NOTICE: This compilation incorporates the most recent revisions of rules and statutes governing dentists and dental hygienists available as of July 1, 2007. Note that this compilation is not an official version of the Indiana Code or the Indiana Administrative Code. It is distributed as a general guide to Indiana dental and dental hygiene licensure law and regulations. It is not intended to be offered as legal advice, and it may contain typographical errors. The Indiana State Board of Dentistry and the staff of the Indiana Professional Licensing Agency are prohibited from providing legal advice on issues contained herein. For legal advice, please consult an attorney. To obtain official copies of the Indiana Code or Indiana Administrative Code, contact your nearest public library or visit the website of the Indiana General Assembly at www.in.gov/legislative.
# INDIANA STATE BOARD OF DENTISTRY

## 2007

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IC 25-13
ARTICLE 13. DENTAL HYGIENISTS

IC 25-13-1
Chapter 1. Regulation of Dental Hygienists by State Board of Dentistry

IC 25-13-1-1
Short title
Sec. 1. This chapter may be known and cited as The Dental Hygienist Act of Indiana.
(Formerly: Acts 1945, c.90, s.1.) As amended by Acts 1982, P.L.154, SEC.46.

IC 25-13-1-2
Definitions
Sec. 2. As used in this article:
(a) "Dental hygienist" means one who is especially educated and trained in the science and art of maintaining the dental health of the individual or community through prophylactic or preventive measures applied to the teeth and adjacent structures.
(b) "License" means the license to practice dental hygiene issued by the state board of dentistry to dental hygienist candidates who satisfactorily pass the board's examinations.
(c) "Board" means the state board of dentistry established by IC 25-14-1.
(d) "Proprietor dentist" means a licensed dentist who is the owner and operator of the dental office in which he practices the profession of dentistry and who employs at least one (1) dentist or dental hygienist to supplement his operation and conduct of his dental office.
(e) "Employer dentist" means a proprietor dentist who employs at least one (1) dental hygienist to supplement his dental service to his clientele.
(f) "Referral" means a recommendation that a patient seek further dental care from a licensed dentist, but not a specific dentist.
(g) "Screening" means to identify and assess the health of the hard or soft tissues of the human oral cavity.
(h) "Public health setting" means a location, including a mobile health care vehicle, where the public is invited for health care, information, and services by a program sponsored or endorsed by a governmental entity or charitable organization.

IC 25-13-1-3
Necessity of license; Class B misdemeanor
Sec. 3. (a) Except as otherwise provided in this chapter, it is unlawful for any person to practice dental hygiene in Indiana without a license from the board authorizing that person to practice dental hygiene in this state.
(b) A person who knowingly or intentionally violates this section commits a Class B misdemeanor.

IC 25-13-1-4
License; application; examination; fee
Sec. 4. (a) Any person desiring to practice dental hygiene in Indiana must procure from the board a license to practice dental hygiene. To procure a license, the applicant must submit to the board proof of graduation from an institution for educating dental hygienists that is approved by the board and other credentials required by this chapter, together with an application on forms prescribed and furnished by the board. Each applicant must pay to the board an application fee set by the board under section 5 of this chapter at the time the application is made and must pass an examination satisfactory to the board. For those applicants who fail to pass an initial examination, subsequent examinations may be had before the board upon payment of a fee set by the board under section 5 of this chapter for each subsequent examination. The board may establish under section 5 of this chapter additional requirements as a prerequisite to taking an examination for any applicant who has failed the examination two (2) or more times. Application fees are not refundable.
(b) An applicant described under subsection (a) shall, at the request of the board, make an appearance before the board.

IC 25-13-1-5
Powers and duties of board
Sec. 5. (a) The board shall enforce this chapter.
(b) The board may adopt rules consistent with this chapter and with IC 25-14-1 necessary for the proper enforcement of this chapter, the examination of dental hygienists, and for the conduct of the practice of dental hygiene.
(c) The board may utilize a dental hygienist education program's accreditation by the Commission on Dental Accreditation of the American Dental Association as evidence that the program has met all or part of the standards for dental hygienist education programs established by the board.

IC 25-13-1-6
Qualifications of applicant
Sec. 6. When applying to the board for examination, the applicant must submit an application and the applicant's credentials, except for proof of the applicant's graduation from an institution for educating dental hygienists, in the form and manner prescribed by the board at least forty-five (45) days prior to the examination date. The applicant must submit proof of the applicant's graduation at least seven (7) days before the examination date. The applicant:
(1) must not have been convicted of a crime that has a direct bearing on the applicant's ability to practice competently; and
(2) must be a graduate of a school for dental hygienists that:
(A) is accredited by the Commission on Dental Accreditation of the American Dental Association;

(B) is recognized by the board; and

(C) requires a formal course of training of not less than two (2) years of eight (8) months each.


IC 25-13-1-6.1 Repealed
(Repealed by P.L.33-1993, SEC.74.)

IC 25-13-1-7
Dental hygienist examinations

Sec. 7. The board's examination of applicants to practice dental hygiene shall be held at such time and place as may be called by the board for its examination of applicants for dental license. The dental hygienist examination shall include a practical clinical test, the applicant supplying the patient and necessary instruments and equipment, and such written or oral examination (or both) embracing the subjects taught in dental hygienist's schools as the board may require. The board may recognize licenses issued by other states as provided in section 17 of this chapter, and may recognize the examination of the national board of dental examiners, if it is consistent with the board's requirements.

(Formerly: Acts 1945, c.90, s.7; Acts 1963, c.112, s.2.) As amended by Acts 1981, P.L.222, SEC.114.

IC 25-13-1-8
License; issuance; duration; fees; renewal

Sec. 8. (a) A license to practice dental hygiene in Indiana shall be issued to candidates who pass the board's examinations. The license shall be valid for the remainder of the renewal period in effect on the date the license was issued.

(b) Prior to the issuance of the license, the applicant shall pay a fee set by the board under section 5 of this chapter. A license issued by the board expires on a date specified by the Indiana professional licensing agency under IC 25-1-4-4(k) of each even-numbered year. An applicant for license renewal must satisfy the following conditions:

(1) Pay the renewal fee set by the board under section 5 of this chapter on or before the renewal date specified by the Indiana professional licensing agency in each even-numbered year.

(2) Subject to IC 25-1-4-3, provide the board with a sworn statement signed by the applicant attesting that the applicant has fulfilled the continuing education requirements under IC 25-13-2.

(3) Be currently certified or successfully complete a course in basic life support through a program approved by the board. The board may waive the basic life support requirement for applicants who show reasonable cause.

(c) If the holder of a license does not renew the license on or before the renewal date specified by the Indiana professional licensing agency, the license expires and becomes invalid without any action by the board.

(d) A license invalidated under subsection (c) may be reinstated by the board up to three (3) years after such invalidation upon meeting the requirements under IC 25-1-8-6.

(e) If a license remains invalid under subsection (c) for more than three (3) years, the holder of the invalid license may obtain a reinstated license if the holder meets the following requirements:

(1) Meets the requirements under IC 25-1-8-6.

(2) Passes an examination on state and federal laws that are relevant to the practice of dental hygiene as determined by the board.

(3) Has been continuously engaged in the practice of dental hygiene from the date the holder's license was invalidated through the date the holder applies for reinstatement.

(f) Other than failing to renew the license, has complied with this chapter and the rules adopted under this chapter during the time specified under subdivision (3).

(5) Complies with any other requirements established by the board under subsection (g).

The board may require the holder of an invalid license who files an application under this subsection to appear before the board and explain why the holder failed to renew the license.

(f) If the lapse of time in revalidating the license continues beyond three (3) years, and the holder of the invalid license does not meet the requirements under subsection (e), the holder of the invalid license must apply for licensure under section 4 or 17 of this chapter. In addition, the board may require the holder of the expired license to pay all past due renewal fees and a penalty fee set by the board under section 5 of this chapter.

(g) The board may adopt rules under section 5 of this chapter establishing requirements for the reinstatement of a license that has been invalidated for more than three (3) years.

(h) The license to practice must be displayed at all times in plain view of the patients in the office where the holder is engaged in practice. No person may lawfully practice dental hygiene who does not possess a license and its current renewal.

(i) Biennial renewals of licenses are subject to the provisions of IC 25-1-2.


IC 25-13-1-9 Repealed
(Repealed by Acts 1971, P.L.371, SEC.4.)

IC 25-13-1-10
Locations; practice of dental hygiene; instruction and in-service training

Sec. 10. (a) A licensed dental hygienist may be employed to practice dental hygiene in Indiana in the following:

(1) The office of a legally practicing proprietor dentist.

(2) A dental school or dental hygiene school to teach and demonstrate the practice of dental hygiene.

(3) The dental clinic of any public, parochial, or private school or other institution supported by public or private
Sec. 10.5. A student pursuing a course of study in dental anesthetics
Educational course; administration of dental anesthesia

(2) conducted at a school described in section 6(2) of this chapter.

(1) supervised by a dentist trained in the administration of dental anesthesia; and

(3) removes calcific deposits or accretions from the surfaces of human teeth or cleans or polishes such teeth;

(4) applies and uses within the patient's mouth such antiseptic sprays, washes or medicaments for the control or prevention of dental caries as his or her employer dentist may direct;

(5) treats gum disease; or

(6) uses impressions and x-ray photographs for treatment purposes.


IC 25-13-1-12
Exceptions

Sec. 12. Nothing in this chapter shall be interpreted or implied as operating to prevent:

(1) a dentist who is duly licensed in Indiana;

(2) a bona fide dental student while engaged in dental school extramural educational programs with a licensed dentist who is an affiliate faculty member of the dental school;

(3) a duly licensed practitioner of medicine;

(4) a legal practitioner of dentistry or of dental hygiene in any other state, while making a clinical demonstration before a dental society in Indiana; or

(5) any commissioned dental officer in the regular United States armed services, United States Public Health Service, or United States Department of Veterans Affairs, while engaged in the discharge of official duties in Indiana; from performing such services for health preservation, restoration, or diagnosis as are customarily within the field of their respective professional practices.


IC 25-13-1-13 Repealed
(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-13-1-14 Repealed
(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-13-1-15
Review of board's action; procedure

Sec. 15. Any licensee, or applicant for a license, aggrieved by the action of the board shall have the right of review of the board's actions thereon under the procedure provided in IC 4-21.5.

(Formerly: Acts 1945, c.90, s.14 1/2; Acts 1963, c.112, s.7.) As amended by Acts 1982, P.L.154, SEC.48; P.L.7-1987, SEC.118.

IC 25-13-1-16 Repealed
(Repealed by Acts 1978, P.L.2, SEC.2570.)

IC 25-13-1-17
License by reciprocity

Sec. 17. (a) The board may issue a license upon payment of the fee set by the board under section 5 of this chapter by an applicant who furnishes satisfactory proof that the applicant:
(1) is a dental hygienist;
(2) is currently licensed in some other state that has licensing requirements substantially equal to those in effect in Indiana on the date of application;
(3) has been in satisfactory practice for at least two (2) years out of the preceding five (5) years;
(4) passes the law examination; and
(5) has completed at least fourteen (14) hours of continuing education in the previous two (2) years.
However, all other requirements of this chapter must be met and the licensing requirements of the law and the board of the state from which such candidate comes may not be less than those prescribed in this chapter.
(b) An applicant who, before September 1, 1987, graduated from a school for dental hygienists that was recognized by the board at the time the degree was conferred and that required a course of training of only one (1) year, and who has completed:
(1) one (1) year of internship in a dental clinic of an accepted hospital;
(2) one (1) year of teaching, after graduation, in a school for dental hygienists; or
(3) five (5) years of actual dental practice as a dental hygienist;
may apply for licensure under this section if all other requirements of this section are met.

IC 25-13-1-17.1 Repealed
(Repealed by P.L.33-1993, SEC.74.)

IC 25-13-1-17.2
Inactive license; renewal
Sec. 17.2. (a) The board may classify a license as inactive if the board receives written notification from the dental hygienist that the dental hygienist will not practice as a dental hygienist in Indiana.
(b) The board may issue a license to the holder of an inactive license under this section if the applicant:
(1) pays the renewal fee set by the board;
(2) pays the reinstatement fee set by the board; and
(3) meets the continuing education requirements set by the board.
As added by P.L.75-2002, SEC.3.

IC 25-13-1-18
Construction of certain terms
Sec. 18. Wherever the word "she," or the word "her" shall appear herein, they shall be construed also to mean "he" or "him" respectively.
(Formerly: Acts 1945, c.90, s.16a.)

IC 25-13-1-19
Liberal construction
Sec. 19. This chapter shall be deemed to be enacted in the interests of public health, safety and welfare, and its provisions shall be liberally construed to serve such interests.
(Formerly: Acts 1971, P.L.371, SEC.7.)

IC 25-13-2
Chapter 2. Continuing Education
IC 25-13-2-1
Application of chapter
Sec. 1. This chapter does not apply to the following:
(1) A dental hygienist who has held an initial license for less than two (2) years.
(2) A graduate student or a person in a resident program offered by an approved organization listed under section 2(15) of this chapter.
(3) A person who is determined by the board as being unable to practice dental hygiene due to a disability.

IC 25-13-2-2
"Approved organization" defined
Sec. 2. As used in this chapter, "approved organization" means the following:
(1) United States Department of Education.
(2) Council on Post-Secondary Education.
(3) National Dental Association.
(4) American Dental Association.
(5) Academy of General Dentistry.
(6) National Dental Hygiene Association.
(7) American Dental Hygiene Association.
(8) Council on Hospital Dental Services.
(9) American Medical Association.
(10) Joint Commission on Accreditation of Hospitals.
(11) Joint Commission on Healthcare Organizations.
(12) Study clubs approved by the board.
(13) Federal, state, and local government agencies.
(14) International organizations approved by the American Dental Association.
(15) A college or other teaching institution accredited by the United States Department of Education or the Council on Post-Secondary Education.
(16) A national, state, district, or local organization that operates as an affiliated entity under the approval of an organization listed in subdivisions (1) through (14).
(17) An internship or a residency program conducted in a hospital that has been approved by an organization listed in subdivisions (1) through (15).
(18) Any other organization or individual approved by the board.

IC 25-13-2-3
"Continuing education course" defined
Sec. 3. As used in this chapter, "continuing education course" means an orderly process of instruction designed to directly enhance the practicing dental hygienist's knowledge and skill in providing relevant dental hygiene services that is approved by an approved organization.

IC 25-13-2-4
"License period" defined
Sec. 4. As used in this chapter, "license period" means the two (2) year period beginning on March 2, 1992, and
every two (2) years thereafter.

IC 25-13-2-5
"Study club" defined
Sec. 5. As used in this chapter, "study club" means a group of at least five (5) dental hygienists who do the following:
(1) Organize for the purpose of scientific study.
(2) Operate under the direction of elected officers.
(3) Maintain written bylaws.
(4) Conduct regular meetings.
(5) Maintain written attendance records of all meetings.

IC 25-13-2-6
Course credit hour requirements
Sec. 6. (a) A dental hygienist must complete at least fourteen (14) credit hours in continuing education courses each license period.
(b) Credit hours may be applied under this section only toward the credit hour requirement for the license period during which the credit hours are earned.
(c) During a license period, a dental hygienist may not earn more than five (5) credit hours toward the requirements under this section for continuing education courses that relate specifically to the area of practice management.
(d) Not more than two (2) credit hours for certification programs in basic life support required under IC 25-13-1-8(b)(3) may be applied toward the credit hour requirement during each license period.

IC 25-13-2-7
Award of credit hours
Sec. 7. Credit hours under section 6 of this chapter must be awarded as follows:
(1) A course presented by a college under a regular curriculum is awarded one (1) credit hour for each lecture hour attended.
(2) A course not listed in subdivision (1) is awarded one (1) credit hour for each lecture hour and two (2) credit hours for each participation hour of the course.
(3) A speech, lecture, or other presentation by a dental hygienist is awarded two (2) credit hours if the following conditions are met:
(A) The presentation concerns a subject that would be suitable for a continuing education course.
(B) The subject of the presentation is eligible for credit only one (1) time, regardless of the number of times the subject is presented.
(C) The dental hygienist maintains a record of the time, place, and date of the presentation.
(D) The presentation is sponsored by an approved organization.
(E) Not more than four (4) credit hours are awarded to the dental hygienist under this subdivision during any license period.
(4) Attendance at a state, regional, or national meeting sponsored by an approved organization is awarded one (1) credit hour.
(5) Attendance at a meeting of a study club that uses films, audio cassettes, live presentations, or written materials sponsored by the American Dental Hygienist Association is awarded one (1) credit hour. However, a dental hygienist may not receive credit under this subdivision for more than four (4) credit hours during a license period.
(6) Attendance at a meeting of a study club featuring a guest speaker whose presentation concerns a subject suitable for a continuing education course is awarded one (1) credit hour for each hour attended.
(7) A home study course that is presented by an approved organization and meets the requirements under this subdivision is awarded the same number of credit hours given to courses provided by a college. If the approved organization does not assess credit hours to a course under this subdivision, the course is awarded one (1) credit hour for each hour of study material. Subject matter of the course may be presented by written, audio, or video materials.

IC 25-13-2-8 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-13-2-9
Compliance
Sec. 9. The board and the dental hygienist shall comply with the requirements under IC 25-1-4 concerning continuing education.

IC 25-13-2-10
Board supervision of course offerings; rules
Sec. 10. (a) A member of the board may attend or monitor a continuing education course.
(b) An approved organization must provide the board with course information or materials requested by the board.
(c) If the board determines that an approved organization does not meet the requirements of this chapter, the board shall do the following:
(1) Provide written notification to the organization of the noncompliance specifying the items of noncompliance and the conditions of reinstatement.
(2) Deny credit hours awarded by the organization from the time that the organization receives a notice until the date of reinstatement.
(3) Make reasonable efforts to notify dental hygienists of the organization's noncompliance status.
(d) The board shall adopt rules under IC 4-22-2 to implement this chapter.

IC 25-13-2-11 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-13-2-12 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-13-2-13 Repealed
(Repealed by P.L.157-2006, SEC.76.)
IC 25-13-2-14
Locations of course offerings
Sec. 14. Continuing education courses must be made available in all geographical regions of Indiana.

IC 25-14
ARTICLE 14. DENTISTS

IC 25-14-1
Chapter 1. Regulation of Dentists; Creation of Board

IC 25-14-1-0.5 Repealed
(Repealed by P.L.258-1987, SEC.3.)

IC 25-14-1-1
Necessity for license
Sec. 1. (a) Except as permitted under this chapter, it is unlawful for any person to practice dentistry in Indiana who is not licensed under this chapter.
(b) This chapter does not prohibit:
(1) a hospital;
(2) a public health clinic;
(3) a federally qualified health center;
(4) a rural health center;
(5) a charitable health clinic;
(6) a governmental entity;
(7) a contractor or subcontractor of a governmental entity; or
(8) another entity specified by a rule of the board; from providing dental health services if the dental health services are provided by dentists (licensed under this chapter) or dental hygienists (licensed under IC 25-13).
(Formerly: Acts 1913, c.138, s.1.) As amended by P.L.102-2000, SEC.1.

IC 25-14-1-1.5
Definitions
Sec. 1.5. As used in this article:
"Agency" refers to the Indiana professional licensing agency established by IC 25-1-5-3.
"Board" refers to the state board of dentistry established under this chapter.
"Deep sedation" means a controlled state of depressed consciousness, accompanied by partial loss of protective reflexes, including inability to respond purposefully to verbal command, produced by a pharmacologic method.
"General anesthesia" means a controlled state of unconsciousness, accompanied by partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command, produced by a pharmacologic method.
"Light parenteral conscious sedation" means a minimally depressed level of consciousness under which an individual retains the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, produced by an intravenous pharmacologic method.

IC 25-14-1-2
State board of dentistry; members; districts
Sec. 2. (a) The state board of dentistry is established and consists of:
(1) nine (9) practicing dentists who must have been in practice in this state for not less than the five (5) years;
(2) one (1) practicing dental hygienist licensed under IC 25-13-1; and
(3) one (1) member to represent the general public who must be a resident to this state and in no way associated with the profession of dentistry other than as a consumer.
All eleven (11) members of the board shall be appointed by the governor for a term of three (3) years each. Any member of the board may serve until the member's successor is appointed and qualified under this chapter. A member may serve consecutive terms, but no member may serve more than three (3) terms or a total of nine (9) years.
(b) The appointment of the dentist members shall be made in a manner that, at all times, each dentist member on the board represents and is a resident of one (1) of nine (9) examiner districts set forth in this subsection. Each dentist member shall be chiefly responsible in the performance of his duties with regard to the district from which he is appointed. The nine (9) dentist members' districts consist of the following counties:
(1) District 1. Tipton, Hamilton, Hendricks, Marion, Hancock, Morgan, Johnson, and Shelby.
(2) District 2. Lake, Porter, LaPorte, and Jasper.
(c) The board shall examine all applicants for licenses who present the credentials set forth in this article and issue licenses to all applicants who pass a satisfactory examination.

IC 25-14-1-3
Examination; fees
Sec. 3. (a) A person desiring to begin the practice of dentistry in Indiana shall procure from the board a license to
practice dentistry in Indiana. To procure the license, the applicant must submit to the board proof of graduation from a dental college recognized by the board. The board may recognize dental schools accredited by the Commission on Dental Accreditation of the American Dental Association, if the board is satisfied that the recognition is consistent with the board's requirements. Every applicant shall pay to the board a fee, set by the board under section 13 of this chapter, at the time of making the application and must pass an examination before the board at the time and place to be fixed by the board. The applicant must purchase examination supplies and pay a fee for the use of the examination facility.

(b) For those applicants who fail to pass an initial examination, subsequent examinations may be taken upon payment of a fee, set by the board under section 13 of this chapter, for each subsequent examination. If the applicant fails to pass the examination prescribed by the board, the applicant is entitled to the right of review of the board's action on the examination under IC 4-21.5. The board may establish, under section 13 of this chapter, additional requirements as a prerequisite to taking an examination for an applicant who has failed the examination two (2) or more times.

(c) A fee paid under this article may not be refunded. (Formerly: Acts 1913, c.138, s.3; Acts 1931, c.169, s.2; Acts 1949, c.248, s.2; Acts 1963, c.151, s.2; Acts 1971, P.L.372, SEC.2.) As amended by Acts 1977, P.L.172, SEC.12; Acts 1981, P.L.222, SEC.121; P.L.169-1985, SEC.47; P.L.7-1987, SEC.119; P.L.354-1989(ss), SEC.2.

IC 25-14-1-3.1 Anesthesia or sedation; permit to administer; requirements; renewal
Sec. 3.1. (a) A dentist must have a permit to administer:
(1) general anesthesia;
(2) deep sedation; or
(3) light parenteral conscious sedation;
to a patient.
(b) The board shall establish by rule the educational and training requirements for the issuance and renewal of a permit required by subsection (a).
(c) The board shall establish the requirements for a program of education and training for pediatric anesthesiology.
(d) The requirements for a permit issued under this section must be based on the American Dental Association's "Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry" and accompanying policy statement adopted in November 1985.
(e) A permit issued under this section must be renewed biennially.

