

**Ohio State Dental Board
Board Meeting
February 4, 2004**

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**Ohio State Dental Board
Board Meeting
February 4, 2004**

MINUTES

ATTENDANCE

The Ohio State Dental Board (Board) met in room 1952, 19th Floor of the Vern Riffe Center for Government and the Arts, 77 South High Street, Columbus, Ohio on Wednesday, January 7, 2004, beginning at 1:00 p.m. Board members present were:

Edward R. Hills, D.D.S., President
Eleanore Awadalla, D.D.S., Secretary
Mark T. Armstrong, D.D.S.
Phillip J. Beckwith, D.D.S.
Berta I. Howard, D.D.S.
Billie Sue Kyger, D.D.S.
Mark Landes, Esq.
Gregory A. McDonald, D.D.S.
T. Michael Murphy, D.D.S.
Ann E. Naber, R.D.H.
Lynda L. Sabat, R.D.H.
Paul Vesoulis, D.D.S.
Sandra L. Wise, R.D.H.

The following guests were also in attendance: Mary Crawford, Esq. and Rebecca Hockenberry, Esq., Assistant Attorneys General; Keith Kerns, Esq., and Dennis Burns, D.D.S. of the Ohio Dental Association (ODA); Sylvia Seta Wurster, R.D.H. and Sandy Held, R.D.H. of the Ohio Dental Hygienists' Association (ODHA); Lili C. Reitz, Esq., Executive Director, Michael R. Everhart, Assistant Director, Jayne A. Rasmussen, Licensure Coordinator, and Malynda Franks, Executive Secretary of the Ohio State Dental Board; and other guests.

CALL TO ORDER

Dr. Hills extended greetings to everyone and noting that there was a quorum present called the meeting to order at 1:11 p.m.

EXECUTIVE SESSION

Motion by Dr. Awadalla, second by Ms. Sabat, to move the Board into executive session pursuant to Ohio Revised Code Section 121.22(G)(3) to confer with counsel on matters that are the subject of pending or imminent court action.

Roll call vote.

Motion carried unanimously.

Dr. Hills invited Ms. Reitz, Mr. Everhart, Ms. Crawford, and Ms. Hockenberry to attend the executive session.

OPEN SESSION

At 2:00 p.m., the Board resumed open session. Dr. Hills approved the agenda for the afternoon as presented with the notation that the Chair may modify the agenda due to timing constraints or extenuating circumstances.

REVIEW OF THE JANUARY 2004 BOARD MEETING MINUTES

The Board reviewed the minutes of the January 7, 2004 Board meeting.

Motion by Dr. Murphy, second by Dr. McDonald, to approve the January 7, 2004 Board meeting minutes as presented.

Roll call vote:

- Dr. Armstrong – Yes
- Dr. Awadalla – Absent
- Dr. Beckwith – Yes
- Dr. Hills - Yes
- Dr. Howard – Yes
- Dr. Kyger – Yes
- Mr. Landes - Yes
- Dr. McDonald - Yes
- Dr. Murphy - Yes
- Ms. Naber – Yes
- Ms. Sabat - Yes
- Dr. Vesoulis – Absent

Ms. Wise - Yes

Motion carried.

REVIEW OF LICENSE APPLICATIONS

LICENSURE REPORT

Jayne Rasmussen, Licensure Coordinator, had prepared a report of the licenses issued since the January 2004 meeting, for Board member review. Dr. Hills then requested the Board's vote of approval for the Licensure Report.

DENTAL

Motion by Dr. Murphy, second by Ms. Sabat, to approve the licensure report for the following dental licenses issued by North East Regional Board, Inc. (NERB) examination:

Jonathan J. Eaton, D.D.S.

Ousama El-Hillal, D.D.S.

Kyle M. Hensley, D.D.S.

Kung-Shang Harry Ho, D.D.S.

Kristin E. Kaiser, D.D.S.

James L. Saltzgeber, Jr., D.D.S.

Margarita Y. Shmerelzon, D.D.S.

Jacqueline S. Sohn, D.D.S.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Absent
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Absent
Ms. Wise - Yes

Motion carried.

DENTAL HYGIENE

Motion by Ms. Sabat, second by Dr. Murphy, to approve the licensure report for the following dental hygiene licenses issued by North East Regional Board, Inc. (NERB) examination:

*Mary K. Barnhart, R.D.H.
Julie A. Beasley, R.D.H.*

*Tammy S. Pence, R.D.H.
Janet M. Phillips, R.D.H.*

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Absent
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Absent
Ms. Wise - Yes

Motion carried.

DENTAL ASSISTANT RADIOGRAPHER

Motion by Ms. Sabat, second by Dr. Murphy, to approve the licensure report for the following dental assistant radiographer licenses issued by; acceptable certification or licensure in another state, certification by the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC), or successful completion of the DANB Radiation, Health and Safety examination:

*Kelly S. Anderson
Ada L. Arce
Sherri R. Baisden
Kiandra R. Banks-Robinson
Megan J. Berchtold
Brandy L. Buzzard*

*Marla R. Calvert
Emily A. Conforto
Heather G. Cornacchione
Bridget A. David
Crystal G. Dawson
Deanna B. Desalvo-Sexton*

Deborah S. Drake
Stephanie A. Felts
Marlene George
Desiree M. Herron
Keerston L. Hopkins
Deepali Jere
Lesley A. Laing
Kari L. Malone
Brandi N. Mayes
Rhonda L. Mazzulla
Cheryl R. Mendala
Jessica M. Moore
Barbara J. Neilson
Amanda R. O'Boyle

Erin Page
Keisha L. Pierce
Shelley K. Reece
Annette J. Rombach
Fred M. Romig
Roxana M. Sabau
Sharon D. Sanders
Natalie B. Sharma
Hidie M. Sorge
Lisa B. Stanley
Tina M. West
Melissa R. Wilder
Mindy L. Yearout
Mary H. Zarate

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Absent
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Absent
Ms. Wise - Yes

Motion carried.

