

BIENNIAL REPORT OF EXAMINING AND LICENSING BOARDS

(MS 1978 SECTION 214.07)

BOARD: Minnesota Board of Dentistry

LOCATION: 717 S.E. Delaware Street, Suite 338

Minneapolis, Minnesota 55414

STATUTORY AUTHORITY: M.S. 150A, 1978; M.S. 214

REPORT PERIOD: July 1, 1976 To: June 30, 1978

SUBMITTED BY: Dale J. Forseth, Executive Secretary September 29, 1978

Name

Title

Date

(24) Semi-Annual Report

(4) 29p.

Copies of this report shall be delivered to: (1) the Legislature in accordance with Section 3.195 (1 copy to the Secretary of the Senate, 1 copy to the Chief Clerk of the House of Representatives and 10 copies to the Legislative Reference Library); (2) the Governor; and (3) Commissioner of Administration. Each health-related board shall also deliver a copy of their report to the Board of Health.

Clause a: GENERAL STATEMENT OF BOARD ACTIVITIES

This description should cover both FY 77 and FY 78 and include any changes (additions/deletions) in activities between those years.

Item A

The purpose of the Board of Dentistry is to ensure the people of professional competency by licensing or registering dentists, dental hygienists and registered dental assistants whose fitness to practice has been tested and whose other qualifications meet the requirements of the state; to annually renew each license or registration and to receive and resolve consumer grievances.

During the two-year period ending June 30, 1978, the Board licensed 318 dentists and 407 dental hygienists; initially registered 1,871 registered dental assistants and 58 corporations; annually registered over 3,600 dentists, 1,750 dental hygienists, 1,800 dental assistants and 380 corporations; received and took action on 114 consumer complaints; participated in 32 regional and national dental and dental hygiene examinations; approved the credentials of approximately 175 foreign dentists to enable them to take the National Board Examination; initiated legislation for licensure of Canadian dentists and dental hygienists by credentials and for consumer protection; conducted seven on-site evaluations of Minnesota dental assisting schools; adopted rules relating to fees, continuing education and disciplinary action and actively participated on state, regional and national continuing education and examination committees.

Clause b: TOTAL NUMBER MEETINGS HELD FY 77 10 FY 78 8 FY 77 AND 78 18

APPROXIMATE TOTAL NUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 77	FY 78	FY 77 & 78	TYPE	FY 77	FY 78	FY 77 & 78
Robert W. Anderson	Board Meeting	76	66	142	Examinations	112	112	224
	Executive Meeting	19	25	44	Application Evaluation	96	96	192
					Complaint Handling	50	75	125
					Committees & Misc.	475	440	915
James E. Garrity	Board Meeting	70	62	132	Examinations	10	10	20
	Executive Meeting	16	13	29	Complaint Handling	100	100	200
					Committees & Misc.	50	50	100
Karen E. Hirman	Board Meeting	32	31	63	Examinations	16	16	32
	Executive Meeting	10	2	12	Complaint Handling	10	10	40
					Committees & Misc.	10	8	18
Walter G. Iverson	Board Meeting	76	62	138	Examinations	112	112	224
	Executive Meeting	22	22	44	Complaint Handling	50	50	100
					Committee & Misc.	288	300	588

Clause b: TOTAL NUMBER MEETINGS HELD FY 77 Fwd FY 78 Fwd FY 77 AND 78 Fwd

APPROXIMATE TOTAL NUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 77	FY 78	FY 77 & 78	TYPE	FY 77	FY 78	FY 77 & 78
Robert E. McDonnell	Board Meeting	76	66	142	Examinations	112	112	224
	Executive Meeting	21	22	43	Continuing Education	100	100	200
					Complaint Handling	75	80	155
					Other Activities	350	300	750
Kenneth M. Nelson	Board Meeting	69	66	130	Examinations	112	112	224
	Executive Meeting	19	22	41	Complaint Handling	35	30	65
					Continuing Education	50	75	125
					Committees & Misc.	300	300	600
James M. Rasmusson	Board Meeting	70	66	136	Examinations	408	192	600
	Executive Meeting	13	25	38	Complaint Handling	8	8	16
					School Evaluation	72	48	120
					Committees & Misc.	20	20	40
Carol L. Schuppel	Board Meeting	N/A	55	55	Examination	N/A	16	16
	Executive Meeting	N/A	18	18	School Evaluation	N/A	12	20
					Committees & Misc.	N/A	44	44