IC 25-14-1-3.5 Fees; establishment; disposition
Sec. 3.5. (a) Under IC 25-1-8 the board shall establish, under IC 25-13-1-5 and section 13 of this chapter, fees sufficient to implement IC 25-13 and IC 25-14.
(b) All money received by the board under this chapter shall be paid to the agency, which shall: (1) give a proper receipt for the same; and (2) at the end of each month:
(A) report to the auditor of state the total amount received from all sources; and
(B) deposit the entire amount of such receipts with the state treasurer to be deposited by the treasurer in the general fund of the state.


IC 25-14-1-4 Repealed
(Repealed by Acts 1977, P.L.172, SEC.56.)

IC 25-14-1-5 Dental intern permit or dental hygienist intern permit; restrictions; renewal; fees
Sec. 5. (a) The board may at its discretion issue a dental intern permit or dental hygienist intern permit to any person to whom it has not issued a license but who is a graduate of a dental college or school of dental hygiene recognized by the board and is otherwise qualified to take the regular examination for a license given by the board. However, an applicant for a dental intern permit or dental hygienist intern permit shall furnish the board satisfactory evidence that the applicant has been:
(1) appointed to a dental or a dental hygiene internship in a hospital or similar institution operated under the laws of Indiana;
or
(2) employed as:
(A) an instructor in a dental school recognized and approved by the Indiana dental board; or
(B) a teacher or operator in a clinic in a public or parochial school, college, or university.
(b) The fee for the permit shall be set by the board under section 13 of this chapter.
(c) Any person receiving a dental or dental hygiene intern permit may practice dentistry or dental hygiene only in a hospital or other institution designated in the permit and only under the direction of a licensed dentist who is a member of the dental staff of such hospital or other institution. The intern's dental or dental hygiene practice shall be limited to bona fide patients of such hospital or other institution.
(d) The permit shall be valid for only one (1) year from date of issue, shall be renewable in the discretion of the board upon the payment of a fee determined by the board under section 13 of this chapter, and may be recalled at any time by the board. (Formerly: Acts 1913, c.138, s.4a; Acts 1949, c.248, s.3; Acts 1963, c.151, s.4; Acts 1971, P.L.372, SEC.5.) As amended by Acts 1977, P.L.172, SEC.14; P.L.169-1985, SEC.49.

IC 25-14-1-6 Repealed
(Repealed by Acts 1977, P.L.172, SEC.56.)
IC 25-14-1-7 Repealed  
(Repealed by Acts 1977, P.L.172, SEC.56.)

IC 25-14-1-8 Repealed  
(Repealed by Acts 1977, P.L.172, SEC.56.)

IC 25-14-1-9 Repealed  
(Repealed by P.L.169-1985, SEC.97.)

IC 25-14-1-10  
Renewal of license; renewal card; failure to renew

Sec. 10. (a) Unless renewed, a license issued by the board expires on a date specified by the agency under IC 25-1-5-4(k). An applicant for renewal shall pay the renewal fee set by the board under section 13 of this chapter on or before the renewal date specified by the agency.

(b) The license shall be properly displayed at all times in the office of the person named as the holder of the license, and a person may not be considered to be in legal practice if the person does not possess the license and renewal card.

(c) If a holder of a dental license does not secure the renewal card on or before the renewal date specified by the agency, without any action by the board the license together with any related renewal card is invalidated.

(d) Except as provided in section 27.1 of this chapter, a license invalidated under subsection (c) may be reinstated by the board up to three (3) years after its invalidation upon meeting the requirements under IC 25-1-8-6.

(e) Except as provided in section 27.1 of this chapter, if a license remains invalid under subsection (c) for more than three (3) years, the holder of the invalid license may obtain a reinstated license if the holder meets the following requirements:

1. Meets the requirements under IC 25-1-8-6.
2. Passes an examination on state and federal laws that are relevant to the practice of dentistry as determined by the board.
3. Has been continuously engaged in the practice of dentistry from the date the holder’s license was invalidated through the date the holder applies for reinstatement.
4. Other than failing to obtain a renewal card, has complied with this chapter and the rules adopted under this chapter during the time specified under subdivision (3).
5. Complies with any other requirements established by the board under subsection (g).

The board may require the holder of an invalid license who files an application under this subsection to appear before the board and explain why the holder failed to renew the license.

(f) If a license remains invalid under subsection (c) for more than three (3) years and the holder of the invalid license does not meet the requirements under subsection (e), the holder of the invalid license may be issued a license only by reapplying for a license under section 3 or 16 of this chapter. In addition, the board may require the holder of the invalidated license to pay all past due renewal fees and a penalty fee set by the board under section 13 of this chapter.

(g) The board may adopt rules under section 13 of this chapter establishing requirements for the reinstatement of a license that has been invalidated for more than three (3) years. The fee for a duplicate license to practice as a dentist is subject to IC 25-1-8-2.

(h) Biennial renewal of licenses is subject to IC 25-1-2.

(i) Subject to IC 25-1-4-3, an application for renewal of a license under this section must contain a sworn statement signed by the applicant attesting that the applicant has fulfilled the continuing education requirements under IC 25-14-3.


IC 25-14-1-11  
Board of examiners; removal of members; filling vacancies

Sec. 11. The governor shall have the power to remove any member of the board for incompetency, gross immorality, for any abuse of his official power or for any other good cause and may fill any vacancy occasioned by removal, death, resignation or otherwise, by appointment. Any person appointed to fill any vacancy of such board, whether caused by death, resignation, removal or otherwise, shall hold for the unexpired term of the member whose place he is appointed to fill and all vacancies shall be filled in the manner prescribed for the regular appointments to said board.

(Formerly: Acts 1913, c.138, s.10; Acts 1963, c.151, s.6.)

IC 25-14-1-12  
Meetings of board; records; affiliation

Sec. 12. (a) The board shall hold not less than two (2) regular meetings in each year at such place as may be fixed by the board and as often in addition as may be necessary for the transaction of such business as may properly come under the provisions of this chapter, and it shall have power to make all necessary rules in accordance with this chapter. Additional meetings may be called at any time by the president or any six (6) members of the board to be held at such time and place as may be designated in the call. Six (6) members of the board constitute a quorum. A majority of the quorum may transact business. The board shall elect a president and a secretary. For their services, the members shall receive per diem and travel expenses as otherwise provided by law.

(b) It shall be the duty of the board through the agency to keep a record of all applications for licenses for a period of time designated by the board, subject to the final approval of the oversight committee on public records under IC 5-15-5.1-19. Such records shall contain all the facts set forth in the application, including the action of the board. The board shall also retain all examination papers for a period of one (1) year from the date upon which the examination is held. The agency shall carry out the administrative functions of the board and shall provide necessary personnel to enable the board to properly carry out and enforce this chapter.

(c) The board may affiliate with the American Association of Dental Examiners as an active member thereof and may pay the regular annual dues of the association out of any
available funds of the board, which are obtained by examination fees or registration renewal fees as provided by law. However, the affiliation with the American Association of Dental Examiners shall not impair, restrict, enlarge, or modify any of the rights, powers, duties, or functions of the board as prescribed by the laws of this state. The board may designate one (1) of its members as a delegate of any meeting of the association, and such delegate member shall receive the regular per diem paid to members of the board for their services on the board and the member's necessary expenses while traveling to and from and attending such meetings. 


IC 25-14-1-13

Powers and duties of board; complaints; hearings

Sec. 13. (a) The board is charged with the duty of administering and enforcing the laws pertaining to the practice of dentistry and of dental hygiene. The board may adopt and enforce rules for the administration and enforcement of this article in accordance with IC 4-22-2. The board shall adopt a code of professional conduct and shall adopt rules establishing standards for the competent practice of dentistry or dental hygiene. The board may adopt rules concerning assessment of costs in disciplinary proceedings before the board.

(b) Complaints against persons licensed under this article or IC 25-13 are subject to IC 25-1-7. The board may conduct hearings concerning these complaints in accordance with IC 4-21.5.

(Formerly: Acts 1913, c.138, s.12; Acts 1935, c.90, s.5; Acts 1949, c.248, s.6; Acts 1963, c.151, s.8.) As amended by Acts 1981, P.L.222, SEC.126; P.L.169-1985, SEC.52; P.L.149-1987, SEC.34.

IC 25-14-1-14

Injunction

Sec. 14. The attorney general, prosecuting attorney, the state board of dentistry, or any citizen of any county where any person shall engage in the practice of dentistry, as herein defined, without possessing a valid license so to do, may, in accordance with the laws of the state of Indiana governing injunctions, maintain an action in the name of the state of Indiana to enjoin such person from engaging in the practice of dentistry, as herein defined, until a valid license to practice dentistry be secured. And any person who has been so enjoined who shall violate such injunction shall be punished for contempt of court. Provided, That such injunction shall not relieve such person so practicing dentistry without a valid license from a criminal prosecution therefor as is now provided by law, but such remedy by injunction shall be in addition to any remedy now provided for the criminal prosecution of such offender. In charging any person in a complaint for injunction, or in an affidavit, information or indictment, with a violation of this law by practicing dentistry without a valid license, it shall be sufficient to charge that such person did, upon a certain day and in a certain county, engage in the practice of dentistry, he not having a valid license so to do, without averring any further or more particular facts concerning the same. 

(Formerly: Acts 1913, c.138, s.12a; Acts 1931, c.169, s.6.) As amended by P.L.24-1999, SEC.11.

IC 25-14-1-15

Attorney's fees

Sec. 15. In case judgment is rendered in favor of the plaintiff in any action brought under the provisions of this chapter, the court rendering the same shall also render judgment for reasonable attorney's fees in such action in favor of the plaintiff and against the defendant therein, and when collected such fees shall be paid to the attorney or the attorneys of the plaintiff therein, which if paid to the attorney general or to any prosecuting attorney shall be additional to any compensation otherwise allowed by law.

(Formerly: Acts 1913, c.138, s.12b; Acts 1931, c.169, s.7.) As amended by Acts 1982, P.L.154, SEC.49.

IC 25-14-1-16

Applicants for examination; required information; license by reciprocity; adoption of rules

Sec. 16. (a) An applicant for examination under this article must submit to the board at least forty-five (45) days before the examination date an application in a form and manner prescribed by the board and proof satisfactory to the board that the applicant has not been convicted of a crime that has a direct bearing on the applicant's ability to practice competently. An applicant must submit proof to the board at least seven (7) days before the examination date that the applicant is a graduate of a dental school that is recognized by the board.

(b) The board may issue a license upon payment of a fee, set by the board under section 13 of this chapter, to an applicant who furnishes proof satisfactory to the board that the applicant is a dentist who:

(1) is licensed in another state or a province of Canada that has licensing requirements substantially equal to those in effect in Indiana on the date of application;

(2) has practiced dentistry for at least two (2) of the three (3) years preceding the date of application;

(3) passes the law examination administered by the board;

(4) has completed at least twenty (20) hours of continuing education in the previous two (2) years; and

(5) meets all other requirements of this chapter.

(c) The board shall have power to adopt rules under section 13 of this chapter for licensure by endorsement.

(d) An applicant shall, at the request of the board, make an appearance before the board.


IC 25-14-1-16.1 Repealed

(Repealed by P.L.33-1993, SEC.74.)
IC 25-14-1-17
Record of persons practicing with and employed by certificate holder
Sec. 17. A person practicing dentistry, upon written demand made by the secretary of the state board of dentistry, shall not fail to furnish in writing, within twenty (20) days after such demand, the name and address of each person practicing or assisting in the practice of dentistry in the office of said person, together with a sworn statement showing by what authority or license such person or persons are practicing dentistry and in what capacity nonlicensed persons are assisting in practice; said list of names and addresses shall include all persons who have been thus employed within the sixty (60) days next preceding such demand; however, such affidavit may not be used as evidence against either said person or persons so reported in any proceeding under this chapter. (Formerly: Acts 1913, c.138, s.14; Acts 1917, c.160, s.3; Acts 1931, c.169, s.8.) As amended by Acts 1978, P.L.2, SEC.2528; P.L.24-1999, SEC.13.

IC 25-14-1-18
Display of name and license
Sec. 18. A practitioner of dentistry shall not fail to post, and keep conspicuously displayed, his name and license in the dental office wherein he practices, in plain sight of his patients; if there are more dentists than one (1) practicing or employed in any dental office, the manager or proprietor of the office shall not fail to post and display the name and license of each dentist so practicing and so employed therein. (Formerly: Acts 1913, c.138, s.15; Acts 1917, c.160, s.4.) As amended by Acts 1977, P.L.172, SEC.18; Acts 1978, P.L.2, SEC.2529.

IC 25-14-1-19 Repealed
(Repealed by Acts 1981, P.L.222, SEC.296.)

IC 25-14-1-19.1 Repealed
(Repealed by P.L.152-1988, SEC.30.)

IC 25-14-1-20
Disciplinary proceedings
Sec. 20. Proceedings for disciplinary action against a holder of a license to practice dentistry or dental hygiene in Indiana shall be had in accordance with IC 25-1-7 and IC 4-21.5. (Formerly: Acts 1913, c.138, s.17; Acts 1931, c.169, s.10; Acts 1935, c.90, s.8; Acts 1963, c.151, s.11.) As amended by Acts 1977, P.L.172, SEC.20; P.L.169-1985, SEC.55; P.L.7-1987, SEC.120.

IC 25-14-1-21
Representation by attorney general
Sec. 21. It shall be the duty of the attorney general to represent the state board of dentistry in any court in which an action may be filed for the review of an order of the board as provided for in section 20 of this chapter. The attorney general may, at his discretion, call to his assistance in such action, the prosecuting attorney of the county in which such action is filed. Also, the board, with the written consent of the attorney general, shall have the right to employ, out of its own funds, any other attorney or attorneys to assist the attorney general in any such action. (Formerly: Acts 1913, c.138, s.18; Acts 1935, c.90, s.9; Acts 1963, c.151, s.12.) As amended by Acts 1982, P.L.154, SEC.50; P.L.24-1999, SEC.14.

IC 25-14-1-22
Exceptions
Sec. 22. This chapter does not apply to the following:
(1) Any commissioned officer of the regular United States armed services, United States Public Health Service, or United States Department of Veterans Affairs in the discharge of the officer's official duties.
(2) Any dentist who is legally qualified to practice in the state or territory where the dentist resides, when in actual consultation with a legal practitioner of Indiana.
(3) Any dentist residing on the border of a neighboring state and authorized to practice dentistry under the laws of the state whose practice extends into the border of Indiana; however, such practitioner shall not open an office or appoint a place to meet patients or solicit practice within Indiana.
(4) Any dentist who is licensed in another state while appearing as a clinician for demonstrating certain methods of technical procedures before a meeting, clinic, or convention of Indiana dentists; however, no fee, cash, or money reimbursement, consideration, or remuneration of any kind is paid directly or indirectly or by any subterfuge, to such clinician by or for the person used as a patient in such clinic or demonstration.
(5) Licensed physicians or surgeons who are authorized to take x-ray pictures of the human teeth or jaws, to extract teeth, and to perform surgical operations (as described in IC 25-22.5-1-1(1)(C)) upon the teeth or jaws at their usual office or residence or within the vicinity of their ordinary practice, whenever, in their judgment, the same may be necessary. This exception shall not apply to itinerant licensed physicians and surgeons who have to a large extent abandoned their practice as physicians and surgeons and are, in fact and effect, practicing dentistry almost exclusively. (Formerly: Acts 1913, c.138, s.19; Acts 1931, c.169, s.11; Acts 1935, c.90, s.10.) As amended by Acts 1977, P.L.172, SEC.21; P.L.169-1985, SEC.56; P.L.1-1990, SEC.252; P.L.217-1993, SEC.1.

IC 25-14-1-23
Practice of dentistry within meaning of act
Sec. 23. (a) A person is practicing dentistry within the meaning of this chapter if the person does any of the following:
(1) Uses the word "dentist" or "dental surgeon", the letters "D.D.S." or "D.M.D.", or other letters or titles in connection with dentistry.
(2) Directs and controls the treatment of patients within a place where dental services are performed.
(3) Advertises or permits to be advertised by sign, card, circular, handbill, newspaper, radio, or otherwise that he can or will attempt to perform dental operations of any kind.
(4) Offers to diagnose or professes to diagnose or
treats or professes to treat any of the lesions or diseases of the human oral cavity, teeth, gums, or maxillary or mandibular structures.

(5) Extracts human teeth or corrects malpositions of the teeth or jaws.
(6) Except as provided in IC 25-13-1-10.5, administers dental anesthetics.
(7) Uses x-ray pictures for dental diagnostic purposes.
(8) Makes impressions or casts of any oral tissues or structures for the purpose of diagnosis or treatment thereof or for the construction, repair, reproduction, or duplication of any prosthetic device to alleviate or cure any oral lesion or replace any lost oral structures, tissue, or teeth.
(9) Advertises to the public by any method, except trade and professional publications, to furnish, supply, construct, reproduce, repair, or adjust any prosthetic denture, bridge, appliance, or other structure to be worn in the human mouth.
(10) Is the employer of a dentist who is hired to provide dental services.
(11) Directs or controls the use of dental equipment or dental material while the equipment or material is being used to provide dental services. However, a person may lease or provide advice or assistance concerning dental equipment or dental material if the person does not restrict or interfere with the custody, control, or use of the equipment or material by the dentist. This subdivision does not prevent a dental hygienist who is licensed under IC 25-13 from owning dental equipment or dental materials within the dental hygienist’s scope of practice.
(12) Directs, controls, or interferes with a dentist’s clinical judgment.
(13) Exercises direction or control over a dentist through a written contract concerning the following areas of dental practice:
(A) The selection of a patient’s course of treatment.
(B) Referrals of patients, except for requiring referrals to be within a specified provider network, subject to the exceptions under IC 27-13-36-5.
(C) Content of patient records.
(D) Policies and decisions relating to refunds, if the refund payment would be reportable under federal law to the National Practitioner Data Bank, and warranties.
(E) The clinical content of advertising.
(F) Final decisions relating to the employment of dental office personnel.

However, this subdivision does not prohibit a person from providing advice or assistance concerning the areas of dental practice referred to in this subdivision or an insurer (as defined in IC 27-1-26-1) from carrying out the applicable provisions of IC 27 under which the insurer is licensed. However, a person does not have to be a dentist to be a manufacturer of dental prostheses.

(b) In addition to subsection (a), a person is practicing dentistry who directly or indirectly by any means or method furnishes, supplies, constructs, reproduces, repairs, or adjusts any prosthetic denture, bridge, appliance, or any other structure to be worn in the human mouth and delivers the resulting product to any person other than the duly licensed dentist upon whose written work authorization the work was performed. A written work authorization shall include the following:

(1) The name and address of the dental laboratory to which it is directed.
(2) The case identification.
(3) A specification of the materials to be used.
(4) A description of the work to be done and, if necessary, diagrams thereof.
(5) The date of issuance of the authorization.
(6) The signature and address of the licensed dentist or other dental practitioner by whom the work authorization is issued.

A separate work authorization shall be issued for each patient of the issuing licensed dentist or other dental practitioner for whom dental technological work is to be performed.

(c) This section shall not apply to those procedures which a legally licensed and practicing dentist may delegate to competent office personnel as to which procedures the dentist exercises supervision and responsibility. Delegated procedures may not include either:
(1) those procedures which require professional judgment and skill such as diagnosis, treatment planning, and the cutting of hard or soft tissues or any intraoral impression which would lead to the fabrication of an appliance, which, when worn by the patient, would come in direct contact with hard or soft tissues and which could result in tissue irritation or injury; or
(2) those procedures allocated under IC 25-13-1 to licensed dental hygienists.

This chapter shall not prevent dental students from performing dental operations under the supervision of competent instructors within the dental school or a university recognized by the board or in any public clinic under the supervision of the authorized superintendent of such clinic authorized under the authority and general direction of the board of health or school board of any city or town in Indiana.

(d) Licensed pharmacists of this state may fill prescriptions of licensed dentists of this state for any drug necessary in the practice of dentistry.

IC 25-14-1-24
Evidence of practice of dentistry; exception
Sec. 24. The announcing to the public in any manner of intent to maintain, directly or indirectly, an office or place of business for the practice of dentistry, or the use of any professional degree, title, or designation, personal or otherwise, or a sign, card, circular, device, picture, or advertisement that might impress the public that the office is used for the practice of dentistry is prima facie evidence of engaging in the practice of dentistry. Nothing in this section may be construed to interfere with sales of dental equipment or materials by established, bona fide dealers or with the renting or leasing of real estate or dental equipment by the actual owner thereof or his agent.
(Formerly: Acts 1913, c.138, s.20a; Acts 1943, c.308, s.3.) As amended by P.L.155-1988, SEC.2.
IC 25-14-1-25
Specific violations
Sec. 25. (a) It is a Class D felony for a person to do any of the following:
(1) Practice dentistry not being at the time a dentist duly licensed to practice as such in this state under this chapter.
(2) Employ, hire, or procure one who is not duly licensed as a dentist to practice dentistry, but a person practiced upon by an unlicensed dentist does not violate this section.
(3) Use any diploma, certificate, or transcript which has been purchased, fraudulently issued, counterfeited, or materially altered, either as a license or color of license, to practice dentistry, or in order to procure registration as a dentist.
(4) Practice dentistry under a false name, under a name intended to mislead the public, under the license of another person of the same name, or hold himself out to the public under such a name as a practitioner of dentistry.
(5) Assume the title or degree of "Bachelor of Dental Surgery", append the letters "B.D.S.", "D.D.S.", "M.D.S.", or "D.M.D.", to his name, or make use of the same, or prefix to his name the title of "Doctor", or any abbreviation thereof, not having had duly conferred upon him by diploma from some college, school, or board of examiners legally empowered to confer the same, the right to assume such a title.
(6) Assume any title or append or prefix any words to his name, with intent to represent falsely that he has received a dental degree or license.
(7) Not having been licensed to practice dentistry under the laws of this state, represent that he has the equivalent of a license for five (5) of the preceding nine (9) years to practice dentistry in the United States or in any country, territory, or other recognized jurisdiction.
(2) The individual has been approved under the credentialing process of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry that is accredited by:
(A) the American Dental Association Commission on Dental Accreditation; or
(B) the Joint Commission on Accreditation of Health Care Organizations.
(3) The individual has successfully documented or demonstrated clinical and academic competency to the board.
(4) The individual is fluent in the English language.
(5) The individual passes the written law examination administered by the board.
(6) The individual meets the continuing education requirements required by IC 25-14-3.
(7) The individual pays the licensing fee set by the board under subsection (f).
(b) A license issued under this section must be held by the Indiana school of dentistry for which the licensee is employed.
(c) A license issued under this section does not meet the requirements of section 16 of this chapter and may not be used to obtain a general dentistry license under this article.
(d) A licensee under this section may teach and practice dentistry only at or on behalf of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry.

IC 25-14-1-26 Repealed
(Repealed by P.L.4-1998, SEC.15.)

IC 25-14-1-27 Repealed
(Repealed by Acts 1979, P.L.17, SEC.55.)

IC 25-14-1-27.1
Inactive licenses
Sec. 27.1. (a) The board may classify a license as inactive if the board receives written notification from a licensed dentist stating that the dentist will not practice as a dentist in Indiana.
(b) The board may issue a license to the holder of an inactive license under this section, if the applicant:
(1) pays the renewal fee set by the board;
(2) pays the reinstatement fee set by the board; and
(3) meets continuing education requirements set by the board.

