform any rehabilitative exercise programs. No other modalities including, but not limited to, transcutaneous electrical nerve stimulation ("T.E.N.S.") and phonophoresis, shall be performed by an unlicensed assistant.

(c) A dentist may direct the administration of the physical modalities by the unlicensed assistant provided all of the following conditions are satisfied:

1. The dentist shall examine the patient to ascertain the nature of the dental condition or disease; to determine whether the application of a physical modality will encourage the alleviation of dentally related pain and the promotion of healing; to assess the risks of the modality for a given patient and the diagnosed condition, injury or disease, and to decide that the anticipated benefits are likely to outweigh those risks.

2. The dentist shall examine the patient prior to each visit and shall determine all components of the treatment to be performed at the present patient visit. This determination shall include all types of modalities to be employed, a delineation of the precise area to which the application of each modality shall be limited, the dosage, wattage, or other applicable setting, the length of the treatment, and any and all other factors peculiar to the risks of that modality such as strict avoidance of certain parts of the body or static placement of the applicator. This information shall be written on the patient's chart prior to each patient's treatment after the dentist has examined the patient, and it shall be made available at all times to the unlicensed assistant carrying out the instructions. Each dentist who employs such assistants shall submit written notice to the Board of such employment prior to permitting an unlicensed assistant to perform physical modalities as provided in this section.

3. The dentist shall provide instruction to and shall ascertain a satisfactory level of education, competence and comprehension of each unlicensed assistant in regard to all modalities used in that office prior to the use of any modality by an unlicensed assistant. The dentist shall prepare and maintain a written document listing the names of all such unlicensed assistants and outlining the instructions given to each unlicensed assistant. The dentist shall submit such document to the Board upon request.

4. The dentist shall evaluate the patient prior to any subsequent scheduled application of the modality to ascertain that continued treatment is appropriate and that no contraindications to treatment have become apparent.

5. The dentist shall be physically present in the dental office at all times that treatment orders are being carried out by the unlicensed assistant and shall be within reasonable proximity to the treatment room.

(d) A dentist shall have due regard for the specialized training and experience of registered physical therapists. The application of these physical modalities in cases of injuries, diseases or conditions requiring prolonged treatment, if not administered personally by the dentist, shall normally be referred to a licensed physical therapist or other appropriate health care provider.

(e) On a health insurance claim form pertaining to such service and requiring certification by the dentist, the dentist shall identify the specific modality applied and shall not generically identify the treatment as physical therapy.

New Rule, R.1991 d.351, effective July 15, 1991.
See: 23 N.J.R. 2647(b), 23 N.J.R. 2159(a).

13:30-8.18 Continuing dental education

(a) No renewal certificate of registration shall be issued by the Board of Dentistry for the biennial period commencing November 1, 1993 or any following year until the applicant certifies as part of the application for renewal of the certificate of registration that he or she has completed courses of continuing professional dental education of the types and number of credits specified in this section. Such continuing education shall be a mandatory requirement for license renewal, except that the Board shall not require completion of continuing dental education credits for initial registration of dentists.

(b) Any licensee who has no authority to practice dentistry in New Jersey because the licensee holds an inactive registration issued to persons not practicing in this State or a retired registration issued to persons who, for at least 25 years, practiced dentistry in this State and then retired from practice shall be exempt from the continuing education requirements upon biennial renewal of the inactive or retired registration. Any such licensee who desires to resume the practice of dentistry in this State shall be required to certify, as part of the application for an active registration, that he or she has completed 20 hours of continuing education courses for each year of inactive or retired registration retroactive to July 16, 1992 prior to the issuance of an active registration.

(c) Each applicant for a biennial license renewal shall be required to complete, during the preceding biennial period, a minimum of 40 credits of continuing dental education. Any applicant who is initially licensed subsequent to the commencement of any biennial registration period shall be

required to complete dental education credits on a pro rata basis prior to the next renewal period in accordance with the following schedule:

- | | |
|---|--------------|
| 1. Licensed October–January in the first year of period | 40 credits |
| 2. Licensed February–April in first year of period | 35 credits |
| 3. Licensed May–July in first year of period | 30 credits |
| 4. Licensed August–October in the first year of period | 25 credits |
| 5. Licensed November–January in second year of period | 20 credits |
| 6. Licensed February–April in second year of period | 15 credits |
| 7. Licensed May–July in second year of period | 10 credits |
| 8. Licensed August–October in second year of period | Five credits |

(d) One hour of continuing education credit shall be granted for each hour of instruction at lectures, seminars, clinical or laboratory participatory courses, meetings of national, constituent, and components of dental professional associations recognized by the Board, or other educational methods as may be approved by the Board, excluding time spent at meals, breaks or business sessions. Credit shall be granted only for full instructional hours, but not for less than one instructional hour. Successful completion of an entire course or segment of course instruction is required in order to receive any continuing education credit. Unless otherwise provided, only in class participation, not student time devoted to preparation, will be counted.