Clause c: THE RECEIPTS AND DISBURSEMENTS OF BOARD FUNDS

	FY 77	FY 78	FY's 77 - 78
Total State Appropriations	154,300	201,651	355,951
Total Non-Dedicated Fee Receipts	158,675	166,817	325,492
Total Disbursements	152,794	192,434	345,228

COMMENTS (Optional)

The Board of Dentistry's original budget for F.Y. 78 was \$171,651; however, the Legislative Advisory Committee approved an additional \$30,000 appropriation in order for the Board to pay necessary legal and investigative fees. As the result of legal & investigation fees during F.Y. 1978, the Board entered into F.Y. 1979 with a \$25,617 deficit which will be offset by the increased fees during F.Y. 1979.

Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 77 AND FY 78

FOR EASY REFERENCE PLEASE GIVE:

(A) Number of Board members required by statute: 9.(B) The statutory length of term: Four Years.

NAME	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE-APPOINTMENT
R.W. Anderson, D.D.S.	Dentist	October 16, 1973 - Jan. 1, 1979
J.E. Garrity	County Judge	January 9, 1976 - Jan. 7, 1980
K.E. Hirman	Registered Nurse	November 9, 1976 - Jan. 1, 1979
W.G. Iverson, D.D.S.	Dentist	January 3, 1971 - Jan. 5, 1981
R.E. McDonnell, D.D.S.	Dentist	November 3, 1972 - Jan. 1, 1978
R.E. McDonnell, D.D.S.	(Reappointment)	January 1, 1978 - Jan. 4, 1982
K.M. Nelson, D.D.S.	Dentist	February 7, 1975 - Jan. 7, 1980
J.M. Rasmusson, DDS	Dentist	January 5, 1976 - Jan. 1, 1979
C.L. Schuppel	Registered Dental Ass't.	August 1, 1977 - Jan. 1, 1978
C.L. Schuppel	(Reappointment)	January 1, 1978 - Jan. 4, 1982
J.H. Spoodis	Dental Hygienist	August 1, 1977 - Jan. 5, 1981

Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED  
DURING FY 77 AND/OR FY 78

[illegible]



Clause f: BRIEF SUMMARY OF BOARD RULES PROPOSED OR ADOPTED DURING THIS REPORTING PERIOD, FY 77 AND FY 78. GIVE APPROPRIATE CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR THOSE ADOPTED.

Rules were adopted relating to fees, continuing education, registration of dental assistants and disciplinary action. The rules were printed in the State Register on October 26, 1976 (Cite 1, S.R. 624).

Amendments to the Board's rules relating to fees were proposed in order to cover anticipated legal and investigation fees. A Notice of Hearing on the proposed amendments was scheduled for announcement in the July 3, 1978 State Register.

Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE  
AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1978  
(IN THE YEAR OF THE REPORT

[illegible]

EXAMINATION:

[illegible][illegible]

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION DENTIST

- - - See note on Page 12 of this report - - -

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25	26	2	28	26	2	28				48	5	53	48	5	53				74	7	81	71	7	81			
26-34	86	4	90	86	4	90				62	9	71	62	9	71				148	13	161	148	13	161			
35-59	3	1	4	3	1	4				4		4	4		4				7	1	8	7	1	8			
60-65																											
66 & Over																											
Total	115	7	122	119	7	122				114	14	128	114	14	128				229	21	250	229	21	250			

\* See note on Page 12 of this report

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATIONNOTE:

Minnesota accepts the results of the Central Regional Dental Testing Services (CRDTS) for licensure as a dentist or dental hygienist in Minnesota. CRDTS administers 14 examinations annually on varying dates. There are seven test sites in the 11-state region. Persons must successfully pass CRDTS examinations before applications for licensure are accepted by the Board of Dentistry.