REGIONAL BOARD DENTAL APPLICATION(S)

Dr. Hills noted that there were no new regional board dental applications for review at this time.

REGIONAL BOARD DENTAL HYGIENE APPLICATION(S)

The following person applied for a dental hygiene license, based on successful completion of a regional board examination, National Board examination, and the Ohio examination on the statute and regulations:

Leslie Hicks Sawyer R.D.H.

Motion by Ms. Sabat, second by Dr. Murphy, to approve Ms. Sawyer's regional board dental hygiene license application.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Absent
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Absent
Ms. Wise - Yes

Motion carried.

GRADUATES OF UNACCREDITED DENTAL COLLEGES LOCATED OUTSIDE THE UNITED STATES

Dr. Hills noted that there were no license applications for graduates of unaccredited dental colleges located outside the United States for review at this time.

LIMITED RESIDENT'S LICENSE APPLICATION(S)

Dr. Hills noted that there were no limited resident's license applications for review at this time.

LIMITED TEACHING LICENSE APPLICATION(S)

Dr. Hills noted that there were no limited teaching license applications for review at this time.

LIMITED CONTINUING EDUCATION LICENSE APPLICATION(S)

Dr. Hills noted that there were no limited continuing education license applications for review at this time.

DENTAL APPLICATION(S) WITH SPECIALTY DESIGNATION

Dr. Hills noted that there were no license applications for dentists with a specialty designation for review at this time.

DENTAL ASSISTANT RADIOGRAPHER LICENSE APPLICATION(S)

Dr. Hills noted that there were no dental assistant radiographer license applications for review at this time.

CRITERIA APPROVAL LICENSE APPLICATION(S)

Dr. Hills noted that there were no criteria approval license applications for review at this time.

INTRODUCTION OF BOARD MEMBERS

Dr. Hills took a moment to introduce the Board. He introduced himself as the Board President, a general dentist from Cleveland. He then introduced the other Board members: Dr. Eleanore Awadalla, the Board Secretary, a general dentist from Toledo, Dr. T. Michael Murphy, an oral and maxillofacial surgeon from Marion, Dr. Paul Vesoulis, a general dentist from Toledo, Dr. Gregory McDonald, a general dentist from Springboro, Ms. Lynda Sabat, the Board's dental hygiene member from Brecksville, Mr. Mark Landes, an attorney and the Board's public member from Gahanna, Dr. Mark Armstrong, a general dentist from Troy, Dr. Phil Beckwith, an orthodontist from Columbus, Dr. Berta Howard, a general

dentist from Hamilton, Dr. Billie Sue Kyger, a general dentist from Gallipolis, Ms. Ann Naber, a dental hygienist from Bellbrook, and Ms. Sandra Wise, a dental hygienist from Fremont.

REINSTATEMENT LICENSE APPLICATION(S)

CHRISANN MILLER, R.D.H.

ChrisAnn Miller, R.D.H. was the only applicant for reinstatement interview. Ms. Miller's license to practice dentistry was suspended for failure to renew in January 1996. She holds current licenses to practice dental hygiene in Indiana and Michigan. Ms. Miller explained to the Board that shortly after graduation she relocated to Indiana where she practiced for ten (10) years prior to moving to Eaton, Ohio (located near the Indiana, Michigan and Ohio border) and practicing in Michigan for six (6) years. She stated that she left her job in Michigan in July of last year in order to spend more time with her youngest child. Ms. Miller stated that she now has employment opportunities in Ohio that are closer to her home and wishes to return to practice. She is currently certified in CPR and has obtained the requisite number of continuing education hours for reinstatement.

Upon questioning by the Board, Ms. Miller stated that Indiana does permit the dental hygienist to perform local anesthesia duties with appropriate training. However, she explained that she had not taken the coursework required to perform local anesthesia.

Motion by Dr. Murphy, second by Ms. Sabat, to approve Ms. Miller's reinstatement application for licensure as a dental hygienist in the state of Ohio.

Roll call vote.

Motion carried unanimously.

ENFORCEMENT REPORT

REPORT AND RECOMMENDATION(S)

Dr. Hills noted that there were no Report and Recommendations for consideration at this time.

PERSONAL APPEARANCE(S)

Dr. Hills noted that there were no Personal Appearances at this time.

REVIEW OF CASES WHEREIN NOTICE(S) OF OPPORTUNITY WERE ISSUED AND NO HEARING WAS REQUESTED

Dr. Hills noted that there were no cases wherein notices of opportunity were issued and no hearing was requested for consideration at this time.

REVIEW OF PROPOSED CONSENT AGREEMENT(S)

The Board reviewed two (2) proposed consent agreements.

DONALD C. DUNNING, D.D.S.

Motion by Ms. Sabat, second by Dr. Murphy, to approve the proposed consent agreement for Donald C. Dunning, D.D.S., license number 30-01-1380.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Abstain
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Yes
Ms. Wise - Yes

Motion carried.

MARK H. GROSSHANDLER, D.D.S.

Motion by Ms. Sabat, second by Dr. Murphy, to approve the proposed consent agreement for Mark H. Grosshandler, D.D.S., license number 30-01-4086.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Abstain
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Yes
Ms. Wise - Yes

Motion carried.

REVIEW OF PROPOSED VOLUNTARY RETIREMENT(S)

Dr. Hills noted that there were no proposed voluntary retirements for review at this time.