IC 25-14-1-27.5
Conditions for issuing instructor's license; holding of license; prohibiting use of instructor's license to obtain general dentistry license; teaching and practicing dentistry with license limitations; validity; fee; limitation on number of licenses; rules; expiration
Sec. 27.5. (a) The board may issue an instructor's license to an individual who is not otherwise licensed to practice dentistry in Indiana if the individual meets the following conditions:
(1) The individual has been licensed or has had the equivalent of a license for five (5) of the preceding nine (9) years to practice dentistry in the United States or in any country, territory, or other recognized jurisdiction.
(2) The individual has been approved under the credentialing process of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry that is accredited by:
(A) the American Dental Association Commission on Dental Accreditation; or
(B) the Joint Commission on Accreditation of Health Care Organizations.
(3) The individual has successfully documented or demonstrated clinical and academic competency to the board.
(4) The individual is fluent in the English language.
(5) The individual passes the written law examination administered by the board.
(6) The individual meets the continuing education requirements required by IC 25-14-3.
(7) The individual pays the licensing fee set by the board under subsection (f).
(b) A license issued under this section must be held by the Indiana school of dentistry for which the licensee is employed.
(c) A license issued under this section does not meet the requirements of section 16 of this chapter and may not be used to obtain a general dentistry license under this article.
(d) A licensee under this section may teach and practice dentistry only at or on behalf of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry.
(e) An instructor's license is valid only during the time the licensee is employed or has a valid employment contract for a full-time faculty position at the Indiana school of dentistry or an affiliated medical center. The Indiana school of dentistry or the affiliated medical center shall notify the board in writing upon the termination of the employment contract of an individual who is issued a license under this section and surrender the license not later than thirty (30) days after the licensee's employment ceases.

(f) The board shall set a fee for the issuance and renewal of a license under this section.

(g) Unless renewed, a license issued by the board under this section expires annually on a date specified by the agency under IC 25-1-5-4. An applicant for renewal must pay the renewal fee set by the board on or before the renewal date specified by the agency.

(h) Not more than five percent (5%) of the Indiana school of dentistry's full-time faculty may be individuals licensed under this section.

(i) The board shall adopt rules under IC 4-22-2 necessary to implement this section.

(j) This section expires June 30, 2008.


### IC 25-14-1-28

**Severability**

Sec. 28. If any provision of this chapter as amended be decided by the courts to be unconstitutional or invalid, such unconstitutional or invalid provision shall be considered severable from the remainder of this chapter and shall be excised therefrom, and the same shall not affect the validity of this chapter as a whole, or any part thereof, other than the part so decided to be unconstitutional or invalid.

(Formerly: Acts 1913, c.138, s.23a; Acts 1931, c.169, s.14; Acts 1935, c.90, s.11.) As amended by Acts 1982, P.L.154, SEC.52.

### IC 25-14-1-29

**Liberal construction**

Sec. 29. This chapter shall be deemed to be enacted in the interests of public health, safety, and welfare, and its provisions shall be liberally construed to serve such interests.

(Formerly: Acts 1971, P.L.372, SEC.10.)

### IC 25-14-1-30

**Certificates considered licenses**

Sec. 30. All certificates issued by the dental board for the practice of dentistry which certificates were issued prior to May 1, 1977, shall be deemed to be licenses for the practice of dentistry. All applications for the practice of dentistry and all renewal notices sent for the practice of dentistry in Indiana shall be for licenses and not for certificates. For the purposes of this chapter, all certificates and renewals for certificates for the practice of dentistry shall be the same as licenses and renewals for licenses issued subsequent to May 1, 1977.

(3) A person who is determined by the board as being unable to practice dentistry due to a disability.
(4) A person who has been granted an inactive license under IC 25-14-1-27.1.


IC 25-14-3-2
"Approved organization" defined
Sec. 2. "Approved organization" means the following:
(1) United States Department of Education.
(2) Council on Post-Secondary Education.
(3) National Dental Association.
(4) American Dental Association.
(5) Academy of General Dentistry.
(6) National Dental Hygiene Association.
(7) American Dental Hygiene Association.
(8) Council on Hospital Dental Services.
(9) American Medical Association.
(10) Joint Commission on Accreditation of Hospitals.
(11) Joint Commission on Healthcare Organizations.
(12) Study clubs approved by the board.
(13) Federal, state, and local government agencies.
(14) International organizations approved by the American Dental Association.
(15) A college or other teaching institution accredited by the United States Department of Education or the Council on Post-Secondary Education.
(16) A national, state, district, or local organization that operates as an affiliated entity under the approval of any organization listed in subdivisions (1) through (14).
(17) An internship or a residency program conducted in a hospital that has been approved by an organization listed in subdivisions (1) through (15).
(18) Any other organization or individual approved by the board.


IC 25-14-3-3
"Board" defined
Sec. 3. As used in this chapter, "board" refers to the state board of dentistry established under IC 25-14-1-2.


IC 25-14-3-4
"Continuing education course" defined
Sec. 4. As used in this chapter, "continuing education course" means an orderly process of instruction designed to directly enhance the practicing dentist's knowledge and skill in providing relevant dentist services that is approved by an approved organization.


IC 25-14-3-5
"License" defined
Sec. 5. As used in this chapter, "license" means a license to practice dentistry under IC 25-14-1-3.


IC 25-14-3-6
"License period" defined
Sec. 6. As used in this chapter, "license period" means the two (2) year period beginning on March 2, 1992, and every two (2) years thereafter.


IC 25-14-3-7
"Study club" defined
Sec. 7. As used in this chapter, "study club" means a group of at least five (5) dentists who do the following:
(1) Organize for the purpose of scientific study.
(2) Operate under the direction of elected officers.
(3) Maintain written bylaws.
(4) Conduct regular meetings.
(5) Maintain written attendance records of all meetings.


IC 25-14-3-8
Course credit hour requirements
Sec. 8. (a) A dentist must complete at least twenty (20) credit hours in continuing education courses each license period.
(b) Credit hours may be applied under this section only toward the credit hour requirement for the license period during which the credit hours are earned.
(c) During a license period, a dentist may not earn more than five (5) credit hours toward the requirements under this section for continuing education courses that relate specifically to the area of practice management.


IC 25-14-3-9
Award of credit hours
Sec. 9. Credit hours under section 8 of this chapter must be awarded as follows:
(1) A course presented by a college under a regular curriculum is awarded one (1) credit hour for each lecture hour attended.
(2) A course not listed in subdivision (1) is awarded one (1) credit hour for each lecture hour and two (2) credit hours for each participation hour of the course.
(3) A speech, lecture, or other presentation by a dentist is awarded two (2) credit hours if the following conditions are met:
(A) The presentation concerns a subject that would be suitable for a continuing education course.
(B) The subject of the presentation is eligible for credit only once, regardless of the number of times it is presented.
(C) The dentist maintains a record of the time, place, and date of the presentation.
(D) The presentation is sponsored by an approved organization.
(E) Not more than four (4) credit hours are awarded to the dentist under this subdivision during a license period.
(4) Attendance at a state, regional, or national meeting sponsored by an approved organization is awarded one (1) credit hour.
(5) Attendance at a meeting of a study club that uses films, audio cassettes, live presentations, or written materials sponsored by the American Dental Association is awarded one (1) credit hour. However, a dentist may not receive credit under this subdivision for more than four (4)
credit hours during a license period.

(6) Attendance at a meeting of a study club featuring a
guest speaker whose presentation concerns a subject
suitable for a continuing education course is awarded one
(1) credit hour for each hour attended.

(7) A home study course that is presented by an
approved organization and meets the requirements under
this subdivision is awarded the same number of credit hours
given to courses provided by a college. If the approved
organization does not assess credit hours to a course under
this subdivision, the course is awarded one (1) credit hour
for each hour of study material. Subject matter of the course
may be presented by written, audio, or video materials.

As added by P.L.185-1991, SEC.7. Amended by P.L.119-

IC 25-14-3-10 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-14-3-11
Compliance
Sec. 11. The board and the dentist shall comply with the
requirements under IC 25-1-4 concerning continuing
education.
As added by P.L.185-1991, SEC.7. Amended by P.L.269-

IC 25-14-3-12
Board supervision of course offerings; rules
Sec. 12. (a) A member of the board may attend or
monitor a continuing education course.

(b) An approved organization shall provide the board with
course information or materials requested by the board.

(c) If the board determines that an approved organization
does not meet the requirements of this chapter, the board
shall do the following:

(1) Provide written notification to the organization of the
noncompliance specifying the items of noncompliance and
the conditions of reinstatement.

(2) Deny credit hours awarded by the organization from
the time that the organization receives a notice until the date
of reinstatement.

(3) Make reasonable efforts to notify dentists of the
organization’s noncompliance status.

(d) The board shall adopt rules under IC 4-22-2 to
implement this chapter.

IC 25-14-3-13 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-14-3-14 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-14-3-15 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-14-3-16
Location of course offerings
Sec. 16. Continuing education courses must be made
available in all geographical regions of Indiana.

IC 25-14-4
Chapter 4. Referral Services

IC 25-14-4-1
Application of chapter
Sec. 1. This chapter does not apply to:

(1) any individual, agency, association, or corporation
not organized or incorporated for pecuniary profit or financial
gain;

(2) any organization or association that is exempt from
taxation under Section 501(c) of the Internal Revenue Code;
or

(3) any policy issued under IC 27 or entity licensed or
regulated under IC 27, including the following:

(A) A health maintenance organization under IC 27-
13.

(B) A claim review agent under IC 27-8-16.

(C) A utilization review agent under IC 27-8-17.

(D) A preferred provider arrangement under IC 27-8-
11.

(E) An insurance administrator under IC 27-1-25.
As added by P.L.33-1993, SEC.23. Amended by P.L.26-
1994, SEC.8.

IC 25-14-4-2
Disclosure that dentist paid referral fee for participation
in service
Sec. 2. A person, firm, partnership, association or
corporation, or agent or employee that engages in for profit
any business or service that in whole or in part includes the
referral or recommendation of persons to a dentist for any
form of dental care or treatment must disclose to a
prospective patient at the time the prospective patient
makes the contact with the service that the licensed dentist
has paid a fee for participation in the service.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-3
Out-of-state dental referrals to business not meeting
chapter requirements
Sec. 3. A dentist may not enter into a contract or other
form of agreement to accept for dental care or treatment a
person referred or recommended for the care or treatment
by a dental referral service business located in or doing
business in another state if the dental referral service
business does not meet the requirements of this chapter.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-4
Advertisements by dental referral services; necessary
disclaimers
Sec. 4. A for-profit dental referral service that advertises
must include in each advertisement an audible or a written
disclaimer revealing that:

(1) Each subscribing member of the for-profit dental
referral service is a dentist who has paid a fee to participate
in the service.

(2) Dentists who are members of the for-profit dental
referral service are not more or less qualified than dentists
who are not members of the service.
As added by P.L.33-1993, SEC.23.
IC 25-14-4-5
Advertisements; prohibited acts
Sec. 5. For-profit dental referral service advertisements may not do any of the following:
(1) Misrepresent facts, be deceptive, or create false or misleading impressions regarding the skills or abilities of subscribing dentists.
(2) Contain statements or make recommendations concerning nonspecific or non bonafide claims of providing referrals to the most qualified dentists or dental practices.
(3) Describe:
(A) a review process;
(B) a screening; or
(C) qualifications or information verification; that misleads the public into thinking a dentist subscriber has obtained a special recognition or joined a selective group of licensed dentists by being a member of the for-profit dental referral service.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-6
Chapter violation; offenses
Sec. 6. A person who violates this chapter commits a Class A misdemeanor.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-7
Injunctive relief
Sec. 7. (a) This section is in addition to the penalty imposed under section 6 of this chapter.
(b) Whenever there is a violation of this chapter, the attorney general may seek an injunction in a circuit or superior court with jurisdiction in the county where the violation occurred to enjoin and restrain the continuance of the violation.
(c) If the court finds that the defendant has violated this chapter, an injunction may be issued by the court enjoining and restraining any further violation without requiring proof that any person has been injured or damaged by the defendant's action.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-8
Notice of intent to bring action against referral service; opportunity to cure violation
Sec. 8. (a) No legal action under this chapter may be commenced by the attorney general against a for-profit dental referral service until the attorney general has given the service thirty (30) days written notice of the violation.
(b) Notice under subsection (a) must comply with the following:
(1) Be sent by registered or certified mail, return receipt requested.
(2) Include a copy of the code sections of the chapter alleged to have been violated.
(3) Describe the alleged unlawful advertising.
(4) Include a statement that the for-profit dental referral service has the lesser of:
   (A) thirty (30) days from the date the notice was received; or
   (B) thirty-five (35) days from the date the notice was sent;
   (c) A for-profit dental service that does not cure a violation within the time period required under subsection (b) is subject to sections 6 and 7 of this chapter.
As added by P.L.33-1993, SEC.23.

IC 25-14-4-9
Rules and guidelines
Sec. 9. Before January 2, 1994, the state board of dentistry established by IC 25-14-1-2 shall adopt rules under IC 4-22-2 that may include the following:
(1) Guidelines regarding the referral of subscribing dentists for specialty services.
(2) Guidelines for ensuring that patient referrals by the for-profit dental referral service must be initiated by a patient.
(3) Guidelines for ensuring that the for-profit dental referral service does not impose a fee on the subscribing dentists dependent upon the number of referrals or the amount of professional fees paid by the patient to the dentist.
(4) Guidelines for ensuring there is a prohibition against for-profit dental referral services limiting dentist subscribers solely on the basis of a dentist's exclusive geographic location.
(5) Guidelines regarding dentists basing fees on services performed with no additional fee charged because the patient is a referral.
(6) Guidelines for preventing for-profit dental referral service advertisements that are false, misleading, or deceptive.
(7) Guidelines considering the content of disclaimers required in section 4 of this chapter for dental referral services that advertise on television or any other medium that combine audio and video.
(8) A procedure for a for-profit dental referral service to forward complaints to the proper state authority.
(9) Appropriate safeguards to ensure that all subscribing dentists are fairly selected for referrals on a rotating basis.
(10) Guidelines for ensuring that a for-profit dental referral service must charge each subscribing dentist in the same advertising market the same fee to become a member of the service.

INDIANA CODE § 25-1
ARTICLE 1. GENERAL PROVISIONS

INDIANA CODE § 25-1-1
Chapter 1. Evidence of License Applicant's Payment of Personal Property Taxes Required
IC 25-1-1-1 Issuance of license; evidence of payment of personal property tax
Sec. 1. It is unlawful for any board, officer, or person to issue any license, as defined in section 2 of this
chapter, to any person who is a resident of this state, unless the applicant, at the time he applies for such license, submits, in addition to all other requirements prescribed by law, a receipt or other evidence showing that he has paid all his personal property taxes in full. "Other evidence" in the case of all licenses issued by the bureau of motor vehicles means a statement signed by the treasurer of the county in which the applicant is a resident and the person who has paid all personal property taxes assessed against him, including all delinquent personal property tax, or, if the applicant owns no personal property subject to taxation, a signed statement from the assessor of the county in which the applicant resides certifying that he has made an affidavit to the effect that he owes no delinquent personal property tax in any county in Indiana. (Formerly: Acts 1931, c.124, s.1; Acts 1941, c.61, s.1; Acts 1943, c.124, s.1; Acts 1953, c.208, s.1.) As amended by Acts 1978, P.L.2, SEC.2501.

IC 25-1-1-3  Repealed

IC 25-1-1-4  Repealed


IC 25-1-1-1  License defined

Sec. 2. The term "license" as used in this chapter shall be construed to mean and include motor vehicle registration licenses, certificates of title showing the ownership of any motor vehicle, except those classified as passenger vehicles. (Formerly: Acts 1931, c.124, s.2; Acts 1972, P.L.183, SEC.1.)

IC 25-1-1-2  Repealed

(Repealed by Acts 1978, P.L.2, SEC.2570.)

IC 25-1-1-3  Repealed

(Repealed by Acts 1978, P.L.2, SEC.2570.)

INDIANA CODE § 25-1-1-1

Chapter 1.1. Effect of Criminal Convictions on Licensed or Registered Persons

IC 25-1-1-1-1 Denial, revocation, or suspension of license or certificate of registration; conviction of crime

Sec. 1. Except as provided under sections 2 through 3 of this chapter, a license or certificate of registration that an individual is required by law to hold to engage in a business, profession, or occupation may not be denied, revoked, or suspended because the applicant or holder has been convicted of an offense. The acts from which the applicant's or holder's conviction resulted may, however, be considered as to whether the applicant or holder should be entrusted to serve the public in a specific capacity. (Formerly: Acts 1973, P.L.249, SEC.1.) As amended by Acts 1978, P.L.2, SEC.2502; P.L.67-1990, SEC.6.

IC 25-1-1-1-2 Suspension or revocation of license or certificate; conviction for drug related offense

Sec. 2. A board, a commission, or a committee may suspend or revoke a license or certificate issued under this title by the board, the commission, or the committee if the individual who holds the license or certificate is convicted of any of the following:

1. Possession of cocaine or a narcotic drug under IC 35-48-4-6.
2. Possession of methamphetamine under IC 35-48-4-6.1.
3. Possession of a controlled substance under IC 35-48-4-7(a).
4. Fraudulently obtaining a controlled substance under IC 35-48-4-7(b).
5. Manufacture of paraphernalia as a Class D felony under IC 35-48-4-8.1(b).
6. Dealing in paraphernalia as a Class D felony under IC 35-48-4-8.5(b).
7. Possession of paraphernalia as a Class D felony under IC 35-48-4-8.3(b).
8. Possession of marijuana, hash oil, or hashish as a Class D felony under IC 35-48-4-11.
10. An offense relating to registration, labeling, and prescription forms under IC 35-48-4-14.
11. Conspiracy under IC 35-41-5-2 to commit an offense listed in subdivisions (1) through (10).
12. Attempt under IC 35-41-5-1 to commit an offense listed in subdivisions (1) through (10).
13. An offense in any other jurisdiction in which the elements of the offense for which the conviction was entered are substantially similar to the elements of an offense described under subdivisions (1) through (12).


IC 25-1-1-1-3 Suspension or revocation of license or certificate; conviction for additional drug related offenses

Sec. 3. A board, a commission, or a committee shall revoke or suspend a license or certificate issued under this title by the board, the commission, or the committee if the individual who holds the license or certificate is convicted of any of the following:

1. Dealing in or manufacturing cocaine or a narcotic drug under IC 35-48-4-1.
2. Dealing in methamphetamine under IC 35-48-4-1.1.
3. Dealing in a schedule I, II, or III controlled substance under IC 35-48-4-2.
4. Dealing in a schedule IV controlled substance under IC 35-48-4-3.
5. Dealing in a schedule V controlled substance under IC 35-48-4-4.
6. Dealing in a substance represented to be a controlled substance under IC 35-48-4-4.5.
7. Knowingly or intentionally manufacturing, advertising, distributing, or possessing with intent to manufacture, advertise, or distribute a substance represented to be a controlled substance under IC 35-48-4-4.6.
9. Dealing in marijuana, hash oil, or hashish under IC 35-48-4-10(b).
10. Conspiracy under IC 35-41-5-2 to commit an offense listed in subdivisions (1) through (9).
11. Attempt under IC 35-41-5-1 to commit an offense
listed in subdivisions (1) through (9).
(12) An offense in any other jurisdiction in which the
elements of the offense for which the conviction was
entered are substantially similar to the elements of an
offense described under subdivisions (1) through (11).
(13) A violation of any federal or state drug law or rule
related to wholesale legend drug distributors licensed
under IC 25-26-14.

Sec. 6. As used in this chapter, "practitioner"
means a person that holds:
(1) an unlimited license, certificate, registration, or
permit;
(2) a limited or probationary license, certificate,
registration, or permit;
(3) a temporary license, certificate, registration, or
permit; or
(4) an intern permit;
issued by a board regulating a profession or an occupation.

IC 25-1-1.2-7 Order for suspension or denial of license;
notice to practitioner; contents; reinstatement
Sec. 7. (a) Upon receiving an order of a court
issued under IC 31-14-12-5 or IC 31-16-12-8 (or IC 31-1-
11.5-13(k) or IC 31-6-6.1-16(k) before their repeal), the
board shall:
(1) suspend the license of the practitioner; or
(2) deny the application of the applicant;
who is the subject of the order.
(b) Upon receiving an order of a court issued
under IC 31-14-12-5 or IC 31-16-12-8 (or IC 31-1-11.5-13(k)
or IC 31-6-6.1-16(k) before their repeal), the board shall
promptly mail a notice to the last known address of the
person who is the subject of the order, stating the following:
(1) That the practitioner's license has been suspended,
beginning five (5) business days after the date the
notice is mailed, and that the suspension will terminate
five (10) business days after the board
receives an order allowing reinstatement from the court
that issued the suspension order.
(2) That the practitioner has the right to petition for
reinstatement of the practitioner's license to the court
that issued the order for suspension.
(c) The board may not reinstate a license suspended
under this section until the board receives an order allowing
reinstatement from the court that issued the order for
suspension.
As added by P.L.133-1995, SEC.19. Amended by P.L.23-

IC 25-1-1.2-8 Notice of delinquency; contents;
delinquency finding; probationary status; suspension;
reinstatement
Sec. 8. (a) The board shall, upon receiving an
order from the bureau under IC 31-25-4-32(e), send a notice
to the practitioner identified by the bureau that includes the
following:
(1) Specifies that the practitioner is delinquent and is
subject to an order placing the practitioner on
probationary status.
(2) Describes the amount of child support that the
practitioner is in arrears.
(3) Explains that unless the practitioner contacts the
bureau and:
(A) pays the practitioner's child support arrearage in
full;
(B) establishes a payment plan with the bureau to pay
the arrearage, which must include an income
withholding order under IC 31-16-15-2 or IC 31-16-
15-2.5; or

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(C) requests a hearing under IC 31-25-4-33; within twenty (20) days after the date the notice is mailed, the board shall place the practitioner on probationary status.

(4) Explains that the practitioner may contest the bureau's determination that the practitioner is delinquent and subject to an order placing the practitioner on probationary status by making written application to the bureau within twenty (20) days after the date the notice is mailed.

(5) Explains that the only basis for contesting the bureau's determination that the practitioner is delinquent and subject to an order placing the practitioner on probationary status is a mistake of fact.

(6) Explains the procedures to:

(A) pay the practitioner's child support arrearage in full;

(B) establish a payment plan with the bureau to pay the arrearage, which must include an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5;

(C) request a hearing under IC 31-25-4-33.

(7) Explains that the probation will terminate ten (10) business days after the board receives a notice from the bureau that the practitioner has:

(A) paid the practitioner's child support arrearage in full; or

(B) established a payment plan with the bureau to pay the arrearage which includes an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5.

(b) If the board is advised by the bureau that the practitioner either requested a hearing and failed to appear or appeared and was found to be delinquent, the board shall promptly mail a notice to the practitioner who is the subject of the order stating the following:

(1) That the practitioner's license has been placed on probationary status, beginning five (5) business days after the date the notice is mailed, and that the probation will terminate ten (10) business days after the board receives a notice from the bureau that the person has:

(A) paid the person's child support arrearage in full; or

(B) established a payment plan with the bureau to pay the arrearage which includes an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5.