Every dentist and dental hygienists that applied for licensure during F.Y. 1977 and F.Y. 1978 successfully passed the CRDTS examination, and because these applicants met all other licensure qualifications, each was granted a license.

Because each person that applied for licensure was granted a license, it does not mean that every person examined by CRDTS passed the CRDTS examination. There is no way of knowing whether or not those failing the CRDTS examination would have applied for licensure in Minnesota had they passed the examination, and it can<sup>not</sup> be assumed for statistical purposes that every Minnesota resident examined would apply for licensure since some that passed the examination did not apply for licensure in Minnesota.

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION Dental Hygienist.

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25		142	142		142	142				2	181	183	2	181	183				2	323	325	2	323	325			
26-34	1	8	9	1	8	9					13	13		13	13				1	21	22	1	21	22			
35-59		4	4		4	4					2	2		2	2					6	6		6	6			
60-65																											
66 & Over																											
Total	1	154	155	1	154	155				2	196	198	2	196	198				3	350	353	3	350	353			

\* See Note on Page 12 of this report.

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION Registered Dental Assistant

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	EXAMINED			LIC/REGIS			* NOT LIC/REGIS			EXAMINED			LIC/REGIS			* NOT LIC/REGIS			EXAMINED			LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25		46	46		46	46					316	316		316	316					362	362		362	362			
26-34		10	10		10	10					16	16		16	16					26	26		26	26			
35-59		4	4		4	4					6	6		6	6					10	10		10	10			
60-65																											
66 & Over																											
Total		60	60		60	60					338	338		338	338					398	398		398	398			

**NOTE:** Since the examinations are administered by the dental assisting schools and applications are submitted only after successfully completing the examination, which can be retaken, all applicants are registered.

Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION

Dentist

\* See NOTE on Page 12 of this Report

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25	-	2	2	-	2	2				6	1	7	6	1	7				6	3	9	6	3	9			
26-34	31	-	31	31	-	31				25	-	25	25	-	25				56	-	56	56	-	56			
35-59	2	-	2	2	-	2				-	1	1		1	1				2	1	3	2	1	3			
60-65																											
66 & Over																											
Total	33	2	35	33	2	35				31	2	33	31	2	33				64	4	68	64	4	68			

Calculate % of Male and % of Female to the Total of Each Category

% of Total	89	11	100	89	11	100				100	94	6	100	94	6	100	100	100	94	6	100	94	6	100				100
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State	PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE																									
Alaska	1	-	1	1	-	1												1	-	1	1	-	1			
Arizona									1	-	1	1	-	1				1	-	1	1	-	1			
Arkansas									1	-	1	1	-	1				1	-	1	1	-	1			
Calif.	4	-	4	4	-	4			4	2	6	4	2	6				8	2	10	8	2	10			



Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION

Dentist (cont.)

\* See note on Page 12 of this report.

STATE	FY 77									FY 78									FY 77 AND FY 78								
	* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Colorado	1	-	1	1	-	1				1	-	1	1	-	1				1	-	1	1	-	1			
Conn.																											
Florida	1	-	1	1	-	1													1	-	1	1	-	1			
Hawaii	1	-	1	1	-	1				2	-	2	2	-	2				3	-	3	3	-	3			
Illinois	3	1	4	3	1	4				-	1	1	-	1	1				3	2	5	3	2	5			
Iowa	2	-	2	2	-	2				4	-	4	4	-	4				6	-	6	6	-	6			
Kansas	1	-	1	1	-	1													1	-	1	1	-	1			
Kentucky	1	-	1	1	-	1				-	1	1	-	1	1				1	1	2	1	1	2			
Michigan	1	-	1	1	-	1													1	-	1	1	-	1			
Missouri	1	-	1	1	-	1				2	-	2	-	2	2				3	-	3	3	-	3			
Montana										1	1	2	1	1	2				1	1	2	1	1	2			
Nebraska	1	-	1	1	-	1													1	-	1	1	-	1			
New Jersey	1	-	1	1	-	1													1	-	1	1	-	1			
New York	1	-	1	1	-	1													1	-	1	1	-	1			
N.Dakota	8	1	9	8	1	9				-	2	2	-	2	2				8	3	11	8	3	11			
Ohio										1	-	1	-	1	1				1	-	1	1	-	1			
Oregon										1	-	1	1	-	1				1	-	1	1	-	1			

**Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION**

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

Dentist (cont.)