(e) It shall be the responsibility of each licensee to maintain an authenticated record of all continuing education activity completed and to be prepared to submit evidence of completion of the credit requirements to the Board upon request. Each licensee must obtain from the continuing education course sponsor and retain for a period of four years an authenticated record of attendance which shall include, at a minimum, the following:

1. The participant's name;
2. The title or subject area of the course;
3. The instructor;
4. The course sponsor;
5. The date and location of the course;
6. The number of hours; and
7. Verification of successful completion by the course sponsor.

(f) The Board shall monitor compliance with the mandatory continuing dental education requirement by requesting some licensees, at the discretion of the Board, to provide documentary proof of successful completion of continuing education credits.

(g) All continuing education activities to be accepted for credit shall have significant intellectual or practical content which deals primarily with matters directly related to the practice of dentistry or with the professional responsibilities or ethical obligations of licensees. Subjects such as estate planning, financial or investment/tax planning, personal health or others so deemed by the Board from time to time shall not be acceptable for continuing education credit.

(h) A continuing education sponsor may receive prior approval for a course of acceptable subject matter and be assigned a designated number of continuing education credits by the Board if the program sponsor provides, in writing and on a form provided by the Board, information required by the Board to document that the course meets the following requirements:

1. The course is offered in a subject matter and in a format permissible pursuant to the provisions of this section;
2. The course is conducted by a qualified instructor or discussion leader; and
3. The course is at least one hour in length.

(i) Applications for pre-approval of continuing education programs must be submitted by the program sponsor on the form provided by the Board at least 45 days prior to the date the continuing education program is to be offered. Incomplete applications shall be returned to the sponsor and may result in a failure to grant prior approval of the program. Although failure to obtain prior approval shall not preclude acceptance of the program, there shall be no assurance that the Board will grant approval retroactively.

(j) A licensee may select from any of the areas of study listed below, except that for purposes of obtaining continuing education credits towards the mandatory requirement the licensee may not exceed the maximum number of hours permitted in each category for each biennial period.

1. Educational and scientific courses:
 - i. A licensee may obtain all of the required continuing education hours in this category.
 - ii. Completion of an accredited one year dental residency program or completion of an approved advanced education program leading to specialty certification in endodontics, oral surgery, oral pathology, orthodontics, pediatric dentistry, periodontics, prosthodontics, or public health shall satisfy the entire requirement of continuing education hours for one biennial registration period.
 - iii. A maximum of five hours of continuing education shall be given to a student or an instructor for basic C.P.R. courses.

iv. A maximum of five hours of continuing education shall be given for videotape, audiotape and/or correspondence courses. The course must include a written post-test in order to be eligible for credit, and such test shall be retained by the licensee as an additional record of completion of the course.

v. The program portion of dinner meetings of constituents and components of professional dental associations recognized by the Board shall be granted a maximum of one credit per meeting as long as the program meets the educational requirements of (g) above.

2. Papers, publications and scientific presentations:

i. A licensee may obtain a maximum of 20 hours of continuing education credit in this category.

ii. A maximum of 10 hours of continuing education credit shall be given for each original scientific paper authored by the licensee and published in a refereed journal. At the discretion of the Board, these 10 hours may be divided among all co-authors.

iii. For each original presentation of a paper, essay or formal lecture to a recognized group of fellow professionals, the presenter shall receive two hours of continuing education credit for every hour of presentation.

3. Teaching and research appointments:

i. A licensee involved in teaching or research activities at least one full day or the equivalent of one full day per week per academic year and who holds at least a part time faculty or research appointment shall receive four hours of continuing education credit annually for each full day.

ii. A licensee may obtain a maximum of 20 continuing education credit hours in this category in a biennial period.

4. Table clinics and scientific exhibits:

i. A licensee may obtain a maximum of eight continuing education hours in this category.

ii. The original presentation of a table clinic or scientific exhibit at a professional meeting will provide a maximum of one hour of continuing education credit per clinic or exhibit for each two hours of presentation.

(k) Those licensees who complete 20 hours of continuing education credit in accordance with the requirements for parenteral conscious sedation and/or general anesthesia permit holders pursuant to N.J.A.C. 13:30-8.2 and 8.3 shall be given credit for all 20 hours towards fulfilling the general requirement for professional continuing education under this section so long as the credits otherwise comply with the provisions of this section.

(l) A maximum of seven continuing education credits completed by a licensee in excess of the requirement as herein provided may be credited to the subsequent registration period.

(m) Any continuing education courses directed or ordered by the Board as a remedial measure shall not be eligible to fulfill the general mandatory continuing education requirement.

(n) The Board may, in its discretion, waive all or a portion of the requirements for continuing dental education on an individual basis for reasons of hardship such as illness or disability or other good cause including, but not limited to, a full time faculty appointment to an accredited dental school or dental hygiene school. Any licensee seeking a waiver of the continuing education requirement must apply to the Board in writing and set forth with specificity the reasons for requesting the waiver. The licensee also shall provide the Board with such additional information as it may reasonably request in support of the application.

New Rule, R.1993 d.413, effective August 16, 1993.

See: 25 N.J.R. 1344(a), 25 N.J.R. 3837(b).

Amended by R.1994 d.621, effective December 19, 1994.

See: 26 N.J.R. 1948(a), 26 N.J.R. 5032(b).