(2) That if the board is advised by the bureau that the practitioner whose license has been placed on probationary status has failed to:

(A) pay the person's child support arrearage in full; or

(B) establish a payment plan with the bureau to pay the arrearage which includes an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5; within twenty (20) days after the date the notice is mailed, the board shall suspend the practitioner's license.

(c) If the board is advised by the bureau that the practitioner whose license has been placed on probationary status has failed to:

(1) pay the person's child support arrearage in full; or

(2) establish a payment plan with the bureau to pay the arrearage which includes an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5; within twenty (20) days after the date the notice is mailed, the board shall suspend the practitioner's license.

(d) The board may not reinstate a license or permit placed on probation or suspended under this section until the board receives a notice from the bureau that the person has:

(1) paid the person's child support arrearage in full; or

(2) established a payment plan with the bureau to pay the arrearage which includes an income withholding order under IC 31-16-15-2 or IC 31-16-15-2.5.


IC 25-1-1.2-9 Repealed
(Repealed by P.L.23-1996, SEC.33.)

IC 25-1-1.2-10 Repealed
(Repealed by P.L.23-1996, SEC.33.)

INDIANA CODE § 25-1-2

Chapter 2. Renewal of Licenses Granted by State Agencies. Notice of Expiration

IC 25-1-2-1 Declaration of intent

Sec. 1. It is the declared intent of the general assembly by the enactment of this law to require those agencies which are authorized to issue the licenses designated in section 2.1 of this chapter, in the interests of efficiency and economy in the administration of government, to issue such designated permits, licenses, certificates of registration, and other evidences of compliance with statute or regulation, and renewal thereof, for periods of two (2) years duration rather than upon an annual basis, and at the time of issuance or reissuance, or at the time designated by law for the collection of fees therefor, to require the payment of such fees for a period of two (2) years rather than for one (1) year.

(Formerly: Acts 1961, c.79, s.1.) As amended by P.L.1-1990, SEC.246.

IC 25-1-2-2 Repealed
(Repealed by P.L.1-1990, SEC.247.)

IC 25-1-2-2.1 Two year or longer period for certain licenses

Sec. 2.1. Rather than being issued annually, the following permits, licenses, certificates of registration, or evidences of authority granted by a state agency must be issued for a period of two (2) years or for the period specified in the article under which the permit, license, certificate of registration, or evidence of authority is issued if the period specified in the article is longer than two (2) years:

(1) Certified public accountants, public accountants, and accounting practitioners.

(2) Architects and landscape architects.

(3) Dry cleaners.
(4) Professional engineers.
(5) Land surveyors.
(6) Real estate brokers.
(7) Real estate agents.
(8) Security dealers' licenses issued by the
securities commissioner.
(9) Dental hygienists.
(10) Dentists.
(11) Veterinarians.
(12) Physicians.
(13) Chiropractors.
(14) Physical therapists.
(15) Optometrists.
(16) Pharmacists and assistants, drugstores or
pharmacies.
(17) Motels and mobile home community
licenses.
(18) Nurses.
(19) Podiatrists.
(20) Occupational therapists and occupational
therapy assistants.
(21) Respiratory care practitioners.
(22) Social workers, marriage and family
therapists, and mental health counselors.
(23) Real estate appraiser licenses and
certificates issued by the real estate appraiser licensure
and certification board.
(25) Physician assistants.
(26) Dietitians.
(27) Hypnotists.
(28) Athlete agents.
(29) Manufactured home installers.
(30) Home inspectors.
(31) Massage therapists.

As added by P.L.1-1990, SEC.248. Amended by P.L.186-
SEC.1; P.L.234-1995, SEC.1; P.L.175-1997, SEC.2;
P.L.147-1997, SEC.5; P.L.84-1998, SEC.1; P.L.54-2001,
SEC.3; P.L.162-2002, SEC.1; P.L.145-2003, SEC.1; P.L.

IC 25-1-2-3 Authorization to issue and reissue two year
licenses
Sec. 3. Effective October 1, 1961, such licensing
agencies as are authorized to issue any of the foregoing
shall issue and reissue such licenses and collect the fees for
the same on the basis of two (2) years and the dates by
month and day which govern the issuance or reissuance of
licenses for one (1) year shall govern the issuance or
reissuance of licenses for two (2) years; provided, that entire
fees for a two (2) year period shall be payable before
issuance thereof on the day and month designated for
payment of fees for one (1) year licenses.
(Formerly: Acts 1961, c.79, s.4.) As amended by Acts 1982,
P.L.154, SEC.1.

IC 25-1-2-4 Rebates and proration of fees
Sec. 4. Rebates and proration of fees for
fractions of a biennium shall be allowed only with respect to
the second year of such license if claim be made therefor
before the expiration of the first year for which the license
was issued.
(Formerly: Acts 1961, c.79, s.4.)

IC 25-1-2-5 Rules and regulations
Sec. 5. Notice shall be given and forms prepared
by such licensing agencies as necessary to execute the
provisions of this chapter and in order to expedite and
effectuate the conversion from one (1) year licensing
periods to those of two (2) years, such licensing agencies
may adopt and promulgate such rules and regulations they
may deem necessary in the manner prescribed by law.
(Formerly: Acts 1961, c.79, s.5.) As amended by Acts 1982,
P.L.154, SEC.2.

IC 25-1-2-6 Definitions; application of section; notice to
licensees of need to renew
Sec. 6. (a) As used in this section, "license" includes all occupational and professional licenses,
registrations, permits, and certificates issued under the
Indiana Code, and "licensee" includes all occupational and
professional licensees, registrants, permittees, and
certificate holders regulated under the Indiana Code.
(b) This section applies to the following entities
that regulate occupations or professions under the Indiana
Code:
(1) Indiana board of accountancy.
(2) Indiana grain buyers and warehouse licensing
agency.
(3) Indiana auctioneer commission.
(4) Board of registration for architects and
landscape architects.
(5) State board of barber examiners.
(6) State board of cosmetology examiners.
(7) Medical licensing board of Indiana.
(8) Secretary of state.
(9) State board of dentistry.
(10) State board of funeral and cemetery service.
(11) Worker's compensation board of Indiana.
(12) Indiana state board of health facility
administrators.
(13) Committee of hearing aid dealer examiners.
(14) Indiana state board of nursing.
(15) Indiana optometry board.
(16) Indiana board of pharmacy.
(17) Indiana plumbing commission.
(18) Board of podiatric medicine.
(19) Private investigator and security guard
licensing board.
(20) State board of registration for professional
engineers.
(21) Board of environmental health specialists.
(22) State psychology board.
(23) Indiana real estate commission.
(24) Speech-language pathology and audiology
board.
(25) Department of natural resources.
(26) State boxing commission.
(27) Board of chiropractic examiners.
(28) Mining board.
(29) Indiana board of veterinary medical
examiners.
   (30) State department of health.
   (31) Indiana physical therapy committee.
   (32) Respiratory care committee.
   (33) Occupational therapy committee.
   (34) Social worker, marriage and family therapist, and mental health counselor board.
   (35) Real estate appraiser licensure and certification board.
   (36) State board of registration for land surveyors.
   (37) Physician assistant committee.
   (38) Indiana dietitians certification board.
   (39) Indiana hypnotherapist committee.
   (40) Attorney general (only for the regulation of athlete agents).
   (41) Manufactured home installer licensing board.
   (42) Home inspectors licensing board.
   (43) Occupational Therapy Committee.
   (44) Any other occupational or professional agency created after June 30, 1981.
   (c) Notwithstanding any other law, the entities included in subsection (b) shall send a notice of the upcoming expiration of a license to each licensee at least sixty (60) days prior to the expiration of the license. The notice must inform the licensee of the need to renew and the requirement of payment of the renewal fee. If this notice of expiration is not sent by the entity, the licensee is not subject to a sanction for failure to renew if, once notice is received from the entity, the license is renewed within forty-five (45) days of the receipt of the notice.


IC 25-1-2-7 Application of IC 25-1-2-6
   Sec. 7. Section 6 of this chapter applies to the mining board (IC 22-20-1.5-2).

As added by P.L.37-1985, SEC.56.

IC 25-1-2-8 Application of chapter; fees
   Sec. 8. This chapter applies to the imposition and collection of fees under the following:
   IC 14-24-10
   IC 16-19-5-2
   IC 25-30-1-17
   IC 33-42-2-1.


IC 25-1-2-9 Repealed
   (Repealed by P.L. 194-2005, SEC. 87.)

INDIANA CODE § 25-1-3

Chapter 3. Civil Immunity of Regulatory Agencies

IC 25-1-3-1 Definitions
   Sec. 1. (a) As used in this chapter, the term "regulatory board" means any state board, commission, or state agency which licenses persons in order to regulate the practice of a particular profession or professions.
   (b) As used in this chapter, the term "board members" means members of a regulatory board.
   (c) As used in this chapter, the term "secretary" means the executive secretary or other person charged with the administration of the affairs of a regulatory board.

(Formerly: Acts 1975, P.L.268, SEC.1.)

IC 25-1-3-2 Extent of immunity from civil liability
   Sec. 2. The board members, the secretary, his staff, counsel, investigators and hearing officer of every regulatory board, except as provided in section 4 of this chapter, shall be immune from civil liability for damages for conduct within the scope and arising out of the performance of their duties. This section shall not be construed to include civil actions for damages not directly related to the investigative process and shall apply only to the process for the finding of fact of the regulatory board.

(Formerly: Acts 1975, P.L.268, SEC.1.)

IC 25-1-3-3 Immunity from civil liability; statements in course of investigatory hearing or review proceedings
   Sec. 3. Any person shall be immune from civil liability for damages for any sworn or written statements, made without malice, and transmitted to the regulatory board, executive secretary, or his staff, or made in the course of investigatory, hearing or review proceedings.

(Formerly: Acts 1975, P.L.268, SEC.1.)

IC 25-1-3-4 Regulatory boards covered
   Sec. 4. The provisions of this chapter extend to every regulatory board of the state except the disciplinary commission of the supreme court of Indiana which is protected under IC 1971, 33-2-3-1.

(Formerly: Acts 1975, P.L.268, SEC.1.)

INDIANA CODE § 25-1-4

Chapter 4. Continuing Education

IC 25-1-4-0.2 “Approved organization” defined
   Sec. 0.2. As used in this chapter, "approved organization" refers to the following:
   (1) United States Department of Education.
   (2) Council on Post-Secondary Education.
   (3) Joint Commission on Accreditation of Hospitals.
   (4) Joint Commission on Healthcare Organizations.
   (5) Federal, state, and local government agencies.
   (6) A college or other teaching institution accredited by the United States Department of Education or the Council on Post-Secondary Education.
(7) A national organization of practitioners whose members practicing in Indiana are subject to regulation by a board or agency regulating a profession or occupation under this title or IC 15.

(8) A national, state, district, or local organization that operates as an affiliated entity under the approval of an organization listed in subdivisions (1) through (7).

(9) An internship or a residency program conducted in a hospital that has been approved by an organization listed in subdivisions (1) through (7).

(10) Any other organization or individual approved by the board.


IC 25-1-4-0.3 "Board" defined
Sec. 0.3. As used in section 3 of this chapter, "board" means any of the following:

(1) Indiana board of accountancy (IC 25-2-1-2-1).

(2) Board of registration for architects and landscape architects (IC 25-4-1-2).

(3) Indiana athletic trainers board (IC 25-5-1-2-1).

(4) Indiana auctioneer commission (IC 25-6.1-2-1).

(5) State board of barber examiners (IC 25-7-5-1).

(6) State boxing commission (IC 25-9-1).

(7) Board of chiropractic examiners (IC 25-10-1).

(8) State board of cosmetology examiners (IC 25-8-3-1).

(9) State board of dentistry (IC 25-14-1).

(10) Indiana dietitians certification board (IC 25-14.5-2-1).

(11) State board of registration for professional engineers (IC 25-31-1-3).

(12) Board of environmental health specialists (IC 25-32).

(13) State board of funeral and cemetery service (IC 25-15-9).

(14) Indiana state board of health facility administrators (IC 25-19-1).

(15) Committee on hearing aid dealer examiners (IC 25-20-1-1.5).

(16) Home inspectors licensing board (IC 25-20.2-3-1).

(17) Indiana hypnotist committee (IC 25-20.5-1-7).

(18) State board of registration for land surveyors (IC 25-21.5-2-1).

(19) Manufactured home installer licensing board (IC 25-23.7).

(20) Medical licensing board of Indiana (IC 25-22-5-2).

(21) Indiana state board of nursing (IC 25-23-1).

(22) Occupational therapy committee (IC 25-23-5).

(23) Indiana optometry board (IC 25-24).

(24) Indiana board of pharmacy (IC 25-26).

(25) Indiana physical therapy committee (IC 25-27-1).

(26) Physician assistant committee (IC 25-27-5).

(27) Indiana plumbing commission (IC 25-28.5-1-3).

(28) Board of podiatric medicine (IC 25-29-2-1).

(29) Private investigator and security guard licensing board (IC 25-30-1-5.2).

(30) State psychology board (IC 25-33).

(31) Indiana real estate commission (IC 25-34.1-2).

(32) Real estate appraiser licensure and certification board (IC 25-34.1-8).

(33) Respiratory care committee (IC 25-34.5).

(34) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).

(35) Speech-language pathology and audiology board (IC 25-35.6-2).

(36) Indiana board of veterinary medical examiners (IC 15-5-1-1).


IC 25-1-4-0.5 "Continuing education" defined
Sec. 0.5. As used in this chapter, "continuing education" means an orderly process of instruction:

(1) that is approved by:

(A) an approved organization or the board for a profession or occupation other than a real estate appraiser; or

(B) for a real estate appraiser:

(i) the Appraiser Qualifications Board, under the regulatory oversight of the Appraisal Subcommittee established under Title XI of the Financial Institutions Reform, Recovery and Enforcement Act of 1989; or

(ii) the real estate appraiser licensure and certification board established under IC 25-34.1-8 for specific courses and course subjects, as determined by the real estate appraiser licensure and certification board; and

(2) that is designed to directly enhance the practitioner's knowledge and skill in providing services relevant to the practitioner's profession or occupation.


IC 25-1-4-0.6 "Practitioner" defined
Sec. 0.6. As used in section 3 of this chapter, "practitioner" means an individual who holds:

(1) an unlimited license, certificate, or registration;

(2) a limited or probationary license, certificate, or registration;

(3) a temporary license, certificate, registration, or permit;

(4) an intern permit; or

(5) a provisional license; issued by the board regulating the profession in question.

As added by P.L.269-2001, SEC.3.

IC 25-1-4-1 Requirement
Sec. 1. No board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may require continuing education as a condition of certification, registration, or licensure unless so specifically authorized or mandated by statute.


IC 25-1-4-2 Promotion
Sec. 2. A board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may cooperate with members of the profession or occupation it regulates to promote continuing
education within the profession or occupation.

IC 25-1-4-3 Sworn statements of compliance; retention of copies of certificates of completion; audits
Sec. 3. (a) Notwithstanding any other law, a board that is specifically authorized or mandated to require continuing education as a condition to renew a registration, certification, or license must require a practitioner to comply with the following renewal requirements:

(1) The practitioner shall provide the board with a sworn statement executed by the practitioner that the practitioner has fulfilled the continuing education requirements required by the board.
(2) The practitioner shall retain copies of certificates of completion for continuing education courses for three years from the end of the licensing period for which the continuing education applied. The practitioner shall provide the board with copies of the certificates of completion upon the board's request for a compliance audit.

(b) Following every license renewal period, the board shall randomly audit for compliance more than one percent (1%) but less than ten percent (10%) of the practitioners required to take continuing education courses.

IC 25-1-4-3.2 Distance learning methods
Sec. 3.2. A board or agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 shall require that at least one-half (50%) of all continuing education requirements must be allowed by distance learning methods, except for doctors, nurses, chiropractors, optometrists and dentists.

IC 25-1-4-4 Hardship waiver
Sec. 4. A board, a commission, a committee, or an agency regulating a profession or occupation under this title or under IC 15, IC 16, or IC 22 may grant an applicant a waiver from all or part of the continuing education requirement for a renewal period if the applicant was not able to fulfill the requirement due to a hardship that resulted from any of the following:

(1) Service in the armed forces of the United States during a substantial part of the renewal period.
(2) An incapacitating illness or injury.
(3) Other circumstances determined by the board or agency.

IC 25-1-4-5 Failure to comply; license suspension; penalties; reinstatement requirements
Sec. 5. (a) Notwithstanding any other law, if the board determines that a practitioner has not complied with this chapter or IC 25-1-8-6 at the time that the practitioner applies for license renewal or reinstatement or after an audit conducted under section 3 of this chapter, the board shall do the following:

(1) Send the practitioner notice of noncompliance by certified mail.
(2) As a condition of license renewal or reinstatement, require the practitioner to comply with subsection (b).
(3) For license renewal, issue a conditional license to the practitioner that is effective until the practitioner complies with subsection (b).

(b) Upon receipt of a notice of noncompliance under subsection (a), a practitioner shall do either of the following:

(1) If the practitioner believes that the practitioner has complied with this chapter or IC 25-1-8-6, if applicable, within twenty-one (21) days of receipt of the notice, send written notice to the board requesting a review so that the practitioner may submit proof of compliance.
(2) If the practitioner does not disagree with the board's determination of noncompliance, do the following:

(A) Except as provided in subsection (d), pay to the board a civil penalty not to exceed one thousand dollars ($1,000) within twenty-one (21) days of receipt of the notice.
(B) Acquire, within six (6) months after receiving the notice, the number of credit hours needed to achieve full compliance.
(C) Comply with all other provisions of this chapter.

(c) If a practitioner fails to comply with subsection (b), the board shall immediately suspend or refuse to reinstate the license of the practitioner and send notice of the suspension or refusal to the practitioner by certified mail.

(d) If the board determines that a practitioner has knowingly or intentionally made a false or misleading statement to the board concerning compliance with the continuing education requirements, in addition to the requirements under this section the board may impose a civil penalty of not more than five thousand dollars ($5,000) under subsection (b)(2)(A).

(e) The board shall:

(1) reinstate a practitioner's license; or
(2) renew the practitioner's license in place of the conditional license issued under subsection (a)(3); if the practitioner supplies proof of compliance with this chapter under subsection (b)(3) or IC 25-1-8-6, if applicable.

IC 25-1-4-6 Failure to comply; denial of license renewal; penalties
Sec. 6. (a) Notwithstanding any other law, if at the time a practitioner applies for license renewal or reinstatement or after an audit conducted under section 3 of this chapter, the board determines that the practitioner has failed to comply with this chapter or IC 25-1-8-6, if applicable, and the practitioner has previously received a notice of noncompliance under section 5(a) of this chapter during the preceding license period, the board shall do the following:

(1) Provide the practitioner notice of noncompliance by certified mail.
(2) Deny the practitioner's application for license renewal or reinstatement.

(b) The board shall reinstate a license not renewed under subsection (a) upon occurrence of the following:

(1) Payment by a practitioner to the board of a civil penalty determined by the board, but not to exceed one thousand dollars ($1,000).
IC 25-1-4-7 Credit Hours
Sec. 7. Credit hours acquired by a practitioner under section 5(b)(2) of this chapter may not apply to the practitioner's credit hour requirement for the license period in which the credit hours are acquired.  
As added by P.L.157-2006, SEC.16.

IC 25-1-4-8 Rules
Sec. 8. The board may adopt rules under IC 4-22-2 to implement this chapter.  
As added by P.L.157-2006, SEC.17.

INFORMATION CODE § 25-1-5

Chapter 5. Professional Licensing Agency

IC 25-1-5-1 Centralization of staff, functions, and services; purpose
Sec. 1. The centralization of staff, functions, and services contemplated by this chapter shall be done in such a way as to enhance the Indiana professional licensing agency's ability to:
(1) make maximum use of data processing as a means of more efficient operation; and
(2) provide more services and carry out functions of superior quality.

IC 25-1-5-2 Definitions
Sec. 2. As used in this chapter:
(1) "Agency" means the Indiana professional licensing agency established by section 3 of this chapter.
(2) "Board" means any agency, board, advisory committee, or group included in section 3 of this chapter.

IC 25-1-5-3 Indiana professional licensing agency; functions, duties, and responsibilities
Sec. 3. (a) There is established the Indiana professional licensing agency. The agency shall perform all administrative duties and functions, and responsibilities assigned by law or rule to the executive director, secretary, or other statutory administrator of the following:
(1) Board of chiropractic examiners (IC 25-10-1).
(2) State board of dentistry (IC 25-14-1).
(3) Indiana state board of health facility administrators (IC 25-19-1).
(4) Medical licensing board of Indiana (IC 25-22.5).
(5) Indiana state board of nursing (IC 25-23-1).
(6) Indiana optometry board (IC 25-24).
(7) Indiana board of pharmacy (IC 25-26).
(8) Board of podiatric medicine (IC 25-29-2-1).
(9) Board of environmental health specialists (IC 25-32).
(10) Speech-language pathology and audiology board (IC 25-35.6-2).
(11) State psychology board (IC 25-33).
(12) Indiana board of veterinary medical examiners (IC 15-5-1.1).
(13) Controlled substances advisory committee (IC 35-48-2-1).
(14) Committee of hearing aid dealer examiners (IC 25-20).
(15) Indiana physical therapy committee (IC 25-27).
(16) Respiratory care committee (IC 25-34.5).
(17) Occupational therapy committee (IC 25-23.5).
(18) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
(19) Physician assistant committee (IC 25-27.5).
(20) Indiana athletic trainers board (IC 25-5.1-2-1).
(21) Indiana dietitians certification board (IC 25-14.5-2-1).
(22) Indiana hypnotist committee (IC 25-20.5-1-7).
(b) Nothing in this chapter may be construed to give the agency policy making authority, which authority remains with each board.

IC 25-1-5-4 Additional duties and functions; staff
Sec. 4. (a) The agency shall employ necessary staff, including specialists and professionals, to carry out the administrative duties and functions of the boards, including but not limited to:
(1) notice of board meetings and other communication services;
(2) recordkeeping of board meetings, proceedings, and actions;
(3) recordkeeping of all persons licensed, regulated, or certified by a board;
(4) administration of examinations; and
(5) administration of license or certificate issuance or renewal.
(b) In addition the agency:
(1) shall prepare a consolidated statement of the budget requests of all the boards in section 3 of this chapter;
(2) may coordinate licensing or certification renewal cycles, examination schedules, or other routine activities to efficiently utilize agency staff, facilities, and transportation resources, and to improve accessibility of board functions to the public; and
(3) may consolidate, where feasible, office space, recordkeeping, and data processing services.
(c) In administering the renewal of licenses or certificates under this chapter, the agency shall send a notice of the upcoming expiration of a license or certificate to each holder of a license or certificate at least sixty (60)
the office of the attorney general shall conduct an investigation. Upon completion of the investigation, the office of the attorney general may file a petition alleging that the applicant has engaged in activity described in IC 25-1-9-4. If the office of the attorney general files a petition, the board shall set the matter for a hearing. If, after the hearing, the board finds the practitioner violated IC 25-1-9-4, the board may impose sanctions under IC 25-1-9-9. The board may delay issuing the renewal beyond the ninety (90) days after the renewal date until a final determination is made by the board. The applicant's license remains valid until the final determination of the board is rendered unless the renewal is denied or the license is summarily suspended under IC 25-1-9-10.