\* See note on Page 12 of this report.

[illegible]

Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION

Dental Hygiene

\* See note on Page 12 of this report.

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS			* EXAMINED			* LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25		22	22		22	22					26	26		26	26					48	48		48	48			
26-34		5	5		5	5					1	1		1	1					6	6		6	6			
35-59																											
60-65																											
66 & Over																											
Total		27	27		27	27					27	27		27	27					54	54		54	54			

Calculate % of Male and % of Female to the Total of Each Category

% of Total		100	100		100	100			100		100	100			100			100		100	100		10	100			100
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State

PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE

Alaska		1	1		1	1														1	1		1	1			
Calif.		2	2		2	2				2	2		2	2						4	4		4	4			
Indiana		1	1		1	1														1	1		1	1			
Iowa		3	3		3	3				4	4		4	4						7	7		7	7			

Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION Dental Hygiene (cont.)

STATE	FY 77									FY 78									FY 77 AND FY 78								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Michigan		1	1		1	1														1	1		1	1			
Montana										3	3		3	3						3	3		3	3			
Nebraska		1	1		1	1														1	1		1	1			
New Jersey										1	1		1	1						1	1		1	1			
New York										1	1		1	1						1	1		1	1			
N. Dakota		5	5		5	5				6	6		6	6						11	11		11	11			
Ohio										1	1		1	1						1	1		1	1			
Oregon		1	1		1	1				1	1		1	1						2	2		2	2			
S. Dakota		3	3		3	3				2	2		2	2						5	5		5	5			
Wisconsin		8	8		8	8				6	6		6	6						14	14		14	14			
Ontario		1	1		1	1														1	1		1	1			

# Clauses 1, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION Registered Dental Assistant

\* See note on Page 14 of this report.

AGE GROUP	FY 77									FY 78									FY 77 AND FY 78								
	EXAMINED			LIC/REGIS			* NOT LIC/REGIS			EXAMINED			LIC/REGIS			* NOT LIC/REGIS			EXAMINED			LIC/REGIS			* NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25		9	9		9	9				21	21		21	21					30	30		30	30				
26-34										1	1		1	1					1	1		1	1				
35-59																											
60-65																											
66 & Over																											
Total		9	9		9	9				22	22		22	22					31	31		31	31				

Calculate % of Male and % of Female to the Total of Each Category

% of Total		100	100		100	100			100			100			100			100			100			100			100
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State

PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE

Illinois		1	1		1	1				1	1		1	1					2	2		2	2				
Iowa		3	3		3	3				1	1		1	1					4	4		4	4				
N.Dakota										14	14		14	14					14	14		14	14				
S.Dakota		1	1		1	1				1	1		1	1					2	2		2	2				

**Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION**

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

**TYPE OF LICENSE/REGISTRATION** Registered Dental Assistant (cont.)

\* See note on Page 14 of this report

[illegible]

# Minnesota Board of Dentistry

BOARD

Clause 1: THE NUMBER OF PERSONS NOT TAKING EXAMINATIONS WHO WERE LICENSED OR REGISTERED BY THE BOARD OR WHO WERE DENIED LICENSING OR REGISTRATION WITH THE REASONS FOR THE LICENSING OR REGISTRATION OR DENIAL THEREOF.

