Rules of
Department of Insurance, Financial Institutions and Professional Registration
Division 2110—Missouri Dental Board
Chapter 2—General Rules

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PURPOSE: This rule provides definitions for specific terms used throughout the rules.

(1) “Dentist”—one who is currently licensed to practice as a dentist in Missouri.

(2) “Hygienist”—one who is currently licensed to practice as a dental hygienist in Missouri.

(3) “Direct supervision”—a level of supervision in which the dentist has authorized the procedure for a patient of record, remains in the treatment facility while the procedure is performed and evaluates the procedure prior to patient dismissal.

(4) “Indirect supervision”—a level of supervision in which the dentist has authorized the procedure for a patient of record and remains in the treatment facility while the procedure is performed.

(5) “General supervision”—a level of supervision in which the dentist has authorized the procedure for a patient of record and which does not require the physical presence of the dentist in the treatment facility during the performance of the procedure. The patient must be informed that the dentist is not in the treatment facility. The authorization shall be written in the patient’s record and is valid from the date of submission to the board, for a maximum of twelve (12) months.

(6) “Patient of record”—one for whom the dentist has obtained a relevant history, performed an examination, and evaluated the condition to be treated. A supervising dentist may delegate to a licensed dental hygienist the collection of relevant and necessary systemic and oral health data prior to the supervising dentist’s examination and evaluation. The patient shall be made aware, prior to the collection of any data, that the supervising dentist may not be physically present when that data is collected.


PURPOSE: This rule outlines the procedure for obtaining a dental license by examination.

(1) To qualify for licensure as set out in sections 332.131 and 332.151, RSMo, each applicant shall—
(A) Be a graduate of and hold a Doctor of Dental Surgery (DDS) degree or a Doctor of Dental Medicine (DMD) degree from an accredited dental school as defined in section 332.011, RSMo, and meet the other requirements of sections 332.131 and 332.151, RSMo; and
(B) Have passed the National Board Examination in accordance with the criteria established by the sponsoring body; and
(C) Have passed a state or regional entry-level competency examination (hereinafter referred to as a competency examination) within the previous five (5) years, subject to section (3) below of this rule; and
(D) Have passed a written examination given by the board on the Missouri dental laws and rules (hereinafter referred to as the jurisprudence examination) with a grade of at least eighty percent (80%). In order to sit for the jurisprudence examination, the applicant must—
1. Have passed the National Board Examination, prepare to take a competency examination, and submit an application form for licensure to the board thirty (30) days prior to the jurisprudence examination; or
2. Have passed a competency examination within the previous five (5) years and have passed the National Board Examination, and submit an application form for licensure to the board. Applicants will be scheduled to take the jurisprudence examination at the board office, at the office of one (1) of the members of the board, or at such times deemed necessary by the board; and
(E) Hold current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board; and
(F) Certification of passage of the National Board Examination sent directly to the board from the sponsoring body; and
(G) A copy of his/her competency examination scores sent directly to the board from the testing agent(s); and
(H) A form provided by the board verifying licensure in other state(s), if applicable. Verification forms must be sent directly to the board from the licensure board(s) from which the applicant currently holds or has ever held a dental license; and
(I) Each application form and documentation must be completed within one (1) year from the date of submission to the board, including the taking and passing of the jurisprudence examination. If not completed within one (1) year, an application becomes invalid and a new application process must begin.

(3) Should an applicant fail a clinical competency examination twice, the board may require the applicant to complete remedial instruction in the deficient area(s) from an accredited dental school before further re-examination. If the applicant fails a third examination, the board may deny the application pursuant to section 332.321, RSMo.

Before entering a program of remedial instruction, the applicant shall—
(A) Have a statement sent to the board from the program director of the accredited dental school outlining the remedial instruction to be completed by the applicant and confirming the applicant’s acceptance into the program; and
(B) Receive board approval of the remedial instruction;
(C) Upon completion, have a written statement submitted to the board from the program director verifying the applicant’s successful completion of the remedial instruction.
(4) In order to receive a certificate of registration and license to practice, each applicant shall—

(A) Meet all licensure requirements as specified in sections (1), (2), and (3); and

(B) Submit the initial licensure fee as specified in 20 CSR 2110-2.170.


Missouri Dental Board v. Riney, 429 S.W.2d 803 (Mo. App. 1968). The board was without authority to adopt arbitrary rule in which application for specialist's certificate pursuant to statute, which became effective August 29, 1959, must be received by board prior to January 1, 1960.

Op. Atty. Gen. No. 150, Bild (10-6-76). A dentist in the state of Missouri under the provisions of section 332.131, RSMo, only if the school is certified by the American Dental Association.

20 CSR 2110-2.30 Licensure by Credentials—Dentists

PURPOSE: This rule outlines the procedure for licensing qualified dentists coming from other states by verification of professional credentials.

(1) To qualify for licensure as set out in section 332.211, RSMo, each applicant shall—

(A) Meet the requirements of section 332.211, RSMo; and

(B) Be a graduate of and hold a Doctor of Dental Surgery (DDS) degree or a Doctor of Dental Medicine (DMD) degree from an accredited dental school as defined in section 332.011, RSMo; and

(C) Have passed the National Board Examination in accordance with the criteria established by the sponsoring body, if a prerequisite to original licensure; and

(D) Have passed a state or regional entry-level competency examination (hereinafter referred to as a competency examination); and

(E) Hold a current and valid license to practice dentistry in another state for the five-(5)-year period immediately preceding application; and

(F) Hold a current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board. Board-approved courses shall meet the American Heart Association guidelines for cardiopulmonary resuscitation (CPR) and Emergency Cardiovascular Care (ECC) and provide written and manikin testing on the course material by an instructor who is physically present with the students. Online-only courses will not be accepted to satisfy the BLS requirement; and

(G) Have passed a written examination given by the board on the Missouri dental laws and rules (hereinafter referred to as the jurisprudence examination) with a grade of at least eighty percent (80%).

(2) To apply for a certificate of registration and license to practice, each applicant shall submit the following:

(A) A completed application form provided by the board; and

(B) A nonrefundable application fee payable to the Missouri Dental Board; and

(C) A two-inch by three-inch (2" x 3") photograph or passport photograph taken no more than six (6) months prior to the application date; and

(D) An official copy of his/her educational transcript from an accredited dental school as defined in section 332.011, RSMo. Transcripts must be sent directly to the board from the accredited dental school; and

(E) A copy of his/her current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board; and

(F) Certification of passage of the National Board Examination sent directly to the board from the sponsoring body; and

(G) A copy of his/her competency examination scores sent directly to the board from the testing agent(s); and

(H) A form provided by the board verifying licensure in other state(s). Verification forms must be sent directly to the board from the licensure board(s) from which the applicant currently holds or has ever held a dental license; and

(I) Each application must be completed within one (1) year from the date of submission to the board, including the taking and passing of the jurisprudence examination. If not completed within one (1) year, an application becomes invalid and a new application process must begin.