(j) The license of the applicant for a license renewal remains valid during the ninety (90) day period unless the license renewal is denied following a personal appearance by the applicant before the board before the end of the ninety (90) day period. If the ninety (90) day period expires without action by the board, the license shall be automatically renewed at the end of the ninety (90) day period.

(k) Notwithstanding any other statute, the agency may stagger license or certificate renewal cycles. However, if a renewal cycle for a specific board or committee is changed, the agency must obtain the approval of the affected board or committee.

(l) An application for a license, certificate, registration, or permit is abandoned without an action of the board, if the applicant does not complete the requirements to complete the application within one (1) year after the date on which the application was filed. However, the board may, for good cause shown, extend the validity of the application for additional thirty (30) day periods. An application submitted after the abandonment of an application is considered a new application.


IC 25-1-5-5 Executive Director

Sec. 5. (a) The agency shall be administered by an executive director appointed by the governor who shall serve at the will and pleasure of the governor.

(b) The executive director must be qualified by experience and training.

(c) The term "executive director" or "secretary", or any other statutory term for the administrative officer of a board listed in section 3 of this chapter, means the executive director of the agency or the executive director's designee.

(d) The executive director is the chief fiscal officer of the agency and is responsible for hiring of all staff, and for procurement of all services and supplies in accordance with IC 5-22. The executive director and the employees of the agency are subject to IC 4-15-1-8 but are not under IC 4-15-2. The executive director may appoint not to exceed three (3) deputy directors, who must be qualified to work for the boards which are served by the agency.

(e) The executive director shall execute a bond payable to the state, with surety to consist of a surety or guaranty corporation qualified to do business in Indiana, in an amount fixed by the state board of accounts, conditioned upon the
faithful performance of duties and the accounting for all money and property that come into the executive director's hands or under the executive director's control. The executive director may likewise cause any employee of the agency to execute a bond if that employee receives, disburses, or in any way handles funds or property of the agency. The costs of any such bonds shall be paid from funds available to the agency.

(f) The executive director may present to the general assembly legislative recommendations regarding operations of the agency and the boards it serves, including adoption of four (4) year license or certificate renewal cycles wherever feasible.

(g) The executive director may execute orders, subpoenas, continuances, and other legal documents on behalf of a board or committee when requested to do so by the board or committee.

(h) The executive director or the executive director's designee may, upon request of a board or committee, provide advice and technical assistance on issues that may be presented to the boards or committees.


IC 25-1-5-6 Executive director; representatives; staff placement

Sec. 6. (a) The executive director may designate certain employees of the agency to represent the executive director of the agency at the board meetings, proceedings, or other activities of the board.

(b) The executive director shall assign staff to individual boards and shall work with the boards to ensure efficient utilization and placement of staff.


IC 25-1-5-7 Repealed

(Repealed by P.L.186-1990, SEC.17.)

IC 25-1-5-8 Repealed

(Repealed by P.L. 206-2005, SEC. 15)

IC 25-1-5-9 Submission of certified document as proof of required diploma

Sec. 9. If a board or committee requires an applicant for a certificate or license to submit a certified copy of a diploma showing that the applicant graduated from a school or program as a condition for certification or licensure, the applicant may satisfy this requirement by submitting another certified document that shows that the applicant graduated from or received the required diploma from the applicable school or program.

As added by P.L.177-1996, SEC.1.

IC 25-1-5-10 Provider profiles

Sec. 10. (a) As used in this section, "provider" means an individual licensed, certified, registered, or permitted by any of the following:

(1) Board of chiropractic examiners (IC 25-10-1).
(2) State board of dentistry (IC 25-14-1).
(3) Indiana state board of health facility administrators (IC 25-19-1).
(4) Medical licensing board of Indiana (IC 25-22.5-2).
(5) Indiana state board of nursing (IC 25-23-1).
(6) Indiana optometry board (IC 25-24).
(7) Indiana board of pharmacy (IC 25-26).
(8) Board of podiatric medicine (IC 25-29-2-1).
(9) Board of environmental health specialists (IC 25-32-1).
(10) Speech-language pathology and audiology board (IC 25-35.6-2).
(11) State psychology board (IC 25-33).
(12) Indiana board of veterinary medical examiners (IC 15-5-1.1).
(13) Indiana physical therapy committee (IC 25-27).
(14) Respiratory care committee (IC 25-34.5).
(15) Occupational therapy committee (IC 25-23.5).
(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
(17) Physician assistant committee (IC 25-27.5).
(18) Indiana athletic trainers board (IC 25-5.1-2-1).
(19) Indiana dietitians certification board (IC 25-14.5-2-1).
(20) Indiana hypnotist committee (IC 25-20.5-1-7).

(b) The agency shall create and maintain a provider profile for each provider described in subsection (a).

(c) A provider profile must contain the following information:

(1) The provider's name.
(2) The provider's license, certification, registration, or permit number.
(3) The provider's license, certification, registration, or permit type.
(4) The date the provider's license, certification, registration, or permit was issued.
(5) The date the provider's license, certification, registration, or permit expires.
(6) The current status of the provider's license, certification, registration, or permit.
(7) The provider's city and state of record.
(8) A statement of any disciplinary action taken against the provider within the previous ten (10) years by a board or committee described in subsection (a).

(d) The agency shall make provider profiles available to the public.

(e) The computer gateway administered by the office of technology established by IC 4-13.1-2-1 shall make the information described in subsection (c) generally available to the public on the Internet.

(f) The agency may adopt rules under IC 4-22-2 to implement this section.


IC 25-1-5-11 Provision of Social Security number; access to numbers

Sec. 11. (a) An individual who applies for a license issued by a board under this chapter or who holds a license issued by a board under this chapter shall provide the individual's Social Security number to the agency.

(b) The agency and the boards shall collect and release the applicant’s or licensee’s Social Security number as provided in state or federal law.
(c) Notwithstanding IC 4-1-10-3, the agency and the boards may allow access to the Social Security number of each person who is licensed under this chapter or has applied for a license under this chapter to:
   (1) a testing service that provides the examination for licensure to the agency or the boards; 
   (2) an individual state regulatory board or an organization composed of state regulatory boards for the applicant’s or licensee’s profession for the purpose of coordinating licensure and disciplinary activities among the individual states.

As added by P.L.157-2006, SEC.18.

INDIANA CODE § 25-1-6

Chapter 6. Professional Licensing Agency
(Not included in this compilation; not applicable to Dentists and Dental Hygienists)

INDIANA CODE § 25-1-7

Chapter 7. Investigation and Prosecution of Complaints Concerning Regulated Occupations

IC 25-1-7-1 Definitions
Sec. 1. As used in this chapter:
   "Board" means the appropriate agency listed in the definition of regulated occupation in this section.
   "Director" refers to the director of the division of consumer protection.
   "Division" refers to the division of consumer protection, office of the attorney general.
   "Licensee" means a person who is:
      (1) licensed, certified, or registered by a board listed in this section; and
      (2) the subject of a complaint filed with the division.
   "Person" means an individual, a partnership, a limited liability company, or a corporation.
   "Regulated occupation" means an occupation in which a person is licensed, certified, or registered by one (1) of the following:
      (1) Indiana board of accountancy (IC 25-2.1-2-1).
      (2) Board of registration for architects and landscape architects (IC 25-4-1-2).
      (3) Indiana auctioneer commission (IC 25-6.1-2-1).
      (4) State board of barber examiners (IC 25-7.5-1).
      (5) State boxing commission (IC 25-9-1).
      (6) Board of chiropractic examiners (IC 25-10-1).
      (7) State board of cosmetology examiners (IC 25-8-3-1).
      (8) State board of dentistry (IC 25-14-1).
      (9) State board of funeral and cemetery service (IC 25-15-9).
      (10) State board of registration for professional engineers (IC 25-31-1-3).
      (11) Indiana state board of health facility administrators (IC 25-19-1).
      (12) Medical licensing board of Indiana (IC 25-22.5-2).
      (13) Indiana state board of nursing (IC 25-23-1).
      (14) Indiana optometry board (IC 25-24).
      (15) Indiana board of pharmacy (IC 25-26).
      (16) Indiana plumbing commission (IC 25-28.5-1-3).
      (17) Board of podiatric medicine (IC 25-29-2-1).
      (18) Board of environmental health specialists (IC 25-32-1).
      (19) State psychology board (IC 25-33).
      (20) Speech-language pathology and audiology board (IC 25-35.6-2).
      (21) Indiana real estate commission (IC 25-34.1-2).
      (22) Indiana board of veterinary medical examiners (IC 15-5-1-1).
      (23) Department of natural resources for purposes of licensing water well drillers under IC 25-39-3.
      (24) Respiratory care committee (IC 25-34.5).
      (25) Private investigator and security guard licensing board (IC 25-30-1-5.2).
      (26) Occupational therapy committee (IC 25-23.5).
      (27) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
      (28) Real estate appraiser licensure and certification board (IC 25-34.1-8).
      (29) State board of registration for land surveyors (IC 25-21.5-2-1).
      (30) Physician assistant committee (IC 25-27.5).
      (31) Indiana athletic trainers board (IC 25-5.1-2-1).
      (32) Indiana dietitians certification board (IC 25-14.5-2-1).
      (33) Indiana hypnotist committee (IC 25-20.5-1-7).
      (34) Indiana physical therapy committee (IC 25-27).
      (35) Manufactured home installer licensing board (IC 25-23.7).
      (36) Home inspectors licensing board (IC 25-20.2-3-1).
      (37) Occupational Therapy Committee (IC 25-23.5-2-1).
      (38) State department of health.
      (39) Any other occupational or professional agency created after June 30, 1981.


IC 25-1-7-2 Duties of attorney general
Sec. 2. The office of the attorney general, under the
conditions specified in this chapter, may receive, investigate, and prosecute complaints concerning regulated occupations.

IC 25-1-7-3 Investigation of complaints
Sec. 3. The division is responsible for the investigation of complaints concerning licensees.

IC 25-1-7-4 Complaints; requisites; standing
Sec. 4. All complaints must be written and signed by the complainant and initially filed with the director. Except for employees of the attorney general's office acting in their official capacity, a complaint may be filed by any person, including members of any of the boards listed in section 1 of this chapter.

IC 25-1-7-5 Duties and powers of director
Sec. 5. (a) Subsection (b)(1) does not apply to:
(1) a complaint filed by:
(A) a member of any of the boards listed in section 1 of this chapter; or
(B) the Indiana professional licensing agency; or
(2) a complaint filed under IC 25-1-5-4.
(b) The director has the following duties and powers:
(1) The director shall make an initial determination as to the merit of each complaint. A copy of a complaint having merit shall be submitted to the board having jurisdiction over the licensee's regulated occupation that board thereby acquring jurisdiction over the matter except as otherwise provided in this chapter.
(2) The director shall through any reasonable means notify the licensee of the nature and ramifications of the complaint and of the duty of the board to attempt to resolve the complaint through negotiation.
(3) The director shall report any pertinent information regarding the status of the complaint to the complainant.
(4) The director may investigate any written complaint against a licensee. The investigation shall be limited to those areas in which there appears to be a violation of statutes governing the regulated occupation.
(5) The director has the power to subpoena witnesses and to send for and compel the production of books, records, papers, and documents for the furtherance of any investigation under this chapter. The circuit or superior court located in the county where the subpoena is to be issued shall enforce any such subpoena by the director.

IC 25-1-7-6 Statement of settlement; period of time to resolve
Sec. 6. (a) This section does not apply to:
(1) a complaint filed by:
(A) a member of any of the boards listed in section 1 of this chapter; or
(B) the Indiana professional licensing agency; or
(2) a complaint filed under IC 25-1-5-4.
(b) If, at any time before the director files the director's recommendations with the attorney general, the board files with the director a statement signed by the licensee and the complainant that the complaint has been resolved, the director shall not take further action. For a period of thirty (30) days after the director has notified the board and the licensee that a complaint has been filed, the division shall not conduct any investigation or take any action whatsoever, unless requested by the board. If, during the thirty (30) days, the board requests an extension of the thirty (30) day time period, the director shall grant it for a period not exceeding an additional twenty (20) days. If at any time during the thirty (30) day period or an extension thereof, the board notifies the director of its intention not to proceed further to resolve the complaint, the division may proceed immediately under this chapter. For every purpose of this section, a board may designate a board member or staff member to act on behalf of or in the name of the board.

IC 25-1-7-7 Disciplinary sanctions; report to attorney general; prosecution; hearing officer
Sec. 7. (a) If there has been no statement of settlement filed by the board under section 6 of this chapter, and if, after conducting an investigation, the director believes that the licensee should be subjected to disciplinary sanctions by the board of his regulated occupation, then he shall so report to the attorney general. Upon receiving the director's report, the attorney general may prosecute the matter, on behalf of the state of Indiana, before the board. The board may designate any person as a hearing officer to hear the matter.
(b) Notwithstanding subsection (a) of this section, if the board by majority vote so requests, the attorney general shall prosecute the matter before the board, on behalf of the state of Indiana.

IC 25-1-7-8 Witnesses
Sec. 8. At the hearing, the board or hearing officer may call witnesses in addition to those presented by the state or the licensee.

IC 25-1-7-9 Disqualification of board member
Sec. 9. A board member is disqualified from any consideration of the case if the board member filed the complaint or participated in negotiations regarding the complaint. The board member is not disqualified from the board's final determination solely because the board member was the hearing officer or determined the complaint and the information pertaining to the complaint was current significant investigative information (as defined by IC 25-23.2-1-5 (Repealed)).

IC 25-1-7-10 Confidentiality of complaints and information
Sec. 10. (a) All complaints and information pertaining to
the complaints shall be held in strict confidence until the attorney general files notice with the board of the attorney general's intent to prosecute the licensee.

(b) A person in the employ of the office of attorney general or any of the boards, or any person not a party to the complaint, may not disclose or further a disclosure of information concerning the complaint unless the disclosure is required:

(1) under law; or

(2) for the advancement of an investigation.


IC 25-1-7-11 Administrative orders and procedures
Sec. 11. Nothing in this chapter limits the rights of the licensee or the state under IC 4-21.5.

IC 25-1-7-12 Reimbursement of attorney general
Sec. 12. (a) If:

(1) a fund is created by statute for the payment of an unpaid judgment against a licensee; and

(2) the office of the attorney general is required by statute to provide services to the boards that administer the funds described in subdivision (1);

the office of the attorney general is entitled to reimbursement for the costs incurred in providing the services described in subdivision (2).

(b) If:

(1) more than one (1) fund is established by statute for the payment of an unpaid judgment against a licensee; and

(2) the office of the attorney general is entitled to reimbursement under subsection (a);

the funds for reimbursement shall be taken in equal amounts from each of the funds described in subdivision (1).

As added by P.L.255-1987, SEC.1.

IC 25-1-7-13 Reports; contents
Sec. 13. The office of the attorney general shall submit to each board, at the request of the board, a report that includes the following information concerning that regulated occupation:

(1) The number of complaints filed.

(2) The number of cases currently under investigation.

(3) The number of cases closed.

(4) The number of cases resolved.

(5) The age of the complaints.

As added by P.L.177-1997, SEC.1.

INDIANA CODE § 25-1-8

Chapter 8. Occupational and Professional Licensure, Registration, and Certification Fees

IC 25-1-8-1 "Board" defined
Sec. 1. As used in this chapter, "board" means any of the following:

(1) Indiana board of accountancy (IC 25-2-1-2-1).

(2) Board of registration for architects and landscape architects (IC 25-4-1-2).

(3) Indiana auctioneer commission (IC 25-6-1-2-1).

(4) State board of barber examiners (IC 25-7-5-1).

(5) State boxing commission (IC 25-9-1).

(6) Board of chiropractic examiners (IC 25-10-1).

(7) State board of cosmetology examiners (IC 25-8-3-1).

(8) State board of dentistry (IC 25-14-1).

(9) State board of funeral and cemetery service (IC 25-15).

(10) State board of registration for professional engineers (IC 25-31-1-3).

(11) Indiana state board of health facility administrators (IC 25-19-1).

(12) Medical licensing board of Indiana (IC 25-22.5-2).

(13) Mining board (IC 22-10-1.5-2).

(14) Indiana state board of nursing (IC 25-23-1).

(15) Indiana optometry board (IC 25-24).

(16) Indiana board of pharmacy (IC 25-26).

(17) Indiana plumbing commission (IC 25-28.5-1-3).

(18) Board of environmental health specialists (IC 25-32-1).

(19) State psychology board (IC 25-33).

(20) Speech-language pathology and audiology board (IC 25-35.6-2).

(21) Indiana real estate commission (IC 25-34.1-2-1).

(22) Indiana board of veterinary medical examiners (IC 15-5-1.1-3).

(23) Department of insurance (IC 27-1).

(24) State police department (IC 10-11-1.2-4), for purposes of certifying polygraph examiners under IC 25-30-2.

(25) Department of natural resources for purposes of licensing water well drillers under IC 25-39-3.

(26) Private investigator and security guard licensing board (IC 25-30-1-5.2).

(27) Occupational therapy committee (IC 25-23.5-2-1).

(28) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6-2-1).

(29) Real estate appraiser licensure and certification board (IC 25-34.1-8).

(30) State board of registration for land surveyors (IC 25-21.5-2-1).

(31) Physician assistant committee (IC 25-27.5).

(32) Indiana athletic trainers board (IC 25-5-1-2-1).

(33) Board of podiatric medicine (IC 25-29-2-1).

(34) Indiana dietitians certification board (IC 25-14.5-2-1).

(35) Indiana physical therapy committee (IC 25-27).

(36) Manufactured home installer licensing board (IC 25-23.7).

(37) Home inspectors licensing board (IC 25-20.2-3-1).

(38) Occupational Therapy Committee (IC 25-23.5-2-1)

(39) Any other occupational or professional agency created after June 30, 1981.

IC 25-1-8-1.1 Repealed
(Repealed by P.L.19-1986, SEC.43.)

IC 25-1-8-2 Fees; establishment and collection
Sec. 2. (a) Notwithstanding any other provision regarding the fees to be assessed by a board, a board shall establish by rule and cause to be collected fees for the following:

1. Examination of applicants for licensure, registration, or certification.
2. Issuance, renewal, or transfer of a license, registration, or certificate.
3. Restoration of an expired license, registration, or certificate when such action is authorized by law.
4. Issuance of licenses by reciprocity or endorsement for out-of-state applicants.
5. Issuance of board or committee reciprocity or endorsements for practitioners licensed, certified, or registered in Indiana who apply to another state for a license.

No fee shall be less than twenty-five dollars ($25) unless the fee is collected under a rule adopted by the board which sets a fee for miscellaneous expenses incurred by the board on behalf of the practitioners the board regulates.

(b) Fees established by statute shall remain in effect until replaced by a new fee adopted by rule under this section.

(c) In no case shall the fees be less than are required to pay all of the costs, both direct and indirect, of the operation of the board.

(d) For the payment of fees, a board shall accept cash, a draft, a money order, a cashier’s check, and a certified or other personal check. If a board receives an uncertified personal check for the payment of a fee and if the check does not clear the bank, the board may void the license, registration, or certificate for which the check was received.

(e) Unless designated by rule, a fee is not refundable.

(f) A board shall charge a fee of not more than ten dollars ($10) for the issuance of a duplicate license, registration, or certificate.


IC 25-1-8-3 quadrennial license renewal system
Sec. 3. (a) A board, operating on a quadrennial license, registration, or certificate renewal cycle, shall refund one-half (1/2) of the amount of the license, registration, or certificate fee if the holder of the license, registration, or certificate surrenders it at least two (2) years before it expires.

(b) This section does not apply to the holder of a license, registration, or certificate revoked or suspended by the board.


IC 25-1-8-4 quadrennial license renewal system
Sec. 4. (a) Notwithstanding any law establishing a biennial license renewal system, a board operating on such a system may by rule establish a quadrennial license renewal system.

(b) If a board establishes a quadrennial license renewal system, it may provide for a reduction in the fees for the four (4) year license.


IC 25-1-8-5 Employment of professionals for testing; examination on statutes, rules, and regulations; standards of review
Sec. 5. (a) Notwithstanding any statutory provisions regarding the administration of examinations, a board or committee may employ organizations or additional professionals to assist in the preparation, administration, and scoring of licensing examinations.

(b) A board or committee may require applicants for licensure, certification, or registration by examination, endorsement, or reciprocity to pass a test on the state or federal statutes, state rules, and federal regulations that the board or committee determines by rule to be relevant to the practice of a regulated profession.

(c) A board or committee may enter into a contract with a testing company or national association to set the standards of review for an examination by an applicant for licensure, certification, or registration. The standards of review may include:

1. Setting fees for review;
2. Requiring that an examination remain confidential; and
3. Prohibiting the release of the examination or copies of the examination.


IC 25-1-8-6 Reinstatement of delinquent or lapsed licenses
Sec. 6. (a) As used in this section, “board” means any of the following:

1. Indiana board of accountancy (IC 25-2.1-2-1).
2. Board of registration for architects and landscape architects (IC 25-4-1-2).
3. Indiana athletic trainers board (IC 25-5.1-2-1).
4. Indiana auctioneer commission (IC 25-6.1-2-1).
5. State board of barber examiners (IC 25-7-5-1).
7. Board of chiropractic examiners (IC 25-10-1).
8. State board of cosmetology examiners (IC 25-8-3-1).
9. State board of dentistry (IC 25-14-1).
10. Indiana dietitians certification board (IC 25-14.5-2-1).
11. State board of registration for professional engineers (IC 25-31-1-3).
12. Board of environmental health specialists (IC 25-32-1).
(14) Indiana state board of health facility administrators
(IC 25-19-1).
(15) Committee on hearing aid dealer examiners (IC 25-
20-1-1.5).
(16) Home inspectors licensing board (IC 25-20.2-3-1).
(17) Indiana hypnotist committee (IC 25-20.5-1-7).
(18) State board of registration for land surveyors
(IC 25-21.5-2-1).
(19) Manufactured home installer licensing board
(IC 25-23.7).
(20) Medical licensing board of Indiana (IC 25-22.5-2).
(21) Indiana state board of nursing (IC 25-23-1).
(22) Occupational therapy committee (IC 25-23.5).
(23) Indiana optometry board (IC 25-24).
(24) Indiana board of pharmacy (IC 25-26).
(25) Indiana physical therapy committee (IC 25-27).
(26) Physician assistant committee (IC 25-27.5).
(27) Indiana plumbing commission (IC 25-28.5-1-3).
(28) Board of podiatric medicine (IC 25-29-2-1).
(29) Private investigator and security guard licensing
board (IC 25-30-1-5.2).
(30) State psychology board (IC 25-33).
(31) Indiana real estate commission (IC 25-34-1-2).
(32) Real estate appraiser licensure and certification
board (IC 25-34-1-8).
(33) Respiratory care committee (IC 25-34.5).
(34) Social worker, marriage and family therapist, and
mental health counselor board (IC 25-23.6).
(35) Speech-language pathology and audiology board
(IC 25-35.6-2).
(36) Indiana board of veterinary medical examiners
(IC 15-5-1.1).

(b) This section does not apply to a license, certificate, or
registration that has been revoked or suspended.