	FY 77	FY 78	FY 77-78
TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND GRANTED LICENSES OR REGISTRATION	<u>19</u>	<u>24</u>	<u>43</u>
TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND DENIED LICENSES OR REGISTRATION	<u>1</u>	<u>2</u>	<u>3</u>

FOR EACH PERSON GIVE:

Type of Lic./Regis.	State of Res.	AGE GROUP						SEX		* Method of Lic./Regis.			** Reasons for Granting or Denial
		0-18	18-25	26-34	35-59	60-65	66-	M	F		Grant	Deny	
Dental Hygiene	Arkansas			1					X	Credential Verification	X		Has necessary requirements.
Dental Hygiene	Michigan			1					X	Credential Verification	X		Has necessary requirements.
Dental Hygiene	Minnesota		1	13	5				X	Credential Verification	X		Has necessary requirements.
Dental Hygiene	Oregon			1					X	Credential Verification	X		Has necessary requirements.
Dental Hygiene	Wiscon.		1						X	Credential Verification	X		Has necessary requirements.
Dentist	Calif.				1			X		Credential Verification	X		Has necessary requirements.
Dentist	Illinois			2				X		Credential Verification	X		Has necessary requirements.
Dentist	Kansas			1				X		Credential Verification	X		Has necessary requirements.
Dentist	Kentucky			2				X		Credential Verification	X		Has necessary requirements.
Dentist	Michigan			1	1			X		Credential Verification	x		Has necessary requirements.
Dentist	Minnesota			4	3			X		Credential Verification	X		Has necessary requirements.

IDENTIFY METHOD: e.g. Application, Reciprocity, Endorsements, Credential Evaluation, Comity, etc.  
 REASONS FOR GRANTING OR DENIAL: Attach Additional Sheets if necessary.

BOARD

Clause 1:

TOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND GRANTED LICENSES OR REGISTRATION

FY 77

FY 78

NY 77-78

Fwd

**Fwd**

**Fwd**

TOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND DENIED LICENSES OR REGISTRATION

**Fwd**

**Fwd**

**Fwd**

FOR EACH PERSON GIVE:

[illegible]

4. IDENTIFY METHOD: e.g. Application, Reciprocity, Endorsements, Credential Evaluation, Comity, etc.  
5. REASONS FOR GRANTING OR DENIAL: Attach Additional Sheets if necessary.



Clause no: PERSONS PREVIOUSLY LICENSED OR REGISTERED BY THE BOARD.  
WHOSE LICENSES OR REGISTRATIONS WERE REVOKED, SUSPENDED  
OR OTHERWISE ALTERED IN STATUS WITH BRIEF STATEMENTS OF  
THE REASONS FOR THE REVOCATION, SUSPENSION OR ALTERATION.

TOTAL number of revocations  
 TOTAL number of suspensions  
 TOTAL number of other status changes

EY 77	EY 78	EY's 77-78
	10	10
14	1	15

TYPE OF LICENSE OR REGISTRATION (By case)	TYPE OF STATUS CHANGE			REASONS FOR EACH CHANGE IN STATUS FOR EACH CASE
	Revoked	Suspended	Other (Specify)	
Dentist		1		Gross Immorality
Dentist		9		Failure to register with the Board and pay annual registration fee.
Dental Hygiene		5		Failure to register with the Board and pay annual registration fee.
Dentist	4			Failure to register with the Board and pay annual registration fee.
Dental Hygiene	6			Failure to register with the Board and pay annual registration fee.

- Clause n: LIST THE NUMBER OF COMPLAINTS AND OTHER COMMUNICATIONS  
• RECEIVED BY THE EXECUTIVE SECRETARY, EACH BOARD MEMBER,  
• EMPLOYEE OR OTHER PERSON PERFORMING SERVICES FOR THE BOARD

IN FY 77

62 Written  
No.       Oral  
No.

THAT ALLEGE OR IMPLY A VIOLATION OF  
A STATUTE OR RULE WHICH THE BOARD  
IS EMPOWERED TO ENFORCE.

IN FY 78

52 Written  
No.       Oral  
No.

IN FY 77

       Written  
No.       Oral  
No.

WHICH ARE FORWARDED TO OTHER AGENCIES  
AS REQUIRED BY M.S. 214.10.