(3) The board may, in its discretion, require an applicant for licensure by credentials to take and successfully complete a competency examination, or any portion thereof deemed necessary by the board, as a prerequisite to licensure if the applicant’s licensure in any state was ever denied, revoked, or suspended for incompetency or inability to practice in a safe manner, or if the applicant has failed a competency examination given as a prerequisite to licensure as a dentist in any state.

(4) In order to receive a certificate of registration and license to practice, each applicant shall—

(A) Meet all licensure requirements as specified in sections (1), (2), and (3); and

(B) Submit the initial license fee as specified in 20 CSR 2110-2.170.


PURPOSE: This rule outlines the procedure for obtaining a dental hygiene license by examination.

1. Meet the requirements of section 332.231, RSMo; and
2. Have satisfactorily completed a course in dental hygiene in an accredited dental hygiene school and meet the other requirements of sections 332.231 and 332.251, RSMo; and
3. Have passed the National Board Examination in accordance with the criteria established by the sponsoring body; and
4. Have passed a written examination given by the board on the Missouri dental laws and rules (hereinafter referred to as the jurisprudence examination) with a grade of at least eighty percent (80%). In order to sit for the jurisprudence examination, the applicant must—

   (D) Have passed the National Board Examination, prepare to take the competency examination, and submit an application form for licensure to the board thirty (30) days prior to the jurisprudence examination; or
   (E) Have satisfactorily completed a course in dental hygiene in an accredited dental hygiene school and meet the other requirements of sections 332.231 and 332.251, RSMo; and
   (F) Have passed the National Board Examination in accordance with the criteria established by the sponsoring body; and

2. Have passed the competency examination within the previous five (5) years and have passed the National Board Examination, and submit an application form for licensure to the board. Applicants will be scheduled to take the jurisprudence examination at the board office, at the office of one (1) of the members of the board, or at such times deemed necessary by the board; and

   (E) Hold current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board; and
   (F) Certification of passage of the National Board Examination sent directly to the board from the sponsoring body; and
   (G) A copy of his/her competency examination scores sent directly to the board from the testing agent(s); and
   (H) A form provided by the board verifying licensure in other state(s), if applicable. Verification forms must be sent directly to the board from the licensure board(s) from which the applicant currently holds or has ever held a dental hygiene license; and

3. Should an applicant fail a clinical competency examination twice, the board may require the applicant to complete remedial instruction in the deficient area(s) from an accredited dental hygiene school before further re-examination. If the applicant fails a third examination, the board may deny the application pursuant to section 332.321.2(5), RSMo. Before entering a program of remedial instruction, the applicant shall—

   (A) Have a statement sent to the board from the program director of the accredited dental hygiene institution outlining the remedial instruction to be completed by the applicant and confirming the applicant’s acceptance into the program; and
   (B) Receive board approval of the remedial instruction; and
   (C) Upon completion, have a written statement submitted to the board from the program director verifying the applicant’s successful completion of the remedial instruction.

4. In order to receive a certificate of registration and license to practice, each applicant shall—

   (A) Meet all licensure requirements as specified in sections (1), (2), and (3); and
   (B) Submit the initial license fee as specified in 20 CSR 2110-2.170.
the two- (2-) year period immediately preceding application; and

(F) Hold a current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board. Board-approved courses shall meet the American Heart Association guidelines for cardiopulmonary resuscitation (CPR) and Emergency Cardiovascular Care (ECC) and provide written and manikin testing on the course material by an instructor who is physically present with the students. Online-only courses will not be accepted to satisfy the BLS requirement; and

(G) Have passed a written examination given by the board on the Missouri dental laws and rules (hereinafter referred to as the jurisprudence examination) with a grade of at least eighty percent (80%).

(2) To apply for a certificate of registration and a license to practice, each applicant shall submit the following:

(A) An application form provided by the board; and

(B) A nonrefundable application fee payable to the Missouri Dental Board; and

(C) A two-inch by three-inch (2” × 3”) photograph or passport photograph taken no more than six (6) months prior to the application date; and

(D) An official copy of his/her educational transcript from an accredited dental hygiene school; and

(E) A copy of his/her current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS) or an equivalent certification approved by the Missouri Dental Board; and

(F) Certification of passage of the National Board Examination sent directly to the board from the sponsoring body; and

(G) A copy of his/her competency examination scores sent directly to the board from the testing agent(s); and

(H) A form provided by the board verifying licensure in other state(s). Verification forms must be sent directly to the board from the licensure board(s) from which the applicant currently holds or has ever held a dental hygiene license; and

(I) Each application must be completed within one (1) year from the date of submission to the board, including the taking and passing of the jurisprudence examination. If not completed within one (1) year, an application becomes invalid and a new application process must begin.

(3) The board may, in its discretion, require an applicant for licensure by credentials to take and successfully complete a competency examination, or any portion thereof deemed necessary by the board, as a prerequisite to licensure if the applicant’s licensure in any state was ever denied, revoked, or suspended for incompetency or inability to practice in a safe manner, or if the applicant has failed a competency examination given as a prerequisite to licensure as a dental hygienist in any state.

(4) In order to receive a certificate of registration and a license to practice, each applicant shall—

(A) Meet all licensure requirements as specified in sections (1), (2) and (3); and

(B) Submit the initial license fee as specified in 20 CSR 2110-2.170.


20 CSR 2110-2.071 License Renewal—Dentists and Dental Hygienists

PURPOSE: This rule clarifies the license renewal requirements for dentists and dental hygienists pursuant to the passage of House Bill No. 970.

(1) Any person licensed to practice dentistry or dental hygiene shall renew that license every two (2) years. Every licensee shall provide the board a completed renewal application on a form prescribed by the board that shall contain updated information since the preceding renewal period.

(2) The two (2)-year license renewal period shall commence on December 1 and end on November 30. Applications for renewal shall be postmarked on or before the license expiration date, which is November 30 of each even-numbered year. Should November 30 fall on a Saturday, Sunday or legal holiday, renewal forms postmarked by the post office on the next business day will not be considered delinquent.

(3) Failure of the licensee to receive a renewal application shall not relieve the licensee of the obligation to renew the license and pay the required fee prior to the expiration date of the license. Deposit of the renewal fee by the board or the Division of Professional Registration does not indicate acceptance of the renewal application or that any licensing requirements have been fulfilled.

(4) Renewal, by statute, is contingent upon the licensee having successfully completed the mandatory hours of continuing education during the two (2)-year time block as specified in 20 CSR 2110-2.040.