(c) Notwithstanding any other law regarding the
reinstatement of a delinquent or lapsed license, certificate,
or registration and except as provided in section 8 of this
chapter, the holder of a license, certificate, or registration
that was issued by the board that is three (3) years or less
delinquent must be reinstated upon meeting the following
requirements:

1. Submission of the holder's completed renewal
   application.
2. Payment of the current renewal fee established by
   the board under section 2 of this chapter.
3. Payment of a reinstatement fee equal to the current
   initial application fee.
4. If a law requires the holder to complete continuing
   education as a condition of renewal, the holder:
   - Shall provide the board with a sworn statement,
     signed by the holder, that the holder has fulfilled
     the continuing education requirements required by
     the board; and
   - Shall, if the holder has not complied with the
     continuing education requirements, meet any
     requirements imposed under IC 25-1-4-5 and IC 25-1-
     4-6
5. Complete such remediation and additional training
   as deemed appropriate by the board given the lapse of
time involved.
6. Any other requirement that is provided for in statute
   or rule that is not related to fees.

As added by P.L.269-2001, SEC.5. Amended by P.L. 206-
2005, SEC. 13; P.L.157-2006, SEC.20; P.L.185-2007,

IC 25-1-8-7 Repealed
(Repealed by P.L.157-2006, SEC.76.)

IC 25-1-8-8 License reinstatement; grounds for denial
Sec. 8. (a) As used in this section, "board" has the
meaning set forth in section 6(a) of this chapter.

(b) The licensing agency may delay reinstating a license,
certificate, or registration for not more than ninety (90) days
after the date the applicant applies for reinstatement of a
license, certificate, or registration to permit the board to
investigate information received by the licensing agency that
the applicant for reinstatement may have committed an act
for which the applicant may be disciplined. If the licensing
agency delays reinstating a license, certificate, or registration,
the licensing agency shall notify the applicant that the applicant is being investigated.

As excepted provided in subsection (c), the board shall do one
(1) of the following before the expiration of the ninety (90)
day period:

1. Deny reinstatement of the license, certificate, or
   registration following a personal appearance by the
   applicant before the board.
2. Reinstate the license, certificate, or registration upon
   satisfaction of all other requirements for reinstatement.
3. Reinstate the license and file a complaint under IC
   25-1-7.
4. Request the office of the attorney general to conduct
   an investigation under subsection (d) if, following a
   personal appearance by the applicant before the board,
   the board has good cause to believe that the applicant
   engaged in activity described in IC 25-1-9-4 or IC 25-1-
   11-5.

lapsed for more than three (3) years, the holder of a license,
certificate, or registration that was issued by the board that
is more than three (3) years delinquent must be reinstated
upon meeting the following requirements:

1. Submission of the holder's completed renewal
   application.
2. Payment of the current renewal fee established by
   the board under section 2 of this chapter.
3. Payment of a reinstatement fee equal to the current
   initial application fee.
4. If a law requires the holder to complete continuing
   education as a condition of renewal, the holder:
   - Shall provide the board with a sworn statement,
     signed by the holder, that the holder has fulfilled
     the continuing education requirements required by
     the board; and
   - Shall, if the holder has not complied with the
     continuing education requirements, meet any
     requirements imposed under IC 25-1-4-5 and IC 25-1-
     4-6
5. Complete such remediation and additional training
   as deemed appropriate by the board given the lapse of
time involved.
6. Any other requirement that is provided for in statute
   or rule that is not related to fees.
(5) Upon agreement of the applicant and the board and following a personal appearance by the applicant before the board, reinstate the license, certificate, or registration and place the applicant on probation status under IC 25-1-9-9 or IC 25-1-11-12.
(c) If an applicant fails to appear before the board under subsection (b), the board may take action as provided in subsection (b)(1), (b)(2), or (b)(3).
(d) If the board makes a request under subsection (b)(4), the office of the attorney general shall conduct an investigation. Upon completion of the investigation, the office of the attorney general may file a petition alleging that the applicant has engaged in activity described in IC 25-1-9-4 or IC 25-1-11-5. If the office of the attorney general files a petition, the board shall set the matter for a public hearing. If, after a public hearing, the board finds that the applicant violated IC 25-1-9-4 or IC 25-1-11-5, the board may impose sanctions under IC 25-1-9-9 or IC 25-1-11-12. The board may delay reinstating a license, certificate, or registration beyond ninety (90) days after the date the applicant files an application for reinstatement of a license, certificate, or registration until a final determination is made by the board.
(e) The license, certificate, or registration of the applicant for license reinstatement remains invalid during the ninety (90) day period unless:
(1) the license, certificate, or registration is reinstated following a personal appearance by the applicant before the board before the end of the ninety (90) day period;
(2) the board issues a conditional license to the practitioner that is effective until the reinstatement is denied or the license is reinstated; or
(3) the reinstatement is denied.
If the ninety (90) day period expires without action by the board, the license, certificate, or registration shall be automatically reinstated at the end of the ninety (90) day period.

Indiana Code § 25-1-9

Chapter 9. Health Professions Standards of Practice

IC 25-1-9-1 "Board" defined
Sec. 1. As used in this chapter, "board" means any of the following:
(1) Board of chiropractic examiners (IC 25-10-1).
(2) State board of dentistry (IC 25-14-1).
(3) Indiana state board of health facility administrators (IC 25-19-1).
(4) Medical licensing board of Indiana (IC 25-22.5-2).
(5) Indiana state board of nursing (IC 25-23-1).
(6) Indiana optometry board (IC 25-24).
(7) Indiana board of pharmacy (IC 25-26).
(8) Board of podiatric medicine (IC 25-29-2-1).
(9) Board of medical health specialists (IC 25-32).
(10) Speech-language pathology and audiology board (IC 25-35.6-2).
(11) State psychology board (IC 25-33).
(12) Indiana board of veterinary medical examiners (IC 15-5-1-1).
(13) Indiana physical therapy committee (IC 25-27-1).
(14) Respiratory care committee (IC 25-34.5).
(15) Occupational therapy committee (IC 25-23.5).
(16) Social worker, marriage and family therapist, and mental health counselor board (IC 25-23.6).
(17) Physician assistant committee (IC 25-27.5).
(18) Indiana athletic trainers board (IC 25-5.1-2-1).
(19) Indiana dietetics certification board (IC 25-14.5-2-1).
(20) Indiana hypnotist committee (IC 25-20.5-1-7).

IC 25-1-9-2 "Practitioner" defined
Sec. 2. As used in this chapter, "practitioner" means an individual who holds:
(1) an unlimited license, certificate, or registration;
(2) a limited or probationary license, certificate, or registration;
(3) a temporary license, certificate, registration, or permit;
(4) an intern permit; or
(5) a provisional license;
issued by the board regulating the profession in question, including a certificate of registration issued under IC 25-20.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3 "License" defined
Sec. 3. As used in this chapter, "license" includes a license, certificate, registration, or permit.
As added by P.L.152-1988, SEC.1.

IC 25-1-9-3.5 "Sexual contact" defined
Sec. 3.5. As used in this chapter, "sexual contact" means:
(1) sexual intercourse (as defined in IC 35-41-1-26);
(2) deviate sexual conduct (as defined in IC 35-41-1-9); or
(3) any fondling or touching intended to arouse or satisfy the sexual desires of either the individual performing the fondling or touching or the individual being fondled or touched.

IC 25-1-9-4 Standards of professional practice; findings required for sanctions; evidence of foreign discipline
Sec. 4. (a) A practitioner shall conduct the practitioner’s practice in accordance with the standards established by the board regulating the profession in question and is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds:
(1) a practitioner has:
(A) engaged in or knowingly cooperated in fraud or material deception in order to obtain a license to practice, including cheating on a license examination;
(B) engaged in fraud or material deception in the course of professional services or activities;
(C) advertised services in a false or misleading manner; or
(D) been convicted of a crime or assessed a civil penalty involving fraudulent billing practices, including fraud under:
   (i) Medicaid (42 U.S.C. 1396 et seq.);
   (ii) Medicare (42 U.S.C. 1395 et seq.);
   (iii) the children's health insurance program under IC 12-17.6; or
   (iv) insurance claims;
(2) a practitioner has been convicted of a crime that
   (A) has a direct bearing on the practitioner's ability to continue to practice competently; or
   (B) is harmful to the public;
(3) a practitioner has knowingly violated any state statute or rule, or federal statute or regulation, regulating the profession in question;
(4) a practitioner has continued to practice although the practitioner has become unfit to practice due to:
   (A) professional incompetence that:
      (i) may include the undertaking of professional activities that the practitioner is not qualified by training or experience to undertake; and
      (ii) does not include activities performed under IC 16-21-2-9;
   (B) failure to keep abreast of current professional theory or practice;
   (C) physical or mental disability; or
   (D) addiction to, abuse of, or severe dependency upon alcohol or other drugs that endanger the public by impairing a practitioner's ability to practice safely;
(5) a practitioner has engaged in a course of lewd or immoral conduct in connection with the delivery of services to the public;
(6) a practitioner has allowed the practitioner's name or services to the public;
(7) a practitioner has had disciplinary action taken against the practitioner or the practitioner's license to practice in any state or jurisdiction on grounds similar to those under this chapter;
(8) a practitioner has diverted:
   (A) a legend drug (as defined in IC 16-18-2-199); or
   (B) any other drug or device issued under a drug order (as defined in IC 16-42-19-3) for another person;
(9) a practitioner, except as otherwise provided by law, has knowingly prescribed, sold, or administered any drug classified as a narcotic, addicting, or dangerous drug to a habitue or addict;
(10) a practitioner has failed to comply with an order imposing a sanction under section 9 of this chapter;
(11) a practitioner has engaged in sexual contact with a patient under the practitioner's care or has used the practitioner-patient relationship to solicit sexual contact with a patient under the practitioner's care;
(12) a practitioner who is a participating provider of a health maintenance organization has knowingly collected or attempted to collect from a subscriber or enrollee of the health maintenance organization any sums that are owed by the health maintenance organization; or
(13) a practitioner has assisted another person in committing an act that would be grounds for disciplinary sanctions under this chapter.
(b) A practitioner who provides health care services to the practitioner's spouse is not subject to disciplinary action under subsection (a)(11).
(c) A certified copy of the record of disciplinary action is conclusive evidence of the other jurisdiction's disciplinary action under subsection (a)(7).

IC 25-1-9-5 Optometry employment practice
Sec. 5. In addition to section 4 of this chapter, a practitioner licensed to practice optometry is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has accepted employment to practice optometry from a person other than:
   (1) a corporation formed by an optometrist under IC 23-1.5; or
   (2) an individual who is licensed as an optometrist under this article and whose legal residence is in Indiana.
As added by P.L. 152-1988, SEC.1.

IC 25-1-9-6 Veterinary practitioners; cruelty to animals
Sec. 6. In addition to section 4 of this chapter, a practitioner licensed to practice veterinary medicine or registered as a veterinary technician is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds a practitioner has engaged in cruelty to animals.
As added by P.L. 152-1988, SEC.1.

IC 25-1-9-6.5 Chiropractors; waiver of deductible or copayment
Sec. 6.5. (a) In addition to section 4 of this chapter, a practitioner licensed to practice chiropractic is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board regulating the profession finds a practitioner has:
   (1) waived a payment of a deductible or a copayment required to be made to the practitioner by a patient under the patient's insurance or health care plan; and
   (2) advertised the waiver of a payment described in subdivision (1).
(b) This section does not apply to the waiver of a deductible or a copayment by a practitioner if:
   (1) the practitioner determines chiropractic service is necessary for the immediate health and welfare of a patient;
   (2) the practitioner determines the payment of a deductible or a copayment would create a substantial financial hardship for the patient; and
   (3) the waiver is based on the evaluation of the individual patient and is not a regular business practice of the practitioner.
IC 25-1-9-6.7 Marriage and family therapists; disciplinary sanctions
Sec. 6.7. In addition to the actions listed under section 4 of this chapter that subject a practitioner to the exercise of disciplinary sanctions, a practitioner who is licensed under IC 25-23.6 is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds that the practitioner has:
(1) performed any therapy that, by the prevailing standards of the mental health professions in the community where the services were provided, would constitute experimentation on human subjects, without first obtaining full, informed, and written consent;
(2) failed to meet the minimum standards of performance in professional activities when measured against generally prevailing peer performance in professional activities, including the undertaking of activities that the practitioner is not qualified by training or experience to undertake;
(3) performed services, including any duties required of the individual under IC 31, in reckless disregard of the best interests of a patient, a client, or the public;
(4) without the consent of the child's parent, guardian, or custodian, knowingly participated in the child's removal or precipitated others to remove a child from the child's home unless:
(A) the child's physical health was endangered due to injury as a result of the act or omission of the child's parent, guardian, or custodian;
(B) the child had been or was in danger of being a victim of an offense under IC 35-42-4, IC 35-45-4-1, IC 35-45-4-2, IC 35-46-1-3, IC 35-49-2-2, or IC 35-49-3-2; or
(C) the child was in danger of serious bodily harm as a result of the inability, refusal, or neglect of the child's parent, guardian, or custodian to supply the child with necessary food, shelter, or medical care, and a court order was first obtained;
(5) willfully made or filed a false report or record, failed to file a report or record required by law, willfully impeded or obstructed the filing of a report or record, or induced another individual to:
(A) make or file a false report or record; or
(B) impede or obstruct the filing of a report or record;
(6) performed a diagnosis (as defined in IC 25-22.5-1-1(c));
(7) provided evidence in an administrative or judicial proceeding that had insufficient factual basis for the conclusions rendered by the practitioner;
(8) willfully planted in the mind of the patient suggestions that are not based in facts known to the practitioner;
or
(9) performed services outside of the scope of practice of the license issued under IC 25-23.6.

IC 25-1-9-6.8 Practitioner guidelines before prescribing stimulant medication for a child for treatment of certain disorders
Sec. 6.8. (a) This section applies to a practitioner who is:
(1) licensed to practice medicine or osteopathic medicine under IC 25-22.5; or
(2) an advanced practice nurse granted prescriptive authority under IC 25-23, and whose practice agreement with a collaborating physician reflects the conditions specified in subsection (b).
(b) Before prescribing a stimulant medication for a child for the treatment of attention deficit disorder or attention deficit hyperactivity disorder, a practitioner described in subsection (a) shall follow the most recent guidelines adopted by the American Academy of Pediatrics or the American Academy of Child and Adolescent Psychiatry for the diagnosis and evaluation of a child with attention deficit disorder or attention deficit hyperactivity disorder.

IC 25-1-9-6.9 Failing to provide or providing false information to agency
Sec. 6.9. In addition to the actions listed under section 4 of this chapter that subject a practitioner to disciplinary sanctions, a practitioner is subject to the exercise of disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds that the practitioner has:
(1) failed to provide information requested by the Indiana professional licensing agency; or
(2) knowingly provided false information to the Indiana professional licensing agency; for a provider profile required under IC 25-1-5-10.

IC 25-1-9-7 Physical or mental examination; power to require
Sec. 7. The board may order a practitioner to submit to a reasonable physical or mental examination, at the practitioner's own expense, if the practitioner's physical or mental capacity to practice safely is at issue in a disciplinary proceeding.

IC 25-1-9-8 Failure to submit to physical or mental examination; sanctions
Sec. 8. Failure to comply with a board order to submit to a physical or mental examination makes a practitioner liable to summary suspension under section 10 of this chapter.
As added by P.L. 152-1988, SEC. 1.

IC 25-1-9-9 Disciplinary sanctions
Sec. 9. (a) The board may impose any of the following sanctions, singly or in combination, if it finds that a practitioner is subject to disciplinary sanctions under section 4, 5, 6, 6.7, or 6.9 of this chapter or IC 25-1-5-4:
(1) Permanently revoke a practitioner's license.
(2) Suspend a practitioner's license.
(3) Censure a practitioner.
(4) Issue a letter of reprimand.
(5) Place a practitioner on probation status and require the practitioner to:
(A) report regularly to the board upon the matters that are the basis of probation;
(B) limit practice to those areas prescribed by the board;
(C) continue or renew professional education under a preceptor, or as otherwise directed or approved by the board, until a satisfactory degree of skill has been attained in those areas that are the basis of the probation; or
(D) perform or refrain from performing any acts, including community restitution or service without compensation, that the board considers appropriate to the public interest or to the rehabilitation or treatment of the practitioner.

(6) Assess a fine against the practitioner in an amount not to exceed one thousand dollars ($1,000) for each violation listed in section 4 of this chapter, except for a finding of incompetency due to a physical or mental disability. When imposing a fine, the board shall consider a practitioner's ability to pay the amount assessed. If the practitioner fails to pay the fine within the time specified by the board, the board may suspend the practitioner's license without additional proceedings. However, a suspension may not be imposed if the sole basis for the suspension is the practitioner's inability to pay a fine.

(b) The board may withdraw or modify the probation under subsection (a)(5) if it finds, after a hearing, that the deficiency that required disciplinary action has been remedied, or that changed circumstances warrant a modification of the order.


IC 25-1-9-10 Summary license suspension pending final adjudication; notice; opportunity to be heard

Sec. 10. (a) The board may summarily suspend a practitioner's license for ninety (90) days before a final adjudication or during the appeals process if the board finds that a practitioner represents a clear and immediate danger to the public health and safety if the practitioner is allowed to continue to practice. The summary suspension may be renewed upon a hearing before the board, and each renewal may be for ninety (90) days or less.

(b) Before the board may summarily suspend a license that has been issued under IC 15-5-1.1, IC 25-22.5 or IC 25-14, the consumer protection division of the attorney general's office shall make a reasonable attempt to notify a practitioner of a hearing by the board to suspend a practitioner's license and of information regarding the allegation against the practitioner. The consumer protection division of the attorney general's office shall also notify the practitioner that the practitioner may provide a written or an oral statement to the board on the practitioner's behalf before the board issues an order for summary suspension. A reasonable attempt to reach the practitioner is made if the consumer protection division of the attorney general's office attempts to reach the practitioner by telephone or facsimile at the last telephone number of the practitioner on file with the board.

(c) After a reasonable attempt is made to notify a practitioner under subsection (b):

(1) a court may not stay or vacate a summary suspension of a practitioner's license for the sole reason that the practitioner was not notified; and
(2) the practitioner may not petition the board for a delay of the summary suspension proceedings.


IC 25-1-9-10.1 Retention of clinical consultants and experts to advise on suspension

Sec. 10.1. The attorney general may retain the services of a clinical consultant or an expert to provide the attorney general with advice concerning the acts that are the subject of a suspension under this chapter.

As added by P.L.43-1995, SEC.3.

IC 25-1-9-11 Reinstatement of suspended licenses

Sec. 11. The board may reinstate a license which has been suspended under this chapter if, after a hearing, the board is satisfied that the applicant is able to practice with reasonable skill and safety to the public. As a condition of reinstatement, the board may impose disciplinary or corrective measures authorized under this chapter.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-12 Reinstatement of revoked license

Sec. 12. The board may not reinstate a license that has been revoked under this chapter. An individual whose license has been revoked under this chapter may not apply for a new license until seven (7) years after the date of revocation.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-13 Consistency of sanctions prescribed

Sec. 13. The board shall seek to achieve consistency in the application of the sanctions authorized in this section. Significant departures from prior decisions involving similar conduct must be explained in the board's findings or orders.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-14 Surrender of practitioners license instead of hearing; approval

Sec. 14. A practitioner may petition the board to accept the surrender of the practitioner's license instead of a hearing before the board. The practitioner may not surrender the practitioner's license without the written approval of the board, and the board may impose any conditions appropriate to the surrender or reinstatement of a surrendered license.

As added by P.L.152-1988, SEC.1.

IC 25-1-9-15 Costs in disciplinary proceedings

Sec. 15. Practitioners who have been subjected to disciplinary sanctions may be required by a board to pay for the costs of the proceeding. The practitioner's ability to pay shall be considered when costs are assessed. If the practitioner fails to pay the costs, a suspension may not be imposed solely upon the practitioner's inability to pay the amount assessed. These costs are limited to costs for the following:

(1) Court reporters.
(2) Transcripts.
(3) Certification of documents.
(4) Photoduplication.
(5) Witness attendance and mileage fees.
(6) Postage.
(7) Expert witnesses.
(8) Depositions.
(9) Notarizations.
(10) Administrative law judges.


**IC 25-1-9-16 Refusal of licensure or grant of probationary license**

Sec. 16. (a) The board may refuse to issue a license or may issue a probationary license to an applicant for licensure if:

1. The applicant has been disciplined by a licensing entity of any state or jurisdiction, or has committed an act that would have subjected the applicant to the disciplinary process had the applicant been licensed in Indiana when the act occurred; and
2. The violation for which the applicant was, or could have been, disciplined has a direct bearing on the applicant's ability to competently practice in Indiana.

(b) The board may:
1. Refuse to issue a license; or
2. Issue a probationary license; to an applicant for licensure if the applicant practiced without a license in violation of the law.

(c) Whenever the board issues a probationary license, the board may impose one (1) or more of the following conditions:

1. Report regularly to the board upon the matters that are the basis of the discipline of the other state or jurisdiction.
2. Limit practice to those areas prescribed by the board.
3. Continue or renew professional education.
4. Engage in community restitution or service without compensation for a number of hours specified by the board.
5. Perform or refrain from performing an act that the board considers appropriate to the public interest or to the rehabilitation or treatment of the applicant.

(d) The board shall remove any limitations placed on a probationary license under this section if the board finds after a hearing that the deficiency that required disciplinary action has been remedied.


**IC 25-1-9-17 Applicant appearance before board or controlled substances advisory committee**

Sec. 17. The board and the controlled substances advisory committee (IC 35-48-2-1) may require an applicant for licensure to appear before the board or committee before issuing a license.

As added by P.L.33-1993, SEC.16.

**IC 25-1-9-18 Fitness determination of health care provider; filing complaint**

Sec. 18. (a) If the insurance commissioner forwards to the board the name of a practitioner under IC 34-18-9-4(a) (or IC 27-12-9-4(a) before its repeal), the board shall consider whether:

1. The practitioner has become unfit to practice under section 4 of this chapter; and
2. A complaint should be filed under IC 25-1-7-4.

(b) If the board determines that a complaint should be filed under subsection (a), the board must report to the consumer protection division whether the board will schedule the matter:

1. For informal negotiation under IC 25-1-7-6;
2. On the board's agenda for a vote requesting that the attorney general prosecute the matter before the board under IC 25-1-7-7; or
3. On the board's agenda for a vote on summary suspension of the practitioner's license pending prosecution of the matter before the board under IC 25-1-7-7.

(c) A board may designate a board member or staff member to act on behalf of the board under this section.


**IC 25-1-9-19 Third party billing notice**

Sec. 19. A practitioner that provides to a patient notice concerning a third party billing for a health care service provided to the patient shall ensure that the notice:

1. conspicuously states that the notice is not a bill;
2. does not include a tear-off portion; and
3. is not accompanied by a return mailing envelope.

As added by P.L.178-2003, SEC.12.

**IC 25-1-9-20 Adoption of rules; spouses of active duty military personnel**

Sec. 20. The board may adopt rules under IC 4-22-2, including emergency rules under IC 4-22-2-37.1, to establish procedures to expedite the issuance or renewal of a:

1. License;
2. Certificate;
3. Registration; or
4. Permit;

of a person whose spouse serves on active duty (as defined in IC 25-1-12-2) and is assigned to a duty station in Indiana.

As added by P.L.144-2007, SEC.25.

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**INDIANA CODE § 25-1-10**

Chapter 10. Reserved

**INDIANA CODE § 25-1-11**

Chapter 11. Professional Licensing Standards of Practice

*not included in this compilation; not applicable to Dentists and Dental Hygienists*

**INDIANA CODE § 25-1-12**
Chapter 12. Renewal of Licenses Held by Individuals in Military Service

IC 25-1-12-1 Applicability of chapter
Sec. 1. This chapter applies to an individual who:
(1) holds a license, certificate, registration, or permit under this title, IC 15, IC 16, or IC 22; and
(2) is called to active duty.

IC 25-1-12-2 "Active duty" defined
Sec. 2. As used in this chapter, "active duty" means full-time service in the:
(1) armed forces of the United States; or
(2) national guard;
for a period that exceeds thirty (30) consecutive days in a calendar year.

IC 25-1-12-3 "Armed forces of the United States" defined
Sec. 3. As used in this chapter, "armed forces of the United States" means the active or reserve components of:
(1) the army;
(2) the navy;
(3) the air force;
(4) the coast guard;
(5) the marine corps; or
(6) the merchant marine.

IC 25-1-12-4 "National guard" defined
Sec. 4. As used in this chapter, "national guard" means:
(1) the Indiana army national guard; or
(2) the Indiana air national guard.

IC 25-1-12-5 "Practitioner" defined
Sec. 5. As used in this chapter, "practitioner" means an individual who holds:
(1) an unlimited license, certificate, or registration;
(2) a limited or probationary license, certificate, or registration;
(3) a temporary license, certificate, registration, or permit;
(4) an intern permit; or
(5) a provisional license;
issued under this title or IC 15, IC 16, or IC 22.

IC 25-1-12-6 Extension to renew license or complete continuing education; requirements for extension; additional extensions
Sec. 6. (a) Notwithstanding any other law, a practitioner who is called to active duty out-of-state and meets the requirements of subsection (b) is entitled to an extension of time described in subsection (c) to:
(1) renew; and
(2) complete the continuing education required by;
the practitioner's license, certificate, registration, or permit.
(b) The practitioner must meet the following requirements to receive the extension of time provided under subsection (a):
(1) On the date the practitioner enters active duty, the practitioner's license, certificate, registration, or permit may not be revoked, suspended, lapsed, or be the subject of a complaint under IC 25-1-7.
(2) The practitioner's license, certificate, registration, or permit must expire while the practitioner is out-of-state on active duty and the practitioner must not have received the notice of expiration before the date the practitioner entered active duty.
(3) The practitioner shall provide proof of out-of-state active duty by providing a copy of the practitioner's:
(A) discharge; or
(B) government movement orders;

to the agency, board, commission, or committee issuing the practitioner's license, certificate, registration, or permit at the time the practitioner renews the practitioner's license, certificate, registration, or permit under this chapter.
(c) The extension of time provided under subsection (a) is equal to one hundred eighty (180) days after the date of the practitioner's discharge or release from active duty.
(d) The agency, board, commission, or committee that issued the practitioner's license, certificate, registration, or permit may extend the period provided in subsection (c) if the agency or board determines that an illness, an injury, or a disability related to the practitioner's active duty prevents the practitioner from renewing or completing the continuing education required for the practitioner's license, certificate, registration, or permit. However, the agency, board, commission, or committee may not extend the period for longer than three hundred sixty-five (365) days after the date of the practitioner's discharge or release from active duty.

IC 25-1-12-7 Waiver of late fees
Sec. 7. Any late fees that may be assessed against a practitioner in connection with a renewal under this chapter are waived.

IC 25-1-12-8 Construction with federal law
Sec. 8. This chapter may not be construed as a restriction or limitation on any of the rights, benefits, and protections granted to a member of:
(1) the armed forces of the United States; or
(2) the national guard;
under federal law.
INDIANA CODE § 25-1-13

Chapter 13. Indiana Scheduled Prescription Electronic Collection and Tracking Program

IC 25-1-13-1  Applicability
   Sec. 1. This chapter applies after June 30, 2007.
   As added by P.L.65-2006, SEC.1.

IC 25-1-13-2  "Agency" defined
   Sec. 2. As used in this chapter, "agency" refers to the Indiana professional licensing agency established by IC 25-1-5-3.
   As added by P.L.65-2006, SEC.1.

IC 25-1-13-3  "INSPECT" defined
   Sec. 3. As used in this chapter, "INSPECT" refers to the Indiana scheduled prescription electronic collection and tracking program established by section 4 of this chapter.
   As added by P.L.65-2006, SEC.1.

IC 25-1-13-4
   Sec. 4. The Indiana scheduled prescription electronic collection and tracking program is established within the agency.
   As added by P.L.65-2006, SEC.1.

IC 25-1-13-5
   Sec. 5. The agency shall perform all administrative functions, duties, and responsibilities for the INSPECT program.
   As added by P.L.65-2006, SEC.1.

IC 25-1-13-6
   Sec. 6. The INSPECT program shall collect and process information received under IC 35-48-7-8.1 and has duties described in IC 35-48-7-10.1 and IC 35-48-7-11.1.
   As added by P.L.65-2006, SEC.1.

IC 16-20-1
Chapter 1. Powers and Duties of Local Health Departments

IC 16-20-1-14
Personnel; delegation of duties on agent-principal relationship; requirements
   Sec. 14. (a) Local health officers may appoint and employ public health nurses, environmental health specialists, computer programmers, clerks, other personnel, and an administrator of public health, subject to the confirmation of the local board of health, as is necessary and reasonable to carry out and perform the duties of the local health department.
   (b) Except as provided in subsection (d), the employees of local health departments shall perform any of the duties of the health officer delegated by the health officer, with the approval of the local board of health, on the basis of an agent-principal relation.
   (c) The public health personnel of local health departments:
      (1) must meet the minimum qualification requirements of the local board of health;
      (2) by local ordinance, become part of the county classification system for the respective public health personnel positions; and
      (3) shall perform additional duties prescribed by the rules of the state department and local board of health under the general supervision of the local health officer.
   (d) If an appointee or employee of a local health officer is not a licensed water well driller under IC 25-39-3, the appointee or employee may not inspect the drilling of a water well.

IC 25-1-14-1  Applicability of section
   Sec. 1. This section applies to a meeting of a board, committee, or commission listed in IC 25-1-5-3 or IC 25-1-6-3.

IC 25-1-14-2
Sec. 2. A member of a board, committee, or commission may participate in a meeting of the board, committee, or commission:
   (1) at which at least a quorum is physically present at the place where the meeting is conducted; and
   (2) by using a means of communication that permits:
      (A) all other members participating in the meeting; and
      (B) all members of the public physically present at the place where the meeting is conducted;
      to simultaneously communicate with each other during the meeting.

IC 25-1-14-3
Sec. 3. A member who participates in a meeting under section 2 of this chapter:
   (1) is considered to be present at the meeting;
   (2) shall be counted for purposes of establishing a quorum; and
   (3) may vote at the meeting.

IC 25-1-14-4
Sec. 4. The memoranda of the meeting prepared under IC 5-14-1.5-4 must state the name of:
   (1) each member who was physically present at the place where the meeting was conducted;
   (2) each member who participated in the meeting by using a means of communication described in section 2 of this chapter; and
   (3) each member who was absent.
IC 16-22-8  Chapter 8. Health and Hospital Corporation of Marion County

IC 16-22-8-34  Powers of board

Sec. 34. (a) The board or corporation may do all acts necessary or reasonably incident to carrying out the purposes of this chapter, including the following:

1. As a municipal corporation, sue and be sued in any court with jurisdiction.
2. To serve as the exclusive local board of health and local department of health within the county with the powers and duties conferred by law upon local boards of health and local departments of health.
3. To adopt and enforce ordinances consistent with Indiana law and administrative rules for the following purposes:
   A. To protect property owned or managed by the corporation.
   B. To protect property owned or managed by the corporation.
   C. To establish quarantine regulations, impose restrictions on persons having infectious or contagious diseases and contacts of the persons, and regulate the disinfection of premises.
   D. To license, regulate, and establish minimum sanitary standards for the operation of a business handling, producing, processing, preparing, manufacturing, packing, storing, selling, distributing, or transporting articles used for food, drink, confectionery, or condiment in the interest of the public health.
   E. To control:
      i. rodents, mosquitos, and other animals, including insects, capable of transmitting microorganisms and disease to humans and other animals; and
      ii. the animals' breeding places.
   F. To require persons to connect to available sewer systems and to regulate the disposal of domestic or sanitary sewage by private methods. However, the board and corporation have no jurisdiction over publicly owned or financed sewer systems or sanitation and disposal plants.

(G) To control rabies.
(H) For the sanitary regulation of water supplies for domestic use.
(I) To protect, promote, or improve public health. For public health activities and to enforce public health laws, the state health data center described in IC 16-19-10 shall provide health data, medical information, and epidemiological information to the corporation.
(J) To detect, report, prevent, and control disease affecting public health.
(K) To investigate and diagnose health problems and health hazards.
(L) To regulate the sanitary and structural conditions of residential and nonresidential buildings and unsafe premises.
(M) To license and regulate the design, construction, and operation of public pools, spas, and beaches.
(N) To regulate the storage, containment, handling, use, and disposal of hazardous materials.
(O) To license and regulate tattoo parlors and body piercing facilities.
(4) To manage the corporation's hospitals, medical facilities, and mental health facilities.
(5) To furnish health and nursing services to elementary and secondary schools within the county.
(6) To furnish medical care to the indigent within the county unless medical care is furnished to the indigent by the division of family and children, resources.
(7) To furnish dental services to the insured and uninsured residents of the county, including the services as provided in subsection (c) until the expiration of subsection (c).
(8) To determine the public health policies and programs to be carried out and administered by the corporation.
(9) To adopt an annual budget ordinance and levy taxes.
(10) To incur indebtedness in the name of the corporation.
(11) To organize the personnel and functions of the corporation into divisions and subdivisions to carry out the corporation's powers and duties and to consolidate, divide, or abolish the divisions and subdivisions.
(12) To acquire and dispose of property.
(13) To receive charitable contributions and make gifts as provided in 26 U.S.C. 170.
(14) To make charitable contributions and gifts.
(15) To establish a charitable foundation as provided in 26 U.S.C. 501.
(16) To receive and distribute federal, state, local, or private grants.
(17) To receive and distribute grants from charitable foundations.
(18) To establish nonprofit corporations to carry out the purposes of the corporation.
(19) To erect buildings or structures or improvements to existing buildings or structures.
(20) To determine matters of policy regarding internal organization and operating procedures.
(21) To do the following:
   A. Adopt a schedule of reasonable charges for nonresidents of the county for medical and mental health services.
services.

(B) Collect the charges from the patient or from the governmental unit where the patient resided at the time of the service.

(C) Require security for the payment of the charges.

(22) To adopt a schedule of and to collect reasonable charges for patients able to pay in full or in part.

(23) To enforce Indiana laws, administrative rules, and the code of the health and hospital corporation of the county.

(24) To purchase supplies, materials, and equipment for the corporation.

(25) To employ personnel and establish personnel policies to carry out the duties, functions, and powers of the corporation.

(26) To employ attorneys admitted to practice law in Indiana.

(27) To acquire, erect, equip, and operate the corporation's hospitals, medical facilities, and mental health facilities.

(28) To dispose of surplus property in accordance with a policy by the board.

(29) To determine the duties of officers and division directors.

(30) To fix the compensation of the officers and division directors.

(31) To carry out the purposes and object of the corporation.

(32) To obtain loans for hospital expenses in amounts and upon terms agreeable to the board. The board may secure the loans by pledging accounts receivable or other security in hospital funds.

(33) To establish fees for licenses, services, and records. The corporation may accept payment by credit card for fees.

(b) The board shall exercise the board's powers and duties in a manner consistent with Indiana law, administrative rules, and the code of the health and hospital corporation of the county.

(c) After a dentist licensed under IC 25-14 who is employed by a local health department or the health and hospital corporation examines a child enrolled in any grade up to and including grade 12 and prescribes a treatment plan in writing for the child, a licensed dental hygienist employed by the local health department or the health and hospital corporation may, without supervision by the dentist, provide the child with the following treatment in accordance with the treatment plan:

(1) Prophylaxis.
(2) Fluoride application.
(3) Sealants.

However, the treatment must be completed not more than ninety (90) days after the dentist prescribes the treatment plan. This subsection expires June 30, 2009.


TITLE 828 STATE BOARD OF DENTISTRY
NOTE: Under IC 25-14-1-1.5, the name of the Board of Dental Examiners is changed to State Board of Dentistry, effective July 1, 1999.

ARTICLE 0.5. GENERAL PROVISIONS

Rule 1. Definitions

828 IAC 0.5-1-1 Definitions
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 1. The definitions in this rule apply throughout this title. (State Board of Dentistry; 828 IAC 0.5-1-1; filed Apr 25, 1983, 8:52 a.m.: 6 IR 1085; filed Aug 29, 1986, 2:30 p.m.: 10 IR 19; filed Dec 2, 1987, 9:34 a.m.: 11 IR 1285; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-2 “Advanced cardiac life support” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
AFFECTED: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 2. “Advanced cardiac life support” means the ability to apply the principles and protocols of cardiac and pulmonary resuscitation necessitated by pharmacologic agents and/or pathology. (State Board of Dentistry; 828 IAC 0.5-1-2; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-3 “Advanced cardiac life support instructor” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
AFFECTED: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 3. “Advanced cardiac life support instructor” means one who has successfully completed a course in advanced cardiac life support and has been recommended for and successfully completed an instructor's course in advanced cardiac life support. (State Board of Dentistry; 828 IAC 0.5-1-3; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-4 “Basic cardiac life support” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
AFFECTED: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 4. “Basic cardiac life support” means the successful completion of a course in artificial respiration and cardiac compression which enables the applicant to sustain life in an arrest state. (State Board of Dentistry; 828 IAC 0.5-1-4; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-5 “Board” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
AFFECTED: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1-2
Sec. 5. “Board” means the state board of dental examiners established under IC 25-14-1-2. (State Board of Dentistry; 828 IAC 0.5-1-5; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-6 “Candidate” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 6. “Candidate” refers to any person who desires to obtain a license to practice dental hygiene or a license to practice dentistry. (State Board of Dentistry; 828 IAC 0.5-1-6; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-7 “Deep sedation” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 7. “Deep sedation” means a controlled state of consciousness, accompanied by a partial loss of protective reflexes, including inability to respond purposefully to verbal command, produced by a pharmacologic method. (State Board of Dentistry; 828 IAC 0.5-1-7; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2235; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-8 “General anesthesia” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 8. “General anesthesia” means a controlled state of unconsciousness, accompanied by a partial or complete loss of protective reflexes, including inability to independently maintain airway and respond purposefully to physical stimulation or verbal command, produced by a pharmacologic method. (State Board of Dentistry; 828 IAC 0.5-1-8; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2236; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-9 “Light parenteral conscious sedation” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 9. “Light parenteral conscious sedation” means a minimally depressed level of consciousness, under which an individual retains the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, produced by an intravenous pharmacological method. (State Board of Dentistry; 828 IAC 0.5-1-9; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2236; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 0.5-1-9.5 “Resuscitation protocols” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 9.5. “Resuscitation protocols” means procedures which can be utilized to support a patient experiencing life threatening cardiac or respiratory conditions, including complete cardiac and respiratory arrest which procedures include, but are not limited to, the following:

1. Establishment and management of an airway.
2. Establishment and management of intravenous access.
3. Basic cardiopulmonary resuscitation.
4. Administration of medication and intravenous fluids for enhanced cardiac and respiratory support.
5. Defibrillation.
6. Notification of emergency medical personnel outside the office.

828 IAC 0.5-1-10 “Training in advanced cardiac life support” defined
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-13-1-2; IC 25-14-1

Sec. 10. “Training in advanced cardiac life support” means the successful completion of a course of study approved by the board which includes, at a minimum, the following:

1. Lecture and hands-on use of:
   a. airway maintenance devices;
   b. endotracheal intubation;
   c. establishment and maintenance of intravenous cannulization; and
   d. a cardiac defibrillator.
2. Lecture on:
   a. electrocardiogram interpretation;
   b. pharmacology of resuscitation;
   c. protocols for resuscitation of cardiac and respiratory arrest;
   d. cardiac physiology; and
   e. pulmonary physiology.
3. Testing on:
   a. the ability to perform endotracheal intubation and use of airway aids;
   b. the application of resuscitation protocols in scenarios where the applicant must be in charge of a team which diagnoses and resuscitates various arrest states; and
   c. electrocardiogram (EKG) interpretation, physiology, pharmacology, and pathology of the respiratory and cardiac systems by written examination.

Rule 2. Fees
828 IAC 0.5-2-1 Fees (Repealed)
Sec. 1. (Repealed by State Board of Dentistry; filed Dec 2, 2001, 12:35 p.m.: 25 IR 1181)

828 IAC 0.5-2-2 Fees for anesthesia and sedation permits (Repealed)

Sec. 2. (Repealed by State Board of Dentistry; filed Dec 2, 2001, 12:35 p.m.: 25 IR 1181)

828 IAC 0.5-2-3 Dental fees
Authority: IC 23-1.5-2-9; IC 23-1.5-2-10; IC 25-1.5-2-9; IC 23-1.5-2-10; IC 25-13-1-5; IC 25-14-1-13; IC 25-14-1-27.5
Affected: IC 25-13-1-8; IC 25-14-1-10

Sec. 3. The board shall charge and collect the following fees related to the practice of dentistry:
(1) Application for licensure $250
(2) Repeat law examination only $25
(3) License renewal $100 biennially
(4) Dental intern permit application $100
(5) Dental intern permit renewal $50
(6) Verification of dental licensure to another state $10
(7) Duplicate wall license $10
(8) Professional corporation registration application $25
(9) Professional corporation registration renewal $20 biennially
(10) Application fees for the following permits:
   (A) General anesthesia, deep sedation (GADS)
   (B) Light parenteral conscious sedation (LPCS)
(11) Renewal fees for the following permits:
   (A) General anesthesia-deep sedation (GADS)
   (B) Light parenteral conscious sedation (LPCS)
(12) Registration of an additional office in which to administer general anesthesia, deep sedation, GADS, or light parenteral conscious sedation (LPCS) $25
(13) Reinstatement of inactive license $250
(14) Instructor’s license application $250
(15) Instructor’s license renewal $50 annually
(16) Instructor’s application for the following permits:
   (A) GADS
   (B) LPCS
(17) Renewal fee for instructor’s GADS/LPCS permit $25 annually

828 IAC 0.5-2-4 Dental hygiene fees

Sec. 4. The board shall charge and collect the following fees related to the practice of dental hygiene:
(1) Application for licensure $100
(2) Repeat law examination only $25
(3) License renewal $50 biennially
(4) Dental hygiene intern permit application $50
(5) Dental hygiene intern permit renewal $25
(6) Verification of dental hygiene licensure to another state $10
(7) Duplicate wall license $10
(8) Reinstatement of inactive license $100

828 IAC 0.5-2-5 Registration of mobile dental facilities and portable dental operations
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 5. The board shall charge and collect the following fees related to the registration of mobile dental facilities and portable dental operations:
(1) Application
(2) Registration renewal

828 IAC 0.5-2-6 Continuing education; sponsor approval fees
Authority: IC 25-1-8-2; IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-13-1-8; IC 25-13-2-2; IC 25-14-1-10; IC 25-14-3-2

Sec. 6. (a) This section applies to study clubs applying for approval under IC 25-13-2-2(12) or IC 25-14-3-2(12).
(b) This section applies to organizations or individuals applying for approval under IC 25-13-2-2(18) or IC 25-14-3-2(18).
(c) The board shall charge and collect the following fees related to the approval of study clubs, organizations, and individuals as sponsors of continuing education:
   (1) Study club application for approval
   (2) Organization or individual application for approval

ARTICLE 1. LICENSURE OF DENTISTS AND DENTAL HYGIENISTS
Rule 1. Dentists; Licensure by Examination

828 IAC 1-1-1 Qualifications of applicants; approved dental schools

Authority: IC 25-14-1-13
Affected: IC 25-14-1-16

Sec. 1. All applicants for licensure to practice dentistry must:
1) have graduated from a dental school accredited by the Commission on Accreditation of the American Dental Association; and
2) submit certification of having completed, within the prior year, an American Red Cross or American Heart Association cardiopulmonary resuscitation course or another course approved by the board.

(State Board of Dentistry; PT 1, Rule 1; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 48; filed May 16, 1977, 10:10 a.m.: Rules and Regs. 1978, p. 191; filed Nov 7, 1980, 12:45 p.m.: 3 IR 2188; filed Oct 12, 1993, 5:00 p.m.: 17 IR 399; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2539)

828 IAC 1-1-2 Application forms

Authority: IC 4-1-8-1; IC 25-14-1-13
Affected: IC 25-14-1-16

Sec. 2. (a) The applicant for licensure must complete the application on forms prescribed and provided by the board. All statements contained in the application must be verified by the applicant. The verified application, fees, and other documents that the board may require must be submitted to the board.

(b) The following proof that the applicant is a graduate of a dental school that is recognized by the board must be submitted:
1) An official transcript showing the date the degree was conferred.
2) An official diploma or a certificate of completion signed by the:
   (A) dean of the applicant’s professional school; and
   (B) registrar of the university or college.
(c) Additional documents to be submitted by the applicant for a license include the following:
1) Where the name on any document differs from the applicant’s name, one (1) of the following:
   (A) A notarized or certified copy of a marriage certificate.
   (B) Legal proof of a name change.
2) Two (2) recent passport-type photographs of the applicant, taken within eight (8) weeks before filing of the application.
3) If the applicant has been convicted of a criminal offense, excluding minor traffic violations, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been convicted. This notarized statement must include the following:
   (A) The offense of which the applicant was convicted.
   (B) The court in which the applicant was convicted.
   (C) The cause number under which the applicant was convicted.
   (D) The penalty imposed by the court.
4) An applicant who is now, or has been, licensed to practice any health profession in another state or Canadian province must submit verification of license status. This information must be sent by the state or province that issued the license directly to the Indiana board.
5) An applicant who is now, or has been, licensed to practice any health profession in another state shall submit a self-query form completed by the following:
   (A) The National Practitioner Data Bank (NPDB).
   (B) The Healthcare Integrity and Protection Data Bank (HIPDB) data bank.
6) All applicants must submit the applicant’s United States Social Security number in order to be eligible for licensure. (State Board of Dentistry; PT 1, Rule 2; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 49; filed May 16, 1977, 10:10 a.m.: Rules and Regs. 1978, p. 191; filed Oct 16, 1985, 3:57 p.m.: 9 IR 520; filed Oct 12, 1993, 5:00 p.m.: 17 IR 400; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2239; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2540)

828 IAC 1-1-3 Examinations required for licensure

Authority: IC 25-14-1-13
Affected: IC 25-14-1-3

Sec. 3. In order to obtain an Indiana license to practice dentistry, each applicant must pass an examination that includes the following:
1) All sections of the national dental board examination.
2) A clinical examination.
3) A written examination covering Indiana law relating to the practice of dentistry and dental hygiene.


828 IAC 1-1-4 Supervision of examinations; candidate identification numbers (Repealed)

Sec. 4. (Repealed by State Board of Dentistry; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2246)

828 IAC 1-1-5 Written examination; scope (Repealed)
828 IAC 1-1-6 National board examination; dental and dental hygiene law examinations
Authority: IC 25-14-1-13
Affected: IC 25-14-1-13

Sec. 6. (a) A passing score on a national board dental examination, as approved by the board, must be achieved by the applicant before the applicant will be permitted to take the written examination covering Indiana law relating to the practice of dentistry and dental hygiene.

(b) Passage of the Indiana dental and dental hygiene law examination with a score of at least seventy-five (75) is mandatory before the applicant may be licensed. Applicants failing the law examination may retake the law examination at a time, date, and place to be set by the board not sooner than thirty (30) days from the time the law examination was last taken. (State Board of Dentistry; PT 1, Rule 6; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 50; filed May 16, 1977, 10:10 a.m.: Rules and Regs. 1978, p. 192; filed Apr 12, 1984, 8:34 a.m.: 7 IR 1520; filed Nov 7, 1986, 9:00 a.m.: 10 IR 431; filed Apr 19, 1991, 3:00 p.m.: 14 IR 1726; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2240; filed Feb 26, 2004, 3:45 p.m.: 27 IR 2279; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2541)

828 IAC 1-1-7 Clinical examination
Authority: IC 25-14-1-5; IC 25-14-1-13
Affected: IC 25-14-1-3

Sec. 7. To be eligible for licensure by examination, an applicant must meet any one (1) of the following clinical examination requirements:

(1) Have passed all parts of one (1) of the following examinations within the five (5) year period immediately before the date of the board's receipt of the applicant's application:

(A) The Central Regional Dental Testing Service (CRDTS) examination.

(B) The North East Regional Board (NERB) examination.

(C) The Southern Regional Testing Agency (SRTA) examination.

(D) The Western Regional Examining Board (WREB) examination.

(2) Have taken an examination administered by the board and received a passing score as established by the board. (State Board of Dentistry; PT 1, Rule 7; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 50; filed May 16, 1977, 10:10 a.m.: Rules and Regs. 1978, p. 192; filed Oct 12, 1993, 5:00 p.m.: 17 IR 400; filed Sep 11, 2000, 2:23 p.m.: 24 IR 377; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 26, 2004, 3:45 p.m.: 27 IR 2279; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2541)
such office(s) and notify the board of the discontinuation of an office(s) within thirty (30) days.

(b) A duplicate license to practice dentistry or dental hygiene in Indiana will be issued upon written, verified request and payment of the required fee. The request shall state the address(es) at which the license will be used. (State Board of Dentistry; 828 IAC 1-1-13; filed Nov 7, 1980, 12:45 pm: 3 IR 2190; filed Oct 16, 1985, 3:57 pm; 9 IR 521; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2866)

828 IAC 1-1-14 Advertising
Authority: IC 25-14-1-12; IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-1; IC 25-14-4
Sec. 14. (a) Any advertisement for dental treatment shall include the names of the licensed dentists associated with such treatment or treatment facility or employed by the treatment facility or another dentist. (b) Advertisements listed in telephone directories, or other such advertisements which are listed once a year, must include the names of the licensed dentists associated with the treatment or treatment facility or employed by the treatment facility or another dentist as of the date the contract is made to run the advertisement. (c) A referral service shall not engage in false, misleading, or deceptive advertising as such may be determined by the board. (State Board of Dentistry; 828 IAC 1-1-14; filed Nov 7, 1980, 12:45 p.m.: 3 IR 2190; filed Oct 16, 1985, 3:57 p.m.: 9 IR 521; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2866; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2866)

828 IAC 1-1-15 Professional conduct, competency; physical or mental examination
Authority: IC 25-14-1-13
Affected: IC 25-1-9-9
Sec. 15. (a) Dental incompetence or improper conduct of a dentist includes, but is not limited to, any one (1) or any combination of the following acts:
(1) Practicing while under the influence of alcohol or other drugs which impair skill or judgment.
(2) Practicing with a physical disability, mental disability, disease, or disorder which impairs skill or judgment for the dental procedure being performed.
(3) Practicing while knowingly afflicted with a serious disease which could be transmitted to the patient.
(4) Operating an office or treatment facility which is lacking the necessary equipment and generally prevailing standards of sanitary or sterilization procedures.
(5) Providing drugs or access to drugs for someone for use other than in the proper course of dental diagnosis or treatment.
(6) Performing a treatment or procedure which violates acceptable standards of practice and results in failure or is detrimental to the patient.
(7) Engaging in conduct constituting gross negligence or repeatedly failing to meet minimum standards of performance in diagnosis or treatment as measured against generally prevailing professional standards.
(8) Practicing or offering to practice beyond the scope permitted by law.
(9) Permitting or delegating the performance of a procedure to one not qualified by education, training, or licensure to undertake such procedure.
(10) Failing to inspect:
(A) dental services during the course of their performance;
(B) completed and delivered dental prosthetic appliances; or
(C) completed dental restorations.
(11) Failing to be present in the dental facility to properly supervise treatment of patients, provided that such supervision has not been delegated to another dentist.
(12) Failing to keep adequate dental records.
(13) Failing to submit a complete report to the board as required by section 22 of this rule.
(14) Performing professional services which have not been duly authorized by the patient or the patient's legal guardian.
(15) Providing treatment for a patient if the dentist is not prepared to handle any emergencies resulting from such treatment or failing to refer the patient to a practitioner willing to perform such emergency treatment.
(16) Failing to maintain records of an examination, diagnosis, or treatment performed. Such information must be entered in the patient's records within ten (10) days after the examination, diagnosis, or treatment is performed.
(17) Signing an incomplete prescription form.
(18) Entering a contract with a third party in which the dentist may not inform the patient about the diagnosis and the treatments possible.
(b) Any dentist holding a general anesthesia-deep sedation or light parenteral conscious sedation permit: (1) who fails to comply with 828 IAC 3; or (2) who lacks the ability, skill, or knowledge to competently use general anesthesia, deep sedation, or light parenteral conscious sedation; is subject to disciplinary action under IC 25-1-9-9.
(c) Any dentist who utilizes general anesthesia-deep sedation or light parenteral conscious sedation without a permit is subject to disciplinary action by the board under IC 25-1-9-9. The fact that the patient was not injured by the use of general anesthesia, deep sedation, or light parenteral conscious sedation is not a defense to this subsection.
(d) The board may order a licensed dentist to submit to a reasonable physical or mental examination if his or her physical or mental capacity to practice safely is at issue in a disciplinary proceeding. The choice of the practitioner is subject to approval by the board.
(e) Dentists shall exercise reasonable care and diligence in the conduct of research and shall utilize
generally accepted scientific principles and current professional theory and practice. New or experimental procedures, techniques, and theories shall be utilized only with proper research safeguards, informed consent, and peer review of the procedures or techniques. (State Board of Dentistry; 828 IAC 1-1-16; filed Apr 25, 1983, 6:52 a.m.; 6 IR 1085; errata, 7 IR 700; filed Oct 16, 1985, 3:57 p.m.; 9 IR 521; filed Aug 29, 1986, 2:30 p.m.; 10 IR 20; filed Dec 2, 1987, 9:34 a.m.; 11 IR 1286; filed Jun 8, 1992, 5:00 p.m.; 15 IR 2236; filed Oct 12, 1993, 5:00 p.m.: 17 IR 400; filed Oct 14, 1993, 5:00 p.m.: 17 IR 402; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-16 Advertising; definitions
Authority: IC 25-13-1-5; IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-1; IC 25-14-4

Sec. 16. (a) As used in this rule, “advertise” means the act of attempting to direct any communication to the public by any means for the purpose of inducing the public to obtain the services of a particular practitioner or group of practitioners.
(b) As used in this rule, “dental service” means any diagnostic or treatment material or procedure which involves oral or related supporting structures and is restricted to the use or performance by licensed personnel.
(c) As used in this rule, “person” means an individual, partnership, corporation, or other legal entity.
(d) As used in this rule, “referral service” means a person, firm, partnership, association, corporation, agent, or employee that engages in, for profit, any business or service that in whole or in part includes cooperative advertising on behalf of certain Indiana dentists and the subsequent referral or recommendation of interested consumers to certain dentists for any form of dental service or treatment.
(e) As used in this rule, “routine”, or any other term conveying a similar concept, when used to describe any dental service, means any service which includes all of those procedures comprising the usual steps taken by a majority of Indiana dentists in the performance of that service. (State Board of Dentistry; 828 IAC 1-1-16; filed Apr 14, 1983, 9:40 a.m.: 6 IR 1083; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2866; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-17 Advertising; forms of media used
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-1-9; IC 25-14-1; IC 25-14-4

Sec. 17. (a) Advertising of dental services is permitted by any media whatsoever, whether written, spoken, or pictorial, and to cover any geographic area. Specific vehicles include, but are not limited to, the following:
(1) Signs.
(2) Newspapers.
(3) Magazines.
(4) Circulars.
(5) Newsletters.
(6) Television.
(7) Radio.

(8) Public appearance.
(9) Public directories.

However, section 16 of this rule, this section, and sections 18 and 19 of this rule shall apply to all forms of advertising, including cooperative advertising provided by a referral service, whose audience or potential audience includes citizens of Indiana.
(b) The responsibility for an advertisement of a dental service shall be borne by:
(1) any and all practitioners on whose behalf the advertising was conducted;
(2) any dentist responsible for placing the advertisement; and
(3) if placed by a referral service, the referral service shall also bear responsibility.

828 IAC 1-1-18 Advertising; content
Authority: IC 25-13-1-5; IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-1; IC 25-14-4-4

Sec. 18. (a) Fees for any or all dental services may be advertised; however, violation of any of the provisions in this section may be construed as false, misleading, or deceptive.
(b) An advertisement of a fee for a dental service must include a specified period for which that fee shall be in effect, or that service must remain available at or below that fee for a minimum period of ninety (90) days following the final advertisement for that service, unless that service is found to be detrimental to the health of the public.
(c) A service advertised as routine or with a stated fee must include all components of providing that service without additional charges added thereto without additional unstated restrictions.
(d) Discount offers for a dental service are permissible for advertising only when:
(1) the nondiscounted or full price and the final discounted price are also disclosed in the advertisement; and
(2) such discount is not contingent upon the procurement of additional patients, potential patients, or the purchase of additional services.

The dates a discount will be in force must be clearly identified.
(e) When an office charges a range of fees for a dental service, any advertisement of the fee for that service must disclose the range and include a listing of all of the factors which cause the fee to vary.
(f) A dentist may advertise as being a specialist in, or limiting practice to, a particular field of dentistry in:
(1) dental public health;
(2) endodontics;
(3) oral and maxillofacial pathology;
(4) oral and maxillofacial radiology;
(5) oral and maxillofacial surgery;
(6) orthodontics and dentofacial orthopedics;
(7) pediatric dentistry;
(8) periodontics; or
(9) prosthodontics;
provided the dentist has graduated from an accredited advanced dental educational program.

(g) An accredited advanced dental educational program is one that meets the requirements and standards of:


These standards are hereby incorporated by reference and made applicable to this section. Copies of the standards are available for public inspection at the offices of the Health Professions Bureau, 402 West Washington Street, Room W041, Indianapolis, Indiana 46204. Copies of the standards are available from the entity originally issuing the incorporated matter, the Commission on Dental Accreditation, American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611.

(h) As used in this section, "specialist" pertains to this section only for the purpose of defining advertising and must not be randomly applied to any other law or rule of IC 25-14.

(i) This section does not preclude or limit any dentist from offering and performing any treatment to any patient as prescribed by IC 25-14.

(j) All dentists who have claimed to be dental specialists, or hold themselves out to be engaged in a dental practice limited to any of the dental specialties in subsection (f), without regard to the matter incorporated by reference in subsection (f), and can document such claim to have acted as such prior to January 1, 1965, may continue to act as such under the protection of this rule.

(k) A dentist who is not considered a specialist by this section and who wishes to announce the services available in his or her practice may announce the availability of those services so long as he or she avoids any communications that express or imply specialization. The dentist shall also state that the services are being provided by a general dentist. No dentist shall announce available services in any way that would be false or misleading in any material respect.

(l) The factors of availability such as hours of practice and office locations may be advertised provided that any such advertisement must include the names of all practitioners providing dental services at each location.

(m) An advertisement indicating that superior services, better materials, or more skillful care are available in a particular office or by a group of practitioners may be deceptive.

(n) Guarantees or warranties, whether expressed or implied, regarding the successful outcome of treatment, length of service, or durability of materials may be deceptive if advertised. Any testimonials or endorsements such as character witness, benefits of treatment, or expressions of appreciation may be misleading when advertised.

(o) A referral service shall only advertise a dentist as a specialist if such dentist has complied with subsections (f) through (k) and has presented such referral service with verification of compliance. An advertisement for a dentist not complying with subsections (f) through (k) may only claim the dentist may provide routine dental services and other services and that the dentist is not to be considered a specialist.

(p) Referral services shall provide disclaimers in compliance with IC 25-14-4. A disclaimer shall be written for advertisements placed in written media, audio for radio advertisements, and both audio and visual for television advertisements.

(q) Advertising in any media by a referral service must not lead consumers to believe that they are receiving an impartial referral based on all dentists in the area instead of only those dentists participating in the referral service. (State Board of Dentistry; 828 IAC 1-1-18; filed Apr 14, 1983, 9:40 a.m.: 6 IR 1084; filed Jan 16, 1986, 3:17 p.m.: 9 IR 1364; filed Aug 29, 1986, 2:30 p.m.: 10 IR 21; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2867; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2241)

828 IAC 1-1-19 Advertising; records

Authority: IC 25-13-1-5; IC 25-14-1-13; IC 25-14-4-9

Affected: IC 25-1-9; IC 25-14-1; IC 25-14-4
Sec. 19. It shall be the responsibility of the dentist or group of practitioners on whose behalf an advertisement appears to keep records of any and all advertisements placed. Copies of written advertisements, scripts, or transcripts of radio and television announcements, and appropriate copies of any other forms of advertisements must be retained by the practitioner for a period of six (6) months following the last appearance of an advertisement. It shall further be the responsibility of a practitioner to submit to the board an appropriate copy of each advertisement used in the past six (6) months upon written request of the board. (State Board of Dentistry; 828 IAC 1-1-19; filed Apr 14, 1983, 9:40 a.m.: 6 IR 1084; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2868; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.1 Referral services; dental fees; services provided
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.1. (a) A dentist participating with a referral service shall not charge patients referred by such referral service any fee that exceeds the usual, customary, and reasonable fee charged patients of the participating dentist, but not referred by such referral service.

(b) A dentist participating with a referral service shall not reduce the amount of service or lower the quality of the service provided to patients referred by a referral service that the dentist would provide for the dentist's patients who were not referred by such referral service. (State Board of Dentistry; 828 IAC 1-1-19; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2868; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.2 Referral services; solicitation
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.2. (a) Any communication between a prospective patient and a referral service must be initiated by such prospective patient.

(b) A referral service shall not charge any individual contacting a referral service a fee for obtaining information from the referral service. (State Board of Dentistry; 828 IAC 1-1-19; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2868; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.3 Referral services; complaints
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.3. A referral service that receives a complaint with regard to a dentist participating in its service must notify the complaining party that such party has the right to notify the consumer protection division of the office of the attorney general and must be provided with the address and telephone number of the office of the attorney general. (State Board of Dentistry; 828 IAC 1-1-19; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2868; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.4 Referral service; patient referral
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.4. (a) A referral service may not refer to participating dentists who are specialists or participating dentists that purport to provide special services unless the patient specifically requests a specialist or the special service. The fact that the patient purported to have a condition or necessity notwithstanding, unless a specific specialty or service is requested, without prompting by the referral service, the patient will be referred to a general dentist.

(b) Any fee paid to a referral service from a dentist shall not be dependent upon the number of referrals received by that dentist from such referral service.

(c) A referral service shall not designate an exclusive geographic area to a specific dentist from which all patients shall be referred.

(d) If requested, and where possible, the referral service will provide multiple names of participating dentists in the patient's geographic area as determined by the patient's need.

(e) A referral service shall not limit the number of participating dentists who can enroll in the referral service in a given geographic region. (State Board of Dentistry; 828 IAC 1-1-19; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2869; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.5 Referral services; compensation
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.5. A referral service shall charge dentists participating in the same program within the same advertising market the same fee for such service provided. Varying charges may be charged upon the introduction of new advertising rates in an advertising market provided all dentists participating in the same program are charged the same rate within six (6) months of the initial change in rates. (State Board of Dentistry; 828 IAC 1-1-19; filed Aug 9, 1994, 2:45 p.m.: 17 IR 2869; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-19.6 Referral services; verification of licensure
Authority: IC 25-14-1-13; IC 25-14-4-9
Affected: IC 25-1-9; IC 25-14-4

Sec. 19.6. (a) A referral service shall ascertain the credentials of all participating dentists with regard to the following:

(1) Licensure status.

(2) Compliance with the requirements of section 18(f) through 18(g) of this rule if the participating dentist claims to be a specialist.

(b) The referral service shall disclose to all participating dentists in all contracts, whether oral or written, that, in addition to the referral service, the participating dentist may also be held responsible for the violation if an advertisement is found to be in violation of IC 25-14-4 and
828 IAC 1-1-22 Mandatory reporting
Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9; IC 25-14-1

Sec. 22. (a) A report must be submitted to the board when:
(1) a mortality occurs in connection with dental procedures performed in a dentist's office;
(2) a procedure performed in the dentist's office results in permanent injury; or
(3) a procedure performed in a dentist's office results in hospitalization other than for the continuing treatment of infection that was the cause of the procedure or as a direct result of the patient's oral-facial pathology.
(b) The report must be submitted to the board within seven (7) days after the incident occurs or the injury manifests itself.
(c) The information provided to the board must include the following:
(1) Name, age, and address of the patient.
(2) Name of the dentist and other personnel present during the incident.
(3) Address of the facility or office where the incident took place.
(4) Technique, if any, of general anesthesia or sedation being utilized at the time of the incident.
(5) Dosages, if any, of drugs administered to the patient.
(6) A narrative description of the incident, including approximate times and evolution of symptoms.

(d) Violation of this rule subjects the practitioner to disciplinary action under IC 25-1-9. (State Board of Dentistry; 828 IAC 1-1-22; filed Sep 21, 1992, 9:00 a.m.: 16 IR 718; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-1-23 Illegal, unlawful, incompetent, or fraudulent conduct; reporting procedures
Authority: IC 25-14-1-13
Affected: IC 25-1-9; IC 25-14-1

Sec. 23. (a) A dentist who has a reasonable belief based upon personal knowledge that another dentist has engaged in illegal, unlawful, incompetent, or fraudulent conduct in the practice of dentistry shall promptly report such conduct to a peer review committee, as defined in IC 34-4-12.6-1(c) [IC 34-4 was repealed by P.L.1-1998, SECTION 221, effective July 1, 1998.], having jurisdiction over the offending dentist and the matter. This subsection does not prohibit a dentist from promptly reporting the conduct directly to the board or to the consumer protection division of the office of the attorney general of Indiana.

(b) A dentist who has personal knowledge of any person engaged in, or attempting to engage in, the unauthorized practice of dentistry shall promptly report such conduct to the board or to the consumer protection division of the office of the attorney general of Indiana.

(c) A dentist who voluntarily submits to, or is otherwise undergoing, a course of treatment for addiction, severe dependency upon alcohol, other drugs, or controlled substances, or psychiatric impairment, where such treatment is sponsored or supervised by an impaired practitioner’s committee of a state, regional, or local organization of professional health care providers, or where such treatment is sponsored or supervised by an impaired practitioner’s committee of a hospital, shall be exempt from reporting to a peer review committee, as set forth in subsection (a) or to the board or to the consumer protection division of the office of the attorney general of Indiana.

(d) If the dentist fails to comply with, or fails to make satisfactory progress in, the course of treatment, the chief administrative officer, the designee of the chief administrative officer, or any member of the impaired practitioner’s committee shall promptly report such facts and circumstances to the board or to the consumer protection division of the office of the attorney general of Indiana.

(e) This section shall not, in any manner whatsoever, directly or indirectly, be deemed or construed to prohibit, restrict, limit, or otherwise preclude the board from taking such action as it deems appropriate or as may otherwise be provided by law. (State Board of Dentistry; 828 IAC 1-1-23; filed Oct 5, 1993, 5:00 p.m.: 17 IR 199;
Sec. 24. (a) Upon retirement, discontinuation of practice, or leaving or moving from a community, a dentist shall:

(1) notify all of the dentist’s active patients in writing, or by publication once a week for three consecutive weeks in a newspaper of general circulation in the community, that the dentist intends to discontinue the dentist’s practice of dentistry in the community; and

(2) encourage the dentist’s patients to seek the services of another dentist.

(b) This section does not apply to dentists engaged solely in internship, residency, preceptorship, fellowship, teaching, or other postgraduate dental education or training programs.

(c) The dentist shall make reasonable arrangements with the dentist’s active patients for the transfer of the dentist’s records, or copies thereof, to the succeeding practitioner, or, at the written request of the patient, to the patient, in compliance with IC 16-39.

(d) As used in this section, “active patient” applies and refers to a person whom the dentist has examined, treated, cared for, or otherwise consulted with during the two (2) year period prior to retirement, discontinuation of practice, or moving from or leaving the community.

(e) Nothing in this section supersedes the requirements of IC 16-39. (State Board of Dentistry; 828 IAC 1-1-24; filed May 21, 2001, 4:11 p.m.; 24 IR 3066)

Rule 2. Dental Hygienists; Licensure by Examination

828 IAC 1-2-1 Qualifications of applicants; accredited and approved dental hygiene schools

Authority: IC 25-13-1-5
Affected: IC 25-13-1-6

Sec. 1. All applicants for licensure to practice dental hygiene must:

(1) have graduated from a school of dental hygiene that is accredited by the Commission on Dental Accreditation of the American Dental Association; and

(2) submit certification of having completed within the prior year an American Red Cross or American Heart Association cardiopulmonary resuscitation course or another course approved by the board.


828 IAC 1-2-2 Application forms

Authority: IC 4-1-8-1; IC 25-13-1-5
Affected: IC 25-13-1-4

Sec. 2. (a) The applicant for licensure must complete the application on forms prescribed and provided by the board. The applicant shall verify all statements contained in the application. The verified application, fees, and other documents that the board may require must be submitted to the board.

(b) The following proof that the applicant is a graduate of a school of dental hygiene that is recognized by the board must be submitted to the board as follows:

(1) An official transcript showing the date the degree was conferred.

(2) An official diploma or a certificate of completion signed by the dean and the registrar of the applicant’s school.

(c) Additional documents to be submitted by the applicant for a license include the following:

(1) Where the name on any document differs from the applicant’s name, one (1) of the following:

(A) A notarized or certified copy of a marriage certificate.

(B) Legal proof of a name change.

(2) Two (2) recent passport-type photographs of the applicant, taken within eight (8) weeks before filing of the application.

(3) If the applicant has been convicted of a criminal offense, excluding minor traffic violations, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been convicted. This notarized statement must include the following:

(A) The offense of which the applicant was convicted.

(B) The court in which the applicant was convicted.

(C) The cause number under which the applicant was convicted.

(D) The penalty imposed by the court.

(4) An applicant who is now, or has been, licensed to practice any health profession in another state or Canadian province must submit verification of license status. This information must be sent by the state or province that issued the license directly to the Indiana board.

(