

ARIZONA STATE BOARD OF DENTAL EXAMINERS

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BODEX UPDATE

By the time this is published, the Cardinals may be 6-0 and the Dental Board will be at the Legislature addressing its Sunset Audit and proposed Omnibus Bill and the Dental Association Sunrise Application for Expanded Function Dental Assistants. These topics should provide future material for this column!

In the interim, I would like to thank the Association for the opportunity to speak to the Arizona Dental Association's House of Delegates at the Ritz-Carlton in Tucson. It's always interesting to hear the resolutions discussed, or should I say debated, and even more interesting to hear the various motions and rules of order. Kudos to Dr. Caputo who does an excellent job facilitating the process!

I also appreciate the one-on-one opportunities to discuss with licensees a broad array of issues. One licensee approached me about the fact that Tramadol is now classified as a controlled substance. His concern was that dentists are not aware of this and are prescribing Tramadol to family members. My response was they should be a patient of record.

The Board has investigated and sanctioned licensees who have prescribed controlled substances and/or other medications (i.e., malaria vaccine, anti-depressants) for family members who are not patients of record. And yes, anti-depressants are generally not within the scope of dental treatment. In these types of investigations, the Board is authorized to obtain a Controlled Substance Monitoring Profile of the licensee which reflects all controlled substances the licensee has ordered. This is utilized in investigating allegations of over-prescribing and/or prescribing outside the scope of practice. As previously communicated, licensees who have a Drug Enforcement Agency (DEA) certificate must register with the Arizona State Board of Pharmacy.

In addition to Tramadol now being scheduled as a controlled substance, effective October 6, 2014 hydrocodone combination products are being reclassified by DEA and subjected to tighter restrictions. This includes opioids such as Vicodin, Lorcet, Lortab and Norco which will be reclassified as Schedule II substances. Given the national abuse of controlled substances, we may see future tightening of prescribing for these substances.

Licensees may wish to review their Controlled Substance Monitoring Profile to verify that they have prescribed the controlled substances as reflected on the profile. The Board has

investigated cases in which a dental employee may be using the licensee's DEA to inappropriately obtain controlled substances.

The Dental Practice Act defines a patient of record as "a patient who has undergone a complete dental evaluation performed by a licensed dentist." ARS 32-1264 (A) gives licensees guidance as to what should be maintained in dental records. A licensee should document prescription and dispensing information in accordance with AAC R4-11-1404 (B).

In addition to patient of record, the statutes also address "dentist of record." Licensees should be familiar with AAC R4-11-501. AAC R4-11-501 (D) states "A dentist of record is responsible for the care given to a patient while the dentist was the dentist of record even after being replaced as the dentist of record by another dentist."

In my closing to the House of Delegates I commented that licensees and the Board are continuously challenged given the economy and other factors not within our control. We recognize this and appreciate your ongoing commitment to the integrity of dentistry.

GO CARDINALS!