REVIEW OF PROPOSED NOTICE(S) OF OPPORTUNITY FOR HEARING

The Board reviewed one (1) Notice of Opportunity for Hearing. The name of the individual/licensee was not included in the documents reviewed by the Board. The name of the individual/licensee has been added to the minutes for public notice purposes.

LENA R. FREEMAN, DENTAL ASSISTANT RADIOGRAPHER

Motion by Ms. Sabat, second by Dr. Vesoulis, to approve the notice of opportunity for hearing and forward it to Lena R. Freeman, license number 51-00-7797, case number 03-18-1205.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Abstain
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Yes
Ms. Wise - Yes

Motion carried.

ENFORCEMENT UPDATE

Mr. Everhart informed the Board that there were currently two (2) cases listed as pending hearings and both have been scheduled for hearings. He stated that there were currently five (5) cases under appeal and indicated that there were nineteen (19) licensees currently under suspension. Mr. Everhart stated that there had been eleven (11) cases that had been investigated and reviewed by the Board Secretary and recommended to be closed.

Due to the requirement in Chapter 4715.03(D) of the Ohio Revised Code, that "The board shall not dismiss any complaint or terminate any investigation except by a majority vote of its members,..." Mr. Everhart reviewed the cases to be closed with the Board.

The following cases are to be closed:

02-60-681	03-18-1418	03-77-1204	03-18-1414
03-60-1201	03-18-1465	03-18-1347	03-18-1463
03-18-1385	03-18-1493	03-18-1394	

Prior to the vote to close the above listed cases, Dr. Hills inquired as to whether any of the Board members had any personal knowledge that the cases that were being voted on today involve either themselves or a personal friend.

Roll call vote: Dr. Armstrong – No
Dr. Awadalla – Abstain
Dr. Beckwith – No
Dr. Hills - No
Dr. Howard – No
Dr. Kyger – No
Mr. Landes - No
Dr. McDonald - No
Dr. Murphy - No
Ms. Naber – No
Ms. Sabat - No
Dr. Vesoulis – No
Ms. Wise - No

Dr. Hills then called for a motion to close the cases and approve the enforcement report.

Motion by Dr. Vesoulis, second by Dr. McDonald, to approve the enforcement report and close the above eleven (11) cases.

Roll call vote: Dr. Armstrong – Yes
Dr. Awadalla – Abstain
Dr. Beckwith – Yes
Dr. Hills - Yes
Dr. Howard – Yes
Dr. Kyger – Yes
Mr. Landes - Yes
Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber – Yes
Ms. Sabat - Yes
Dr. Vesoulis – Yes
Ms. Wise - Yes

Motion carried.

Dr. Hills thanked Mr. Everhart for the Enforcement Report.

ANESTHESIA COMMITTEE REPORT

REVIEW OF GENERAL ANESTHESIA PERMIT APPLICATION(S)

Dr. Murphy stated that the following individuals have applied for Anesthesia permits. He explained that the applications were reviewed by the Anesthesia Committee and are recommended for approval:

Matthew Goldschmidt, D.D.S – Lakewood, Ohio
William G. Hughes, D.D.S. – Washington CourtHouse, Ohio
Likith V. Reddy, D.D.S. – Cincinnati, Ohio
Shahin Shahgoli, D.D.S. – Marion, Ohio

Motion by Dr. Murphy, second by Ms. Sabat, to approve these four (4) applications for anesthesia permits.

Roll call vote.

Motion carried unanimously.

REVIEW OF PROVISIONAL CONSCIOUS SEDATION PRIVILEGES

Dr. Murphy stated that there were no applications for review for provisional privileges for Conscious Sedation permits.

REVIEW OF CONSCIOUS SEDATION PERMIT APPLICATION(S)

Dr. Murphy stated that there were no applications for review for Conscious Sedation permits.

REVIEW OF PROVISIONAL ANESTHESIA PRIVILEGES

Dr. Murphy stated that there was one (1) applicant for Provisional Anesthesia Privileges, Simon R. Prior, B.D.S. who holds a limited teaching license for his position at The Ohio State University (OSU). Dr. Murphy stated that there are plans for Dr. Prior to become the Chair of Anesthesia at the OSU School of Dentistry. He stated that Dr. Prior has received several years of training in anesthesia and sedation, including completion of a two (2) year Anesthesia Residency at OSU. However, Dr. Murphy feels that he does not qualify to receive a permit under current Board rule.

Dr. Murphy explained further that the last change to Ohio Administrative Code section 4715-5-05(B)(3) indicates that the applicant must have completed a minimum of one (1) year of pre-doctoral training in anesthesia. He stated that Dr. Prior's anesthesia training was all completed post-doctoral. Dr. Murphy commented that to his knowledge there are no dental schools that include one (1) year of pre-doctoral training in anesthesia. He remarked that the Board should consider revising the anesthesia rule for this specific reason. Dr. Awadalla stated that she believed that Dr. Prior did qualify under Ohio Administrative Code section 4715-5-05(B)(1).

Dr. Hills tabled the discussions regarding Dr. Prior's application for an Anesthesia Permit.

COMMUNICATIONS COMMITTEE REPORT

Ms. Reitz informed the Board members that there was nothing new to report at this time.

EDUCATION COMMITTEE REPORT

Ms. Sabat stated that the committee had met early that morning and began by holding an orientation session for the new committee members: Dr. Beckwith, Dr. Howard, Dr. Kyger, Ms. Naber, and Ms. Wise. She stated that after the orientation they discussed the issues on the agenda and reviewed Biennial Sponsor applications and course considerations for presentation to the Board.

Ms. Sabat informed the Board that the committee had discussed ongoing issues regarding Dental Assistant Radiographer Licensure examinations and updated guidelines for Continuing Education Waivers. She stated that the committee is working closely with the Boards' Executive Director and Assistant Attorney General on these matters.

Continuing on, Ms. Sabat stated that the committee briefly discussed the substance abuse continuing education requirement for dentists. Ms. Sabat noted that several of the Board members had questioned the availability of substance abuse courses immediately prior to licensure renewal in December. She stated that she had included information regarding the Board-approved on-line course from Manhattan Consultants, Inc. in the Board notebooks. Ms. Sabat informed the members that this course was approved in April and, in addition, the sponsor has added one (1) more approved substance abuse course offering. She explained that both courses were available on-line twenty-four (24) hours a day, seven (7) days per week including holidays, as evidenced by the copy provided from a licensee who had taken one (1) of the approved courses on Christmas day.

REVIEW OF BIENNIAL CONTINUING EDUCATION SPONSOR APPLICATION(S)

Ms. Sabat stated that the following individuals/organizations have applied for approval as biennial sponsors of continuing education for the years 2004-2005 and have been recommended for approval by the Education Committee:

Allen K. Herpy, D.D.S.
Mill Creek Oral & Maxillofacial Surgery Assoc., Inc.
Terry B. Philibin, D.D.S., M.S.

Motion by Ms. Sabat, second by Dr. Murphy, to approve these three (3) applications for biennial sponsorship of continuing education for the 2004-2005 biennium.

Roll call vote.

Motion carried unanimously.

REVIEW OF BIENNIAL CONTINUING EDUCATION SPONSOR RENEWAL APPLICATION(S)

Ms. Sabat stated that the following individuals/organizations have applied for renewal as biennial sponsors of continuing education for the years 2004-2005 and have been recommended for approval by the Education Committee:

Thomas M. Bodnar, D.D.S., M.S.
Brown, Cheryl L., R.D.H.
Dennis A. Burns, D.D.S.
Marcus A. Castro, D.D.S.
Cleveland Comprehensive Care Study Group
Contemporary Dental Care of Columbus (formerly James E. Metz, D.D.S.)
Delta Sigma Delta Dental Fraternity
Robert J. Dornauer, D.D.S.
Greater Columbus Society of Contemporary Dentistry
T. Lawrence Hutta, D.D.S. & Assoc., Inc.
Infection Control Services, Inc.
Sylvia Malmacher Kramer, D.D.S.
Harris B. Levine, D.D.S., Inc. (formerly Northcoast Endodontic Seminars)
Mahoning Trumbull Study Club
Manhattan Consultants, Inc.

Mark Obernesser, D.D.S., M.Sc. (formerly Akron Periodontics and Dental Implantology)
Roger S. Karp, D.D.S., M.S.D. (formerly Cleveland Study Club)
Robert M. Stofer, Jr., D.D.S.
Tri-State Dental Medical Conference

Motion by Ms. Sabat, second by Dr. Vesoulis, to approve these nineteen (19) applications for biennial sponsorship of continuing education for the 2004-2005 biennium.

Roll call vote.

Motion carried unanimously.

REVIEW OF DENTAL ASSISTANT RADIOGRAPHER INITIAL TRAINING COURSE(S)

Ms. Sabat noted that there were no dental assistant radiographer initial training courses for review at this time.

REVIEW OF ANESTHESIA CONTINUING EDUCATION COURSE(S)

Ms. Sabat noted that there were no anesthesia continuing education courses for review at this time.

REVIEW OF CONSCIOUS SEDATION CONTINUING EDUCATION COURSE(S)

Ms. Sabat noted that there were no conscious sedation continuing education courses for review at this time.

REVIEW OF SUBSTANCE ABUSE CONTINUING EDUCATION COURSE(S)

Ms. Sabat noted that there were no substance abuse continuing education courses for review at this time.

REVIEW OF DENTAL HYGIENE MEDICAL EMERGENCY COURSE(S)

Ms. Sabat stated that the following organization has submitted a course for approval for the dental hygiene medication emergency recognition course required for dental hygienists who intend to practice while the dentist is not present. She stated that the Education Committee has recommended the following course for approval:

Dayton Dental Society - "Medical Urgencies & Emergencies in Dental Practice" by Daniel E. Becker, DDS

Motion by Ms. Sabat, second by Dr. Murphy, to approve Dayton Dental Society's application for substance abuse continuing education course.

Roll call vote.

Motion carried unanimously.

REVIEW OF SPECIAL NEEDS PROGRAM REQUEST(S)

Ms. Sabat noted that there were no requests for special needs programs for review at this time.

REVIEW OF REQUEST FOR WAIVER(S) OF THE CONTINUING EDUCATION REQUIREMENT

Ms. Sabat informed the Board that the Education Committee had been unable to complete its agenda for the day due to the new Committee member training, the number of Biennial Sponsor applications for review and the shortened meeting times. Therefore, she stated that the rest of the Committee's original agenda has been tabled until the March meeting.

Dr. Hills thanked Ms. Sabat for her report.

LAW AND RULES REVIEW COMMITTEE REPORT

Dr. Murphy informed the Board that the Law and Rules Review Committee had not met this month. However he explained that the Committee had completed its objectives for the 2003 review year including the rules addressing the issue of coronal polishing by the certified dental assistant. He stated that the Committee had come to a consensus on

all of these proposed new and amended rules and those rules that are suggested to be rescinded. He stated that the draft rules which include all final changes were provided to the Board members for their review prior to the Board meeting and that additional copies were supplied in their notebooks.

Motion by Dr. Murphy, second by Dr. Vesoulis, to initial file Ohio administrative rules 4715-1-02, 4715-1-03, 4715-5-03, 4715-9-02.1, 4715-9-03, 4715-11-01, 4715-11-02, 4715-11-03, and 4715-11-04 for rescission and to initial file new and amended rules 4715-3-01, 4715-5-01.1, 4715-5-03, 4715-9-01, 4715-9-01, 4715-10-01, 4715-11-01, 4715-11-02, 4715-11-03, 4715-11-04, 4715-11-05, and 4715-11-06.

Discussion followed wherein Dr. McDonald questioned whether permanent sponsors would be permitted to provide the coronal polishing training program to qualified dental assistants. He stated that he had concerns regarding infection control regulation for sponsors at certain locations such as dental society offices.

Dr. Kyger stated that local dental societies should be able to seek approval utilizing local dental offices for training purposes. She pointed out that dental offices are required to comply with strict infection control guidelines and that to require the certified dental assistant to attend a course in Columbus at The Ohio State University or in Portsmouth at Shawnee State University would be inconvenient for the dentist, as well as the certified dental assistant. Dr. Kyger stated that she supported inclusion of language that would permit the course to be provided by permanent sponsors of continuing education for these reasons.

Ms. Reitz informed the Board members that Dr. Murphy had made the motion based upon meeting discussions and recommendations from the Law and Rules Review Committee members. She stated that there had been an hour-long discussion at the last meeting in February specifically regarding this issue, which resulted in over half of the committee in support of the current language. However, Ms. Reitz reminded the new Board members that there would be opportunity for testimony and possible changes at the Board's Public Rules Hearing in March and/or at the Joint Committee on Agency Rule Review (JCARR) hearing in April.

Roll call vote: Dr. Armstrong - Yes
Dr. Awadalla - Yes
Dr. Beckwith - Yes
Dr. Hills - Yes
Dr. Howard - Abstain
Dr. Kyger - Abstain
Mr. Landes - Yes

Dr. McDonald - Yes
Dr. Murphy - Yes
Ms. Naber - Yes
Ms. Sabat - Yes
Dr. Vesoulis - Yes
Ms. Wise - Yes

Motion carried.

Dr. Murphy informed the Board that the rules would be initial filed within the next week once they have been reviewed for typographical errors, to correct any non-substantive errors, and correct statutory references. He stated that once filed the Board would hold its Public Rules Hearing on March 17th, 2004 during the Board meeting.

Dr. Hills thanked Dr. Murphy for the Law and Rules Review Committee report.

POLICY COMMITTEE REPORT

Dr. Awadalla informed the Board members that a draft of the Policy Regarding Approved Hand Hygiene Procedures Relative to Rules for Infection Control (Appendix A) had been provided in the Board notebooks for their review. She stated that the newest version of the Department of Health and Human Services Centers for Disease Control (CDC) "Guidelines for Infection Control in Dental Health Care Settings – 2003" (Guidelines) had recently been released for distribution. She stated that the Guidelines had been discussed at the last meeting of the Law and Rules Review Committee and that in an effort to expedite the use of hand sanitizers in the dental office, the policy, if approved, would be in effect until rules regarding this issue have been promulgated.

Motion by Dr. Awadalla, second by Dr. Murphy, to approve the "Policy Regarding Approved Hand Hygiene Procedures Relative to Rules for Infection Control".

Roll call vote.

Motion carried unanimously.

TREATMENT CENTER APPROVAL COMMITTEE REPORT

Dr. Awadalla informed the Board that The Cleveland Clinic Foundation has requested approval as a treatment provider for Ohio licensees. She stated that an application was submitted and an on-site inspection has been performed. Dr. Awadalla

stated that The Cleveland Clinic Foundation meets the criteria set by the Board to be a treatment provider. Therefore, she stated that the Treatment Center Approval Committee recommends approval of their request.

Motion by Dr. Awadalla, second by Ms. Sabat, to approve The Cleveland Clinic Foundation as an acceptable treatment provider for impaired licensees.

Roll call vote.

Motion carried unanimously.

Dr. Hills thanked Dr. Awadalla for both reports.

WAIVER COMMITTEE REPORT

Ms. Sabat informed the Board that the Waiver Committee had no new or renewal applications for Hepatitis B Waiver for review at this time.

Dr. Hills thanked Ms. Sabat for the Waiver Committee report.

SECRETARY'S EXPENSE REPORT

Dr. Awadalla reported by stating that she had spent in excess of twenty (20) hours per week attending to Board business.

Motion by Dr. Awadalla, second by Ms. Sabat, to approve the Secretary's expense report.

Roll call vote.

Motion carried unanimously.

EXECUTIVE SESSION

Motion by Dr. Awadalla, second by Ms. Sabat, to move the Board into executive session pursuant to Ohio Revised Code Section 121.22(G)(1) to discuss the matter of licensee Simon R. Prior, D.D.S..

Roll call vote.

Motion carried unanimously.

Dr. Hills invited Ms. Reitz, Mr. Everhart, Ms. Crawford, and Ms. Hockenberry to attend the executive session.

OPEN SESSION

At 3:10 p.m., the Board resumed open session. Dr. Hills requested Dr. Prior to answer a few questions from the Board's Assistant Attorney General, Ms. Hockenberry, to assist the Board in this matter.

Upon questioning, Dr. Prior explained that he had received his training at the University of Otago in Dunedin, New Zealand. He stated that during that time he had received instruction in local anesthesia while attending two (2) lectures per week for three (3) years and that he had received instruction in general anesthesia while attending one (1) lecture per week for two (2) years. Dr. Prior informed the Board that he had received his practical experience performing over thirty (30) intubations in the clinic while attending his last year of instruction of one (1) lecture per week on conscious sedation.

Continuing on, Dr. Prior explained that he has received an additional two (2) years of clinical training and instruction in the Anesthesia Residency program at The Ohio State University College of Dentistry under the direction of Joel Weaver, D.D.S., Ph.D.

Motion by Dr. Murphy, second by Dr. Vesoulis, to approve Simon Prior, D.D.S. for receipt of provisional anesthesia privileges.

Roll call vote.

Motion carried unanimously.

Dr. Hills congratulated and thanked Dr. Prior.

OFFICE EXPENSE REPORT

The report of the Board expenditures was reviewed.

Motion by Dr. Murphy, second by Dr. Kyger, to approve the expense report and approve payment of the January, 2004 Board bills.

Roll call vote.

Motion carried unanimously.

EXECUTIVE DIRECTOR'S REPORT

QUALITY INTERVENTION PROGRAM

Ms. Reitz began her report by informing the Board that the Quality Intervention Program (QUIP) was officially up and running. She stated that the QUIP Secretary, Gail Davis, had provided a brief report in the notebooks for their review. Ms. Reitz noted that the Board is actively seeking qualified dentists for the QUIP panel, as there are already two (2) cases assigned to the program.

A GUIDE TO THE RULE-MAKING PROCESS

Ms. Reitz informed the Board that copies of "A Guide to the Rule-Making Process" were in the Board notebooks as a refresher for all Board members. She stated that this document is also provided on the Board website for public information purposes.

NEW LICENSING SOFTWARE

Continuing on, Ms. Reitz stated that there would be an orientation the next day on the new licensing software that all the regulatory boards and commissions would be required to use. She informed the Board members that the new licensing program was all-inclusive in that it retains data on licensure, examination, enforcement and continuing education. She stated that each of the boards and commissions would be converting over to the new software in the very near future and that the Dental Board was slated to begin in February.

OHIO ETHICS COMMISSION - FINANCIAL DISCLOSURE STATEMENTS

Ms. Reitz reminded the members to submit their Financial Disclosure Statements to the Board executive office by the March meeting. She stated that the forms are due by April 15th, 2004. However, Ms. Reitz informed the Board members that early submission to the office will allow ample time for processing of the \$25 fee and the statement from the North East Regional Board (NERB).

NEWSLETTER – SPRING 2004

Ms. Reitz informed the Board that she hopes to begin working on the Spring issue of the Board's newsletter. She stated that this issue will include articles on the following:

- New Board members;
- Renewal recap;
- Hand hygiene; and
- Overview of new rules

Concluding her report, Ms. Reitz informed all the Board members that anyone wishing to contribute suggestions or an article for the newsletter should direct them to her attention.

Dr. Hills thanked Ms. Reitz for her report.

CORRESPONDENCE

AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS

Ms. Reitz informed the Board that copies were provided in the Board notebooks of a letter from the American Association of Oral and Maxillofacial Surgeons (AAOMS) to the President of the Dental Organization for Conscious Sedation (DOCS), Dr. Michael Silverman. She stated that the letter was AAOMS response to a conference call regarding sedation dentistry. Ms. Reitz explained that the letter clarifies that AAOMS is in full support of the American Dental Association's Policy and the Board's rule regarding oral titration.

ANYTHING FOR THE GOOD OF THE BOARD

BOARD GOVERNANCE GUIDELINES

Ms. Reitz indicated that there were copies of the revised "Ohio State Dental Board Governance Guidelines" in their notebooks.

Motion by Dr. Awadalla, second by Dr. Murphy, to approve the revised "Ohio State Dental Board Governance Guidelines" as presented.

Roll call vote.

Motion carried unanimously.

COMMITTEE ROSTERS

Ms. Reitz informed the Board members that an updated Committee Roster had been provided in the Board notebooks for their review.

NEW BOARD MEMBER ORIENTATION

Continuing on, Ms. Reitz stated that she had also included a summary of the New Board Member Orientation for their review. She stated that she felt that the members could have best been served if they had additional time for the training.

BOARD MEETING SCHEDULE

Ms. Reitz stated that a change to the March Board Meeting would be required. She stated that two (2) days would be required since there was a Public Administrative Rules Hearing scheduled, two (2) presentations; one (1) by Dr. Awadalla on the American Association of Dental Examiners and one (1) by Don Bowermaster, D.D.S. on Substance Abuse, and several personal appearances requested. Discussion followed wherein it was determined that the Board committees would meet on Tuesday, March 16, 2004 from 4:00 p.m. to 7:00 p.m. and that the Board Meeting would be held on Wednesday, March 17, 2004 beginning at 9:00 a.m.

The Board also discussed several other meeting dates and times. Ms. Reitz stated that changes to the schedule could be made closer to the projected dates as needed.

ADJOURN

Motion by Dr. Murphy, second by Dr. McDonald, to adjourn the meeting until Wednesday, March 17th, 2004.

Motion passed by acclamation.

Edward R. Hills, D.D.S.
President

Eleanore Awadalla, D.D.S.
Secretary

APPENDIX A

POLICY REGARDING APPROVED HAND HYGIENE PROCEDURES RELATIVE TO RULES FOR INFECTION CONTROL

Preamble: The purpose of this policy is to clarify acceptable hand hygiene procedures as they relate to Ohio Administrative Code Rules regarding infection control procedures.

The Department of Health and Human Services Centers for Disease Control (CDC) has set forth guidelines for hand hygiene in its 2003 Guidelines for Infection Control in Dental Health-Care Settings (see attached excerpt of the report and the recommendations, references omitted). The Ohio State Dental Board (Board) has approved these guidelines as meeting the requirements of Ohio Administrative Code 4715-20-01 as an appropriate hand washing technique. Further, this policy will be put in rule form as part of the Board's rule review process.

(February 4, 2004)

Department of Health and Human Services
Centers for Disease Control
Guidelines for Infection Control in Dental
Health-Care Settings – 2003*

(*excerpt from full report and recommendations, references omitted)

REPORT

Hand Hygiene

Hand hygiene (e.g., handwashing, hand antisepsis, or surgical hand antisepsis) substantially reduces potential pathogens on the hands and is considered the single most critical measure for reducing the risk of transmitting organisms to patients and health care personnel (HCP). Hospital-based studies have demonstrated that noncompliance with hand hygiene practices is associated with health-care--associated infections and the spread of multiresistant organisms. Noncompliance also has been a major contributor to outbreaks. The prevalence of health-care--associated infections decreases as adherence of HCP to recommended hand hygiene measures improves.

The microbial flora of the skin, first described in 1938, consist of transient and resident microorganisms. Transient flora, which colonize the superficial layers of the skin, are easier to remove by routine handwashing. They are often acquired by HCP during direct contact with patients or contaminated environmental surfaces; these organisms are most frequently associated with health-care--associated infections. Resident flora attached to deeper layers of the skin are more resistant to removal and less likely to be associated with such infections.

The preferred method for hand hygiene depends on the type of procedure, the degree of contamination, and the desired persistence of antimicrobial action on the skin ([Table 2](#)).

For routine dental examinations and nonsurgical procedures, handwashing and hand antisepsis is achieved by using either a plain or antimicrobial soap and water. If the hands are not visibly soiled, an alcohol-based hand rub is adequate.

The purpose of surgical hand antisepsis is to eliminate transient flora and reduce resident flora for the duration of a procedure to prevent introduction of organisms in the operative wound, if gloves become punctured or torn. Skin bacteria can rapidly multiply under surgical gloves if hands are washed with soap that is not antimicrobial. Thus, an antimicrobial soap or alcohol hand rub with persistent activity should be used before surgical procedures.

Agents used for surgical hand antisepsis should substantially reduce microorganisms on intact skin, contain a nonirritating antimicrobial preparation, have a broad spectrum of activity, be fast-acting, and have a persistent effect. Persistence (i.e., extended antimicrobial activity that prevents or inhibits survival of microorganisms after the product is applied) is critical because microorganisms can colonize on hands in the moist environment underneath gloves.

Alcohol hand rubs are rapidly germicidal when applied to the skin but should include such antiseptics as chlorhexidine, quaternary ammonium compounds, octenidine, or triclosan to achieve persistent activity. Factors that can influence the effectiveness of the surgical hand antisepsis in addition to the choice of antiseptic agent include duration and technique of scrubbing, as well as condition of the hands, and techniques used for drying and gloving. CDC's 2002 guideline on hand hygiene in health-care settings provides more complete information.

Selection of Antiseptic Agents

Selecting the most appropriate antiseptic agent for hand hygiene requires consideration of multiple factors. Essential performance characteristics of a product (e.g., the spectrum and persistence of activity and whether or not the agent is fast-acting) should be determined before selecting a product. Delivery system, cost per use, reliable vendor support and supply are also considerations.

Because HCP acceptance is a major factor regarding compliance with recommended hand hygiene protocols, considering dental health care personnel (DHCP) needs is critical and

should include possible chemical allergies, skin integrity after repeated use, compatibility with lotions used, and offensive agent ingredients (e.g., scent). Discussing specific preparations or ingredients used for hand antisepsis is beyond the scope of this report. DHCP should choose from commercially available HCP handwashes when selecting agents for hand antisepsis or surgical hand antisepsis.

Storage and Dispensing of Hand Care Products

Handwashing products, including plain (i.e., nonantimicrobial) soap and antiseptic products, can become contaminated or support the growth of microorganisms. Liquid products should be stored in closed containers and dispensed from either disposable containers or containers that are washed and dried thoroughly before refilling. Soap should not be added to a partially empty dispenser, because this practice of topping off might lead to bacterial contamination. Store and dispense products according to manufacturers' directions.

Lotions

The primary defense against infection and transmission of pathogens is healthy, unbroken skin. Frequent handwashing with soaps and antiseptic agents can cause chronic irritant contact dermatitis among DHCP. Damage to the skin changes skin flora, resulting in more frequent colonization by staphylococci and gram-negative bacteria. The potential of detergents to cause skin irritation varies considerably, but can be reduced by adding emollients. Lotions are often recommended to ease the dryness resulting from frequent handwashing and to prevent dermatitis from glove use. However, petroleum-based lotion formulations can weaken latex gloves and increase permeability. For that reason, lotions that contain petroleum or other oil emollients should only be used at the end of the work day. Dental practitioners should obtain information from lotion manufacturers regarding interaction between lotions, gloves, dental materials, and antimicrobial products.

Fingernails and Artificial Nails

Although the relationship between fingernail length and wound infection is unknown, keeping nails short is considered key because the majority of flora on the hands are found

under and around the fingernails. Fingernails should be short enough to allow DHCP to thoroughly clean underneath them and prevent glove tears. Sharp nail edges or broken nails are also likely to increase glove failure. Long artificial or natural nails can make donning gloves more difficult and can cause gloves to tear more readily. Hand carriage of gram-negative organisms has been determined to be greater among wearers of artificial nails than among nonwearers, both before and after handwashing. In addition, artificial fingernails or extenders have been epidemiologically implicated in multiple outbreaks involving fungal and bacterial infections in hospital intensive-care units and operating rooms. Freshly applied nail polish on natural nails does not increase the microbial load from periungual skin if fingernails are short; however, chipped nail polish can harbor added bacteria.

Jewelry

Studies have demonstrated that skin underneath rings is more heavily colonized than comparable areas of skin on fingers without rings. In a study of intensive-care nurses, multivariable analysis determined rings were the only substantial risk factor for carriage of gram-negative bacilli and *Staphylococcus aureus*, and the concentration of organisms correlated with the number of rings worn. However, two other studies demonstrated that mean bacterial colony counts on hands after handwashing were similar among persons wearing rings and those not wearing rings. Whether wearing rings increases the likelihood of transmitting a pathogen is unknown; further studies are needed to establish whether rings result in higher transmission of pathogens in health-care settings. However, rings and decorative nail jewelry can make donning gloves more difficult and cause gloves to tear more readily. Thus, jewelry should not interfere with glove use (e.g., impair ability to wear the correct-sized glove or alter glove integrity).

RECOMMENDATIONS

Hand Hygiene

A. General Considerations

Perform hand hygiene with either a nonantimicrobial or antimicrobial soap and water when hands are visibly dirty or contaminated with blood or other potentially infectious material. If hands are not visibly soiled, an alcohol-based hand rub can also be used. Follow the manufacturer's instructions.

Indications for hand hygiene include

- a. when hands are visibly soiled;
- b. after barehanded touching of inanimate objects likely to be contaminated by blood, saliva, or respiratory secretions;
- c. before and after treating each patient ;
- d. before donning gloves; and
- e. immediately after removing gloves.

For oral surgical procedures, perform surgical hand antisepsis before donning sterile surgeon's gloves. Follow the manufacturer's instructions by using either an antimicrobial soap and water, or soap and water followed by drying hands and application of an alcohol-based surgical hand-scrub product with persistent activity.

Store liquid hand-care products in either disposable closed containers or closed containers that can be washed and dried before refilling. Do not add soap or lotion to (i.e., top off) a partially empty dispenser.

B. Special Considerations for Hand Hygiene and Glove Use

1. Use hand lotions to prevent skin dryness associated with handwashing.
2. Consider the compatibility of lotion and antiseptic products and the effect of petroleum or other oil emollients on the integrity of gloves during product selection and glove use.

3. Keep fingernails short with smooth, filed edges to allow thorough cleaning and prevent love tears.
4. Do not wear artificial fingernails or extenders when having direct contact with patients at high risk (e.g., those in intensive care units or operating rooms).
5. Use of artificial fingernails is usually not recommended.
6. Do not wear hand or nail jewelry if it makes donning gloves more difficult or compromises the fit and integrity of the glove.

TABLE 2. Hand-hygiene methods and indications

Method	Agent	Purpose	Duration (minimum)	Indication*
Routine handwash	Water and nonantimicrobial soap (e.g., plain soap [†])	Remove soil and transient microorganisms	15 seconds [§]	Before and after treating each patient (e.g., before glove placement and after glove removal). After barehanded touching of inanimate objects likely to be contaminated by blood or saliva. Before leaving the dental operator or the dental laboratory. When visibly soiled. [¶] Before regloving after removing gloves that are torn, cut, or punctured.
Antiseptic handwash	Water and antimicrobial soap (e.g., chlorhexidine, iodine and iodophors, chloroxylenol [PCMX], triclosan)	Remove or destroy transient microorganisms and reduce resident flora	15 seconds [§]	
Antiseptic hand rub	Alcohol-based hand rub [¶]	Remove or destroy transient microorganisms and reduce resident flora	Rub hands until the agent is dry [¶]	
Surgical antiseptis	Water and antimicrobial soap (e.g., chlorhexidine, iodine and iodophors, chloroxylenol [PCMX], triclosan) Water and non-antimicrobial soap (e.g., plain soap [†]) followed by an alcohol-based surgical hand-scrub product with persistent activity	Remove or destroy transient microorganisms and reduce resident flora (persistent effect)	2–6 minutes Follow manufacturer instructions for surgical hand-scrub product with persistent activity ^{¶**}	Before donning sterile surgeon's gloves for surgical procedures ^{††}

* (7,9,11,13,113,120–123,125,126,136–138).

[†] Pathogenic organisms have been found on or around bar soap during and after use (139). Use of liquid soap with hands-free dispensing controls is preferable.

[§] Time reported as effective in removing most transient flora from the skin. For most procedures, a vigorous rubbing together of all surfaces of premoistened lathered hands and fingers for ≥15 seconds, followed by rinsing under a stream of cool or tepid water is recommended (9,120,123,140,141). Hands should always be dried thoroughly before donning gloves.

[¶] Alcohol-based hand rubs should contain 60%–95% ethanol or isopropanol and should not be used in the presence of visible soil or organic material. If using an alcohol-based hand rub, apply adequate amount to palm of one hand and rub hands together, covering all surfaces of the hands and fingers, until hands are dry. Follow manufacturer's recommendations regarding the volume of product to use. If hands feel dry after rubbing them together for 10–15 seconds, an insufficient volume of product likely was applied. The drying effect of alcohol can be reduced or eliminated by adding 1%–3% glycerol or other skin-conditioning agents (123).

^{**} After application of alcohol-based surgical hand-scrub product with persistent activity as recommended, allow hands and forearms to dry thoroughly and immediately don sterile surgeon's gloves (144,145). Follow manufacturer instructions (122,123,137,146).

^{††} Before beginning surgical hand scrub, remove all arm jewelry and any hand jewelry that may make donning gloves more difficult, cause gloves to tear more readily (142,143), or interfere with glove usage (e.g., ability to wear the correct-sized glove or altered glove integrity).