IN FY 78

       Written  
No.       Oral  
No.

Please indicate the number of complaints referred to each  
other governmental agencies in each fiscal year. (Federal,  
State, and Local).

Clause 6. SUMMARIZE BY CATEGORY THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CHARGE (1) OF M.S. 214.07 AND THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 211.10 and 214.11 (INDICATE AUTHORITY/CITATIONS FOR DISPOSITION).

(Dispositions occurring during this period of complaints and communications received prior to July 1, 1976 and complaints and communications received but not disposed of as of June 30, 1978, should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY CATEGORY (Give number in each category)	SUMMARY OF RESPONSES AND DISPOSITIONS (Give number in each category)
15- Unprofessional Conduct	6- Unsubstantiated - no violation determined 3- Warnings issued 1- Resolved by Stipulation 5- Under investigation
21- Gross Ignorance or Incompetence	13- Unsubstantiated - no violation determined. 8 - Under investigation.
9 - Charging unconscionable fee or for services not rendered	6- Unsubstantiated - no violation determined. 1- Resolved through mediation. 1- Resolved by Stipulation 1- Under Investigation.
7 - Performing Unnecessary Services	5 - Unsubstantiated - no violation determined. 1 - Complaint dismissed 1 - Under investigation.

SUMMARY BY CATEGORY THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CLAUSE (a) OF M.S. 214.07 AND THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 214.10 and 214.11 (INDICATE AUTHORITY/CITATIONS FOR DISPOSITION).

(Dispositions occurring during this period of complaints and communications received prior to July 1, 1976 and complaints and communications received but not disposed of as of June 30, 1978, should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY CATEGORY (Give number in each category)	SUMMARY OF RESPONSES AND DISPOSITIONS (Give number in each category)
1- Indiscriminate Prescribing or Dispensing of Drugs	1- Resolved by Stipulation.
1- Gross Immorality	1- License suspended.
5- Sanitary & Safety Conditions of Office	2- Unsubstantiated - no violation determined. 1- Resolved through mediation 1- Resolved by Stipulation
15- Illegal Use of Auxiliaries	3- Unsubstantiated - no violation determined. 1- Resolved by mediation. 4- Warnings issued. 1- Resolved by Stipulation. 6- Under Investigation
5- Advertising	4- Unsubstantiated - no violation determined 1- Warning issued.

**CLAUSE 6. SUMMARIZE BY CATEGORY THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CLAUSE (7) OF M.S. 214.07 AND THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 214.10 and 214.11 (INDICATE AUTHORITY/CITATIONS FOR DISPOSITION).**

(Dispositions occurring during this period of complaints and communications received prior to July 1, 1976 and complaints and communications received but not disposed of as of June 30, 1978, should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY CATEGORY (Give number in each category)	SUMMARY OF RESPONSES AND DISPOSITIONS (Give number in each category)
5- Practicing Dentistry without license	2- Unsubstantiated - no violation determined. 2- Resolved by Stipulation 1- Under Investigation.
30- Other, including: Fraud Fee Disputes Dentist-Patient Relations Fee Splitting	22- Unsubstantiated - no violation determined. 3- Resolved through mediation. 1- Resolved by Stipulation 2- Letter of Warnings 2- Under investigation.

Clause p: STATE ANY OTHER OBJECTIVE INFORMATION WHICH THE BOARD MEMBERS BELIEVE WILL BE USEFUL IN REVIEWING BOARD ACTIVITIES:

For Example: In what other states do your licensees hold licenses? Number of Minnesota licenses verified/certified to other states? Number of inspections? Comparisons with past Biennial Reports.)

Minnesota Statute, paragraph 150A.09, 1976 required registered dental assistants to annually register with the Board. This resulted in 1,442 registered assistants, who were previously registered with the Board to apply for and receive initial annual registration without further examination. Since these registrants were not examined by the Board during this reporting period, they were not included as examined on pages 14, 20 & 21 of this report. Of the 1,442 registered assistants, 36 were from 10 other states.