(5) Renewal shall be contingent upon the licensee holding a current certification in basic life support (BLS) or advanced cardiac life support (ACLS), or certification equivalent to BLS or ACLS.

(6) Any dentist or dental hygienist newly licensed during the two (2)-year renewal period will be issued his/her initial license that will be valid until the end of that current renewal period. Newly licensed dentists and dental hygienists will be required to renew their license and pay the license renewal fee on or before the initial license expiration date to maintain the license in an active status. Continuing education requirements of new licensees are specified in 20 CSR 2110-2.240(2)(C) and (D).

(7) Licensees will receive one (1) renewal license and, if requested, up to two (2) duplicate renewal licenses upon approval of the application for renewal. Additional duplicate licenses will be provided upon payment of the appropriate fee as specified in 20 CSR 2110-2.170.

(8) The license of any dentist or dental hygienist shall expire if not renewed on or before the license expiration date. An expired license can be renewed at any time within four (4) years of the license expiration date by submission of a properly completed renewal application form, payment of the renewal fee and renewal penalty fee as specified in 20
CSR 2110-2.170(1)(C), and by providing the board with proof of having successfully completed the mandatory continuing education hours.

(9) In the first two (2)-year renewal cycle following the license expiration date of a dentist or dental hygienist, the mandatory continuing education hours shall be fifty (50) for dentists and thirty (30) for dental hygienists. In the second two (2)-year renewal cycle following the license expiration date, the mandatory continuing education hours shall be one hundred (100) for dentists and sixty (60) for dental hygienists. Continuing education hours earned for renewal of an expired license may be earned at any time during a four (4)-year period prior to the renewal application date. The board will not accept continuing education hours that were earned by the dentist or dental hygienist during that four (4)-year period if those same hours were used to renew a prior license.

(10) Any licensee who fails to renew his/her license on or before the license expiration date shall not perform any act for which a license is required unless and until the license is properly renewed.


20 CSR 2110-2.085 Definitions of Dental Specialties
(Rescinded May 30, 2018)


20 CSR 2110-2.090 Certification of Dental Specialists

PURPOSE: This rule identifies specialities recognized by the Missouri Dental Board and the requirements and procedures applicants must fulfill prior to being certified as a dental specialist.

(1) In order to qualify for certification as a specialist in endodontics, oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, prosthodontics, public health, or any other area of specialty recognized by the American Dental Association, the applicant shall submit to the board the appropriate application fee, submit a completed application form as defined in section (2) of this rule, and fulfill the following requirements:

(A) Is a currently licensed dentist in Missouri; and
(B) Is a current diplomate of an American specialty board recognized by the American Dental Association; or
(C) Is a graduate of an accredited specialty training program accredited by the Council on Dental Accreditation.

(2) To apply for a specialty certificate, each applicant shall submit the following:

(A) A completed application form provided by the board;
(B) A nonrefundable application fee as specified in 20 CSR 2110-2.170 payable to the Missouri Dental Board;
(C) A two-inch by three-inch (2" × 3") photograph or passport photograph taken no more than six (6) months prior to the application date;
(D) An official copy of his/her educational transcript from the accredited specialty training program. Transcripts must be sent directly to the board from the accredited specialty training program, if applicable;
(E) Written verification of diplomate status sent directly from his/her American specialty board, if applicable; and
(F) Each application must be completed within one (1) year from the date of submission to the board. If not completed, the application becomes invalid and a new application process must begin.


20 CSR 2110-2.110 Addressing the Public—Dentists
(Rescinded July 30, 2018)


20 CSR 2110-2.111 Addressing the Public—Dental Hygienists
(Rescinded July 30, 2018)


20 CSR 2110-2.114 Patient Abandonment

PURPOSE: This rule defines the duty of a dentist to active patients when s/he moves his/her practice to a location inconvenient to his/her active patients.

(1) Any duly registered and currently licensed dentist in Missouri who moves his/her practice to a location which is inconvenient to his/her
active patients or who ceases to practice dentistry or who shares a fee in any patient whose treating dentist moves to an inconvenient location or ceases to practice dentistry, upon request of that patient, or the person responsible for payment for that patient, shall refund an appropriate portion of the fee received for an unfinished treatment or make arrangements for the treatment to be completed by a dentist acceptable to the patient for no additional fee. Active patients are those who have received care and/or treatment within the previous twelve (12) months.

(2) Upon the relocation or cessation of practice described in section (1) of this rule, the treating dentist, within thirty (30) days, shall notify in writing all his/her active patients with unfinished services or treatments of their rights under section (1) of this rule. Dentists who share in the fee of any patient affected by this rule also shall notify the patient of his/her rights. This notification may be made together with the treating dentist in one (1) notice.

(3) Failure to comply with the provisions of this rule will subject the holder of a certificate of registration and license to practice dentistry in this state to disciplinary action in accordance with section 332.321.2(5), (6) and (13), RSMo.

(4) The provisions of this rule are declared severable. If any provision of this rule is held invalid by a court of competent jurisdiction, the remaining provisions of this rule shall remain in full force and effect, unless otherwise determined by a court of competent jurisdiction to be invalid.

AUTHORITY: section 332.031, RSMo 2000.*
This rule originally filed as 4 CSR 110-2.114.


20 CSR 2110-2.120 Dental Assistants

PURPOSE: This rule expands the functions a dental assistant may perform under the dentist’s direct supervision and outlines the procedure for issuing and renewing expanded function permits.

(1) Definitions.
(A) Accredited dental assisting program—A dental assisting educational program accredited by the Commission on Dental Accreditation of the American Dental Association.

(B) Certified dental assistant—A dental assistant who is currently certified by the Dental Assisting National Board, Inc.

(C) Dental assistant—An employee of a duly registered and currently licensed dentist in Missouri, other than either a dental hygienist or a certified dental assistant.

(D) Dental auxiliary—Either a dental assistant or certified dental assistant as defined in subsections (1)(B) and (C).

(E) Direct supervision—The following conditions must be satisfied for direct supervision to apply:
1. The dentist is in the dental office or treatment facility;
2. The dentist has personally diagnosed the condition to be treated;
3. The dentist has personally authorized the procedures;
4. The dentist remains in the dental office or treatment facility while the procedures are being performed by the dental auxiliary; and
5. The dentist evaluates the performance of the dental auxiliary before the dismissal of the patient.

(F) Expanded functions approved course provider—A provider of expanded functions curriculum and competency testing approved by the Missouri Dental Board.

(G) Expanded functions permit—A permit issued by the Missouri Dental Board authorizing a dental assistant, certified dental assistant, or Missouri licensed dental hygienist to perform expanded functions duties upon delegation from a Missouri licensed dentist. Expanded functions permits will be issued in the following categories: restorative I, restorative II, removable prosthetics, fixed prosthetics, and orthodontics.

(H) Missouri Test of Basic Dental Assisting Skills—A test of basic knowledge of dental assisting approved by the board including terminology, principles of asepsis, disinfection and sterilization, and other concepts of dental assisting deemed necessary to master courses in more advanced assisting functions.

(I) Proof of competence—Documentation, such as a diploma, a certificate of mastery, or a letter from an approved course provider or competency testing agent stating that the dental auxiliary has successfully completed a board-approved course of training and competency testing of that training.

(2) Prohibited Acts.
(A) A registered and currently licensed dentist may not delegate to a dental assistant or certified dental assistant, as defined in subsections (1)(B) and (C) respectively, the performance of the following procedures:
1. Diagnosis, including interpretation of dental radiographs and treatment planning;
2. Cutting of tooth structure;
3. Surgical procedures on hard and soft tissues including, but not limited to, the removal of teeth and the cutting and suturing of soft tissues;
4. The prescription, injection, and parenteral administration of drugs.
5. The final bending of arch wire prior to ligation;
6. The scaling of teeth; and
7. Administration of nitrous oxide-oxygen analgesia except that a dental assistant or certified dental assistant may assist in the administration of and monitor nitrous oxide-oxygen analgesia with specific training as provided in section (3) of this rule.

(3) Permitted Acts.
(A) A dental assistant or certified dental assistant may assist in the administration of and monitor nitrous oxide analgesia under direct supervision if s/he:
1. Has successfully completed formal certified training in a course approved by the Missouri Dental Board; and
2. Has successfully passed an approved competency test regarding the clinical and didactic training; or
3. Has been certified in another state to assist in the administration of and monitor nitrous oxide subsequent to equivalent training and testing. The dental assistant may qualify to perform these functions by presenting proof of competence of this equivalent training and testing to the Missouri Dental Board.

(4) Expanded Functions Permits.
(A) Effective December 1, 2012, a currently licensed dentist may delegate, under direct supervision, functions listed in subsection (4)(H) of this rule to a dental assistant possessing a board-issued permit authorizing the dental assistant to perform expanded functions duties. To qualify for a board-issued permit to perform expanded functions duties, the dental assistant must provide the board with the following:
1. Proof of certification as a certified dental assistant from the Dental Assisting National Board and proof of competence as defined in subsection (1)(I) showing graduation from an accredited dental assisting program in which competency testing in the appropriate expanded functions category was completed; or
2. Proof of certification as a certified dental assistant from the Dental Assisting National Board and proof of competence as defined in subsection (1)(I) showing the dental...
assistant has completed a board-approved expanded functions training course; or

3. Proof of competence as defined in subsection (1)(I) showing that the dental assistant has passed the board’s Missouri Test of Basic Dental Assisting Skills and that the dental assistant has completed a board-approved expanded functions training course; and

4. Evidence of current certification in the American Heart Association’s Basic Life Support for the Healthcare Provider (BLS), or an equivalent certification approved by the Missouri Dental Board. Board-approved courses shall meet the American Heart Association guidelines for cardiopulmonary resuscitation (CPR) and emergency cardiovascular care (ECC) and provide written and manikin testing on the course material by an instructor who is physically present with the students. Online only courses will not be accepted to satisfy the BLS requirement.

(B) The board shall issue the appropriate expanded functions permit upon receipt of a completed application form, payment of the appropriate fee specified in 20 CSR 2110-2.170, and proof of competence as defined in subsection (1)(I) that the dental assistant has complied with the requirements of subsection (4)(A) of this rule. The requirements of this section must be completed within one (1) year of the date of submission of the application form. The board-issued expanded functions permit must be displayed in plain view in any facility where the dental assistant will be providing expanded functions prior to delegation of expanded functions to that dental assistant.

(C) Any dental assistant or certified dental assistant to whom a dentist could legally delegate expanded functions duties prior to December 1, 2012, or any dental assistant or certified dental assistant who meets the qualifications for a board-issued expanded functions permit prior to December 1, 2012, may submit their proof of competence to the Missouri Dental Board. Board-approved courses shall meet the American Heart Association guidelines for cardiopulmonary resuscitation (CPR) and emergency cardiovascular care (ECC) and provide written and manikin testing on the course material by an instructor who is physically present with the students. Online only courses will not be accepted to satisfy the BLS requirement.

(E) An expanded functions permit shall expire if not renewed on or before the permit expiration date. An expired permit can be renewed at any time within one (1) year of the permit expiration date. Any expired expanded functions permit that is not renewed within one (1) year of the expiration date shall be void.

(5) Categories.

(A) Functions delegable to a dental assistant possessing a board-issued permit to perform expanded functions are divided into five (5) categories: restorative I, restorative II, removable prosthodontics, fixed prosthodontics, and orthodontics and are listed below by category.

1. Restorative I—
   A. Sizing and cementing of prefabricated crowns;
   B. Placing, condensing, and carving amalgam for Class I, V, and VI restorations;
   C. Placing composite for Class I, V, and VI restorations; and
   D. Minor palliative care of dental emergencies (place sedative filling).

2. Restorative II—
   A. Sizing and cementing of prefabricated crowns;
   B. Placing, condensing, carving, and finishing amalgam for Class I, II, III, IV, V, and VI restorations;

3. Orthodontics—
   A. Preliminary bending of archwires;
   B. Removal of orthodontic bands and bonds;
   C. Final cementation of any permanent appliance or prosthesis;
   D. Making impressions for the fabrication of any removable or fixed prosthesis/appliance; and
   E. Placement and cementation of orthodontic brackets and/or bands.

4. Prosthodontics—Fixed—
   A. Place retraction cord in preparation for fixed prosthodontic impressions;
   B. Extra-oral adjustments of fixed prosthesis;
   C. Extra-oral adjustments of removable prosthodontic impressions during and after fabrication;
   D. Final cementation of any permanent appliance or prosthesis; and
   E. Making impressions for the fabrication of any removable or fixed prosthesis/appliance.

5. Prosthodontics—Removable—
   A. Placement of temporary soft liners in a removable prosthesis;
   B. Extra-oral adjustments of removable prosthodontic impressions during and after fabrication;
   C. Minor palliative care of dental emergencies (place sedative filling); and
   D. Making impressions for the fabrication of any removable or fixed prosthodontic appliance.

(6) Expanded Functions Course Providers.

(A) The board may approve expanded functions course providers that satisfy the following minimum criteria:

1. Uses course curriculum approved by the board;

2. Demonstrates that faculty at each course include at least one (1) dentist and that the student to faculty ratio do not exceed one (1) faculty member per ten (10) students;

3. Demonstrates that adequate faculty calibration occurs to insure that educational standards are maintained;

4. Demonstrates that adequate testing, monitoring, and evaluation is in place to assure that graduates can be certified as having attained mastery of the component skills and concepts in a laboratory setting; and

5. Demonstrates that mechanisms are in place to provide the board with data on the outcomes of expanded functions duty dental assisting training by reporting on follow-up blind surveys of certificated assistants, supervising dentists, and patients.
(7) Delegated Acts.

(A) A currently licensed dentist may delegate under direct supervision to a dental assistant or certified dental assistant any functions not specifically referenced in sections (2)–(4) of this rule and not considered either the practice of dentistry or the practice of dental hygiene as defined in sections 332.071, 332.091, RSMo, and 4 CSR 110-2.120.

(B) The licensed dentist is responsible for determining the appropriateness of delegation of any specific functions based upon knowledge of the skills of the auxiliary, the needs of the patient, the requirements of the task, and whether proof of the competence is required.

(C) Pursuant to section 332.031.2., RSMo, the licensed dentist is ultimately responsible for patient care. Nothing contained in the authority given the licensed dentist by this rule to delegate the performance of certain procedures shall in any way relieve the supervising licensed dentist from liability to the patient for negligent performance by a dental assistant or certified dental assistant.

Expanded functions permits shall be subject to discipline as provided in section 332.321, RSMo.


20 CSR 2110-2.130 Dental Hygienists

PURPOSE: This rule specifies the level of supervision for and the procedures that a dentist may and may not delegate to a hygienist.

(1) A hygienist may be employed by any person or entity so long as the hygienist is working under the supervision of a dentist as set forth in section 332.311, RSMo, and does not engage in the practice of dentistry as set forth in section 332.071, RSMo.

(2) The dentist is responsible for patient care. Nothing contained in the authority given the dentist by this rule to delegate the performance of certain procedures shall relieve the dentist from responsibility to the patient.

(3) A hygienist may perform the following procedures under general supervision:

(A) Scaling and polishing teeth (prophylaxis);

(B) Applying dental sealants;

(C) Periodontal root planing, debridement, and curettage;

(D) Nonsurgical periodontal procedures;

(E) All procedures delegable to a dental assistant or certified dental assistant, except the expanded functions in section (5) of this rule.

(4) A hygienist may perform the following procedures under indirect supervision:

(A) Administering nitrous oxide analgesia, as outlined in section (8) of this rule;

(B) Administering local anesthesia, as outlined in sections (9) and (10) of this rule;

(C) Procedures deemed appropriate by a dentist as outlined in section 332.091, RSMo; and

(D) All procedures allowed under general supervision as outlined in section (3) of this rule.

(5) A hygienist may perform the following procedures under direct supervision:

(A) All procedures allowed under general supervision and indirect supervision as outlined in sections (3) and (4) of this rule; and

(B) Expanded functions in 20 CSR 2110-2.120 after receiving a permit to perform expanded functions duties issued by the Missouri Dental Board. Neither a Missouri basic dental assistant or certified dental assistant may perform expanded functions where the dental hygienist will be providing expanded functions prior to delegation of expanded functions to that dental hygienist. Dental hygienists shall renew expanded functions permits in accordance with the requirements in 20 CSR 2110-2.120. A licensed dental hygienist may use continuing education hours obtained for license renewal to renew an expanded functions permit.

(6) A hygienist may not perform procedures considered the practice of dentistry as set forth in section 332.071, RSMo, including, but not limited to, the following:

(A) Diagnosis, including the interpretation of dental radiographs and treatment planning;

(B) Cutting of tooth structure;

(C) Surgical procedures on hard and soft tissues including, but not limited to, the removal of teeth and the cutting and suturing of soft tissues;

(D) Prescription, injection, and parenteral administration of drugs, with the exception of the administration of nitrous oxide analgesia or local anesthesia as outlined in sections (8), (9), and (10) of this rule; and

(E) Final bending of an archwire prior to ligation.

(7) A hygienist may provide oral hygiene instructions, conduct oral screenings, and apply fluoride without a dentist being present. The hygienist shall refer the individual screened to a dentist for diagnosis.

(8) A hygienist may administer nitrous oxide analgesia if s/he:

(A) Obtains proof of competency in a nitrous oxide analgesia course; and

(B) Obtains a nitrous oxide analgesia permit, issued by the board, upon submitting the following:

1. A completed application form provided by the board; and

2. A nonrefundable fee, payable to the Missouri Dental Board; and

3. A copy of proof of competency.

(9) A hygienist may administer local anesthesia, which includes infiltration and block anesthesia, if s/he:

(A) Obtains proof of competency in a local anesthesia course or holds a Missouri Dental Board infiltration anesthesia permit issued prior to the effective date of this rule and obtains proof of competency in a local anesthesia course which includes block anesthesia; and

(B) Receives a local anesthesia permit, issued by the board, upon submitting the following:

1. A completed application form provided by the board; and

2. A nonrefundable fee, payable to the Missouri Dental Board; and

3. A copy of proof of competency.

(10) A hygienist may administer only infiltration anesthesia if s/he currently holds a Missouri Dental Board infiltration anesthesia permit issued prior to the effective date of this rule.
(11) For purposes of this rule, proof of competency means documentation verifying completion of didactic and clinical training and passage of competency testing of that training from a dental, dental hygiene, or dental assisting school accredited by the Commission on Dental Accreditation of the American Dental Association or other training courses approved by the Missouri Dental Board.

(12) The provisions of this rule are declared severable. If a court of competent jurisdiction holds any provision of this rule invalid, the remaining provisions of this rule shall remain in full force and effect, unless otherwise determined by a court of competent jurisdiction.


20 CSR 2110-2.131 Definition of a Public Health Setting

PURPOSE: The purpose of this rule is to implement section 332.311, RSMo as amended by HB567 of the 91st General Assembly and defines the public health settings in which a dental hygienist may practice without the supervision of a dentist.

(1) For the purposes of section 332.311, RSMo only, the term “public health setting” shall be defined as a location where dental services authorized by section 332.311, RSMo are performed so long as the delivery of services are sponsored by a governmental health entity which includes:

(A) Department of Health and Senior Services;
(B) A county health department;
(C) A city health department operating under a city charter;
(D) A combined city/county health department;
(E) A nonprofit community health center qualified as exempt from federal taxation under section 501(c)(3) of the Internal Revenue Code including a community health center that receives funding authorized by sections 329, 330, and 340 of the United States Public Health Services Act.


20 CSR 2110-2.132 Dental Hygienists—Equipment Requirements for Public Health Settings

(Rescinded May 30, 2018)


20 CSR 2110-2.140 Notice, Change of Employment—Dental Hygienists

(Rescinded July 30, 2018)


20 CSR 2110-2.150 Dental Practices

(Rescinded July 30, 2018)


20 CSR 2110-2.160 Post-Board Order Activity

PURPOSE: This rule outlines activity subsequent to disciplinary actions issued against license holders by the Missouri Dental Board.

(1) The Missouri Dental Board shall publish or cause to be published all suspensions, revocations, certificates of registration, licenses, or both, including the name of the licensee, the certificate number, the terms of suspension and a summary of the Findings of Fact and Conclusions of Law of the Administrative Hearing Commission, in any professional journal read by licensed dentists practicing in Missouri, or in any newspaper of general circulation, or both.

(2) The Missouri Dental Board shall publize the terms of probationary agreements, including the name of the licensee, the certificate number and a summary of the complaint, in any professional journal read by licensed dentists practicing in Missouri or in any newspaper of general circulation.

(3) Any licensee whose certificate of registration, license to practice dentistry, or both, has been revoked or suspended shall—

(A) Surrender his/her certificate of registration, license, or both, to the Missouri Dental Board. When a suspension is ordered, the certificate, license, or both, shall be held by the Missouri Dental Board for the duration of the suspension period;

(B) Refrain from misrepresenting the status of his/her license to practice dentistry to any patient or to the general public;

(C) Refrain from maintaining a physical presence in any office organized to practice dentistry in Missouri during the period of the suspension;

(D) Be prohibited from receiving any compensation from any person, group practice, partnership or corporate practice or any dental office in this state during the period of suspension or revocation. This subsection shall not be intended to include any fees received by a licensee to which s/he is entitled which are for services performed prior to the effective date of his/her suspension or revocation but which are received during this period; and
(E) Not accept fees, during a period of licensees’ period of suspension, from any capitation or third-party payment program to which s/he might otherwise be entitled. This subsection shall not include these fees received by the licensee for a period of time prior to the effective date of his/her suspension.

(4) Any licensee whose certificate of registration, license to practice dentistry in Missouri, or both, has been revoked or suspended for a period of one (1) year or more in length shall—

(A) Notify regular patients of the suspension or revocation by mail within one (1) month after the effective date of the suspension or revocation;

(B) Remove any telephone listings identifying him/her as one licensed to practice dentistry in Missouri;

(C) Remove his/her name from any sign, door, stationery or advertising material identifying him/her as one licensed to practice dentistry in Missouri; and

(D) Refrain from addressing the public in any manner which may suggest that s/he is licensed to practice dentistry in Missouri.

(5) The Missouri Dental Board may impose any other reasonable and nonarbitrary requirement which, in its discretion, it may deem necessary to enforce an order of suspension or revocation.

(6) Any violation of a suspension order or a post-order requirement shall constitute grounds for the Missouri Dental Board to impose a further suspension or to revoke the licensee’s certificate of registration, license to practice dentistry, or both.

(7) Any violation of a probationary agreement shall constitute grounds for the Missouri Dental Board to impose a further period of probation, a period of suspension or to revoke the licensee’s certificate of registration, license to practice dentistry, or both.

(8) If at any time when any disciplinary sanctions have been imposed under section 332.321, RSMo or under any provision the licensee removes him/herself from Missouri, ceases to be currently licensed under the provisions of section 332.321, RSMo or fails to keep the Missouri Dental Board advised of his/her current place of business and residence, the time of his/her absence, unlicensed status or unknown whereabouts shall not be deemed or taken as any part of the time of discipline so imposed.

AUTHORITY: section 332.031, RSMo 1986. * This rule originally filed as 4 CSR 110-2.160.


20 CSR 2110-2.161 Post-Board Order Hearing Procedures
(Rescinded February 29, 2008)


20 CSR 2110-2.162 Impaired Practitioner Procedures
(Rescinded February 29, 2008)


20 CSR 2110-2.170 Fees

PURPOSE: This rule establishes the various fees authorized by Chapter 332, RSMo.

(1) The following fees are established by the Missouri Dental Board:

(A) Application Fees*

1. Dentist (includes initial Missouri jurisprudence exam fee) $230
2. Dental Specialist $330
3. Dental Hygienist (includes initial Missouri jurisprudence exam fee) $155
4. Limited Teaching License $230

(B) Reexamination Fees

1. Dentist Jurisprudence Examination $100
2. Dental Hygienist Jurisprudence Examination $ 50

(C) Biennial License Renewal Fee

1. Dentist License $150
2. Dental Specialist License $150
3. Dental Hygienist License $ 60
4. Limited Teaching License $250

(D) Renewal Penalty Fee—Dentist/Dental Hygienist $100

*Certification/Permit Fees

1. Dentists

A. Deep Sedation/General Anesthesia
   (I) Individual Permit Fee $100
   (II) Site Certificate Permit Fee $100
   (III) Individual Permit Renewal Fee $100
   (IV) Site Certificate Renewal Fee $100

2. Dental Hygienists

   A. Administration of Nitrous Oxide Analgesia $ 10
   B. Local Anesthesia $ 10
   C. Expanded Functions
      (I) Restorative I Permit Fee $ 10
      (II) Restorative II Permit Fee $ 10
      (III) Removable Prosthodontics Permit Fee $ 10
      (IV) Fixed Prosthodontics Permit Fee $ 10
      (V) Orthodontics Permit Fee $ 10

3. Dental Assistants

   A. Monitoring Nitrous Oxide Analgesia $ 10
   B. Expanded Functions Permit
      (I) Restorative I Permit Fee $ 10
      (II) Restorative II Permit Fee $ 10
      (III) Removable Prosthodontics Permit Fee $ 10
      (IV) Fixed Prosthodontics Permit Fee $ 10
      (V) Orthodontics Permit Fee $ 10

4. Miscellaneous Fees

   A. Corporation Name Approval $ 15
   B. Verification of Licensure—Dentist/Dental Specialist/Dental Hygienist $ 20
   C. Duplicate Original Certificate $ 50
   D. Duplicate Renewal License (over two (2) per duplicate) $ 5
   E. Uncollected Fee (for any uncollectible check or other uncollectible financial instrument) $ 25
20 CSR 2110-2.175 Name and Address

PURPOSE: This rule requires licensees to inform the Missouri Dental Board of any name or address changes.

Licensees shall keep the board informed of their legal name, mailing address and telephone number. Any change shall be reported to the board in writing within thirty (30) days.


20 CSR 2110-2.190 Shade Verification

PURPOSE: This rule outlines the procedures to be followed for shade verification of dental prostheses.

(1) A duly registered and currently licensed dentist in Missouri may prescribe that a dental laboratory technologist may verify the shade of any dental prosthesis, provided that the technologist receives a uniform laboratory work order completed by the dentist. The use of this rule by the dentist, or a dental technologist, shall be limited to those circumstances where other verification has shown to be impracticable or unsuccessful.

(2) The executed work order shall be retained by the nondentist for seven (7) years from the date appearing on the order. A copy of the work order shall be retained by the dentist for seven (7) years from the date appearing on the order or the date of prescription.

(3) The Missouri Dental Board shall prescribe or approve of the form to be used.


20 CSR 2110-2.200 Uniform Complaint Handling

PURPOSE: This rule establishes a procedure for the receipt, handling and disposition of public complaints to the Missouri Dental Board.

(1) Any person or other entity who believes that a registered and licensed dentist or a registered and licensed dental hygienist or unlicensed individual has so acted or failed to act that his/her Certificate of Registration or License, or both, under the provisions of Chapter 332, RSMo, should be suspended, revoked or other action taken against him/her, or who believes that any applicant for a Certificate of Registration or License to Practice Dentistry or to practice as a dental hygienist is not entitled under provisions of Chapter 332, RSMo may file a complaint with the executive director of the board.

(2) All complaints, other than those provided for in section 332.341.5, RSMo, shall be in writing, fully shall specify the nature of the complaint and shall be signed by the complainant and contain the name and address of the complainant. Written but unsigned communications will not be considered or processed as a complaint. Complaints are to be addressed to the following: Executive Director, Missouri Dental Board, PO Box 1367, Jefferson City, MO 65102.

(3) Each complaint received under this rule shall be logged in a book maintained by the board for that purpose. Complaints shall be logged in consecutive order as received. The log book shall contain a record of each complainant’s name and address; the name and address of the subject of the complaint; the date each complaint was received by the board; a brief statement of the acts complained of, including the name of any person injured or victimized by the alleged acts or practices; and a notation indicating whether the complaint resulted in its dismissal by the board, whether formal charges have been filed with the Administrative Hearing Commission or the ultimate disposition of the complaint.

(4) Each complaint made in accordance with this rule shall be acknowledged in writing and may be investigated by the board. If a complaint is investigated, the complainant shall be informed in writing after the investigation is completed as to whether the investigation resulted in the dismissal of the complaint by the board, whether formal charges have been filed with the Administrative Hearing Commission or the ultimate disposition of the complaint.

(5) Nothing in this rule shall be construed so as to prevent the board on its own initiative from instituting and conducting investigations or from conducting investigations of an individual beyond the scope of a formal complaint and based on that complaint to make written complaints to the Administrative Hearing Commission.

(6) Any complaint, investigation or log book shall be deemed a closed record under the provisions of section 610.025, RSMo.
The appeal and all information pertaining to Board for access to the records requested. The individual requesting the records that s/he records, the custodian shall also inform the evidence or documentation of that denial made cannot be made, specifying in particular what shall inform the individual or entity making vision of Chapter 610, RSMo, the custodian that this access is not required under the pro-

(3) When a request for access to public records is made and the individual investigating the records requests copies of the records, the board may charge a reasonable fee for the cost for inspecting and copying the records. The fee charged by the board shall be as follows:

(A) A fee for copying public records shall not exceed the actual cost of the document search and duplication;
(B) The board may require payment for these fees prior to making the copies; and
(C) All fees collected shall be remitted to the director of revenue for deposit to the Missouri Dental Board Fund.


(4) The custodian shall maintain a file which will contain copies of all written requests for access to records and responses to these requests. The requests shall be maintained on file with the board for a period of one (1) year and will be maintained as a public record of the board open for inspection by any member of the general public during regular business hours.

(5) Whenever a request for inspection of public records is made and the individual inspecting the records requests copies of the records, the board may charge a reasonable fee for the cost for inspecting and copying the records. The fee charged by the board shall be as follows:

(A) A fee for copying public records shall not exceed the actual cost of the document search and duplication;
(B) The board may require payment for these fees prior to making the copies; and
(C) All fees collected shall be remitted to the director of revenue for deposit to the Missouri Dental Board Fund.


(1) A dentist who practices in this state shall submit a report to the board within thirty (30) days of any mortality or any injury requiring medical attention and/or treatment from a licensed healthcare provider which occurs to a patient during treatment or within twenty-four (24) hours of receiving treatment from the dentist that resulted in mortality or injury.

(2) The report shall include detailed responses to the following:
(A) Description of dental procedure;
(B) Description of pre-operative physical condition of patient;
(C) List of drugs, dosage, and route of administration;
(D) Description of adverse occurrence which shall include:
1. Onset and type of signs and symptoms;
2. Treatment instituted;
3. Response to treatment; and
(E) Description of the patient’s present condition following medical intervention.

(3) The report required by this rule shall be submitted on a form obtained from the Missouri Dental Board by the treating dentist.


20 CSR 2110-2.220 Mandatory Reporting
(Rescinded May 30, 2018)


(1) Definitions.

20 CSR 2110-2.240 Continuing Dental Education

PURPOSE: This rule details the board’s minimum requirements for continuing dental education for dentists and dental hygienists.

(1) Definitions.
(A) Continuing dental education—Instruction for dentists and dental hygienists directly relating to the practice of dentistry and dental hygiene as defined in sections 332.071 and 332.091, RSMo.

(B) Time block—A two (2) year period with starting dates of December 1, 2002, through November 30, 2004; December 1, 2004, through November 30, 2006; and repeating in this sequence from that date.

(C) Board-approved sponsors are—
1. American Dental Association (ADA) and its constituent and component societies;
2. Academy of General Dentistry (AGD) and its state and local affiliates;
3. ADA recognized dental specialty organizations and their state and local affiliates;
4. National Dental Association and its state and local affiliates;
5. American Dental Hygienists’ Association and its constituents and component societies;
6. National Dental Hygienists’ Association and its state and local affiliates;
7. American Medical Association and American Osteopathic Association and their respective state and local societies;
8. American Nurses Association and its state and local affiliates;
9. ADA Commission on Dental Accreditation approved dental, dental hygiene, and dental assisting schools;
10. ADA continuing education recognition program;
11. AGD national sponsor approved program;
12. Federal and state government agencies, including any of the branches of the military;
13. Hospitals accredited by the Joint Commission on Accreditation of Healthcare Organizations;
14. Missouri Public Health Association;
15. American Red Cross;
16. American Heart Association;
17. Central Regional Dental Testing Service, Inc. (CRDTS);
18. Dental Assisting National Board, Inc. (DANB);
19. American Dental Assistants Association and its constituents and component societies; and
20. Any other sponsor approved by the board pursuant to subsection (2)(B).

(D) Original licensee—One who obtains licensure by examination in accordance with sections 332.181 and 332.251, RSMo.

(E) Credential licensee—One who obtains licensure without examination in accordance with sections 332.211 and 332.281, RSMo respectively.

(F) Instructor—One who holds a license to practice and who is a full- or part-time faculty member in a dental or dental hygiene, or both, school or program accredited by the ADA Commission on Dental Accreditation.

(G) Resident or Fellow—One who obtains a license to practice during the time block and who participated in a post-graduate program accredited by the ADA Commission on Dental Accreditation.

(H) Diplomate status—One who holds a license to practice and during the time block has obtained diplomate status in an ADA recognized specialty.

(I) Retired licensee—One who neither engages in the active practice of dentistry or dental hygiene nor holds him/herself out as actively practicing as provided in sections 332.071 and 332.091, RSMo.

(2) In order to renew a license, each dentist shall submit satisfactory evidence of completion of fifty (50) hours of continuing education during the two (2) year period immediately preceding the renewal period, and each dental hygienist shall submit satisfactory evidence of completion of thirty (30) hours of continuing education during the two (2) year period immediately preceding the renewal period. Any hours acquired beyond the required number may be carried forward into the next time block not to exceed twenty-five (25) hours for dentists and fifteen (15) hours for dental hygienists. Of the fifty (50) hours required for dentists, not less than forty (40) must be hours directly related to the updating and maintaining of knowledge and skills in the treatment, health, and safety of the individual dental patient. Of the thirty (30) hours required for dental hygienists, not less than twenty-five (25) must be hours directly related to the updating and maintaining of knowledge and skills in the treatment, health, and safety of the individual dental patient. One (1) hour of continuing education shall be granted for every fifty to sixty (50–60) minutes of contact (either academic or clinical) instruction.

(A) For the licensure renewal form due November 30, 2004, and each subsequent renewal period after that, the licensee shall report the number of hours obtained for the two (2)-year period just completed and shall attest to those hours by signing the form. Each licensee shall retain records documenting his/her completion of the required hours of continuing education for a minimum of six (6) years after the reporting period in which the continuing education was completed. The records shall document the licensee’s attendance at the continuing education course including, but not limited to, retaining the titles of the courses taken, dates, locations, receipts, course sponsors, agendas, and number of hours earned. The board may conduct an audit of licensees to verify compliance with the continuing education requirement. Licensees shall assist the board in its audit by providing timely and complete responses to the board’s inquiries.

(B) The continuing dental education hours obtained shall be from a board-approved sponsor. Any entity not listed under subsection (1)(C) may become a board-approved sponsor for a specified program(s) by obtaining approval through a sponsor recognized by this rule. Programs which applied for approval and were not granted approval by a board-approved sponsor may appear in person before the board with a request for approval at a regularly scheduled meeting. The board shall review the request and issue a decision in writing within a reasonable time frame.

(C) A credential dental licensee will only be required to obtain twenty-five (25) hours of continuing education in order to renew if the individual became licensed during the second year of the time block. A credential hygiene licensee will only be required to obtain fifteen (15) hours of continuing education in order to renew if the individual became licensed during the second year of the time block.

(D) Individuals who obtain a license by competency examination shall be exempt from the continuing education requirement for the remainder of the time block in which s/he became licensed.

(E) Licensees who are engaged as full-time instructors will receive ten (10) continuing education hours per year. Licensees who are engaged as part-time instructors will receive five (5) continuing education hours per year.

(F) Licensees who give presentations through a board-approved sponsor relating to dentistry will receive two (2) continuing education hours for each hour of the original presentation and an hour-for-hour credit for subsequent presentation of the same material up to sixteen (16) hours per year.

(G) Residents or fellows are exempt from the continuing education requirement through the end of the time block containing the date of graduation.

(H) A dental licensee who has obtained diplomate status through the ADA-recognized specialty board certification during the reporting period shall be deemed to have obtained fifty (50) hours of continuing education. The licensee shall provide the board with documentation evidencing the specialty board certification upon request.

(I) Licensees who attend the open session of the Missouri Dental Board’s quarterly meetings or an open meeting of the Advisory Commission for Dental Hygienists will
receive two (2) hours of continuing education credit per meeting. To qualify, licensees must sign in at the beginning of the open meeting and sign out at the end of the open meeting. These continuing education credits do not qualify as directly related to the updating and maintaining of knowledge and skills in the treatment, health, and safety of the individual dental patient.

(3) The board, solely in its discretion, may grant a waiver or an extension to a licensee who cannot complete the required hours of continuing education because of personal illness, military service, foreign residency, or other circumstances beyond the licensee’s control. The licensee may apply for a waiver or an extension of time to complete the continuing education requirements by making a written application at least forty-five (45) days before the end of the renewal period. Any licensee seeking a waiver or extension shall provide full and complete written documentation explaining specifically and in detail the nature of the circumstances, why the circumstances were unforeseeable and beyond the licensee’s control, the period during which the circumstances were in existence, the number of continuing education hours earned in the reporting period, and the licensee’s plan for completing the balance of the requirements if an extension is granted. The board, in its discretion, shall establish the length of extension granted, not to exceed the next renewal period.

(4) Licensees whose license has expired shall comply with the continuing education requirements as established in 20 CSR 2110-2.071(8).

(5) Violation of any provision of this rule shall be deemed by the board to constitute misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional, or any combination of these, in the performance of the functions, duties, or both, of a dentist or a dental hygienist, depending on the licensee’s conduct. In addition, a licensee who fails to complete and report in a timely fashion the required hours of continuing education and engages in the practice of dentistry or dental hygiene without the express written consent of the board shall be deemed to have engaged in the unauthorized practice of dentistry or dental hygiene.

(6) Continuing education required by the board as part of discipline imposed on a licensee shall not count toward compliance with the continuing education requirement of this rule.

20 CSR 2110-2.60 Certification Requirements—Licensees Employed by or Contracting with Federally Qualified Health Centers

PURPOSE: This rule establishes the certification requirements of dentists and dental hygienists employed by, or contracting with, federally qualified health centers pursuant to HS HCS SS SS SCS for Senate Bill No. 1122 of the 92nd General Assembly (2004).

(1) All licensed dentists and dental hygienists employed by, or contracting with, a federally qualified health center (health center) practicing dentistry or dental hygiene in this state shall certify in writing, on forms provided by the board, that the facility at which these services are provided meets the operating standards as prescribed by Chapter 332, RSMo. Such certification shall be provided to the board as part of the initial registration of the health center and upon renewal of the registration.

(2) The standards for cleanliness and sanitation shall be those established for health care professionals and health care facilities by the Centers for Disease Control (CDC) pursuant to section 191.694, RSMo and the Occupational Safety and Health Administration (OSHA) pursuant to 29 CFR 1910. The standards of professionalism shall be those required by Chapter 332, RSMo and the rules pursuant thereto.

(3) An application for registration of a health center will not be considered complete until the certification as required in section (1) of this rule is received and accepted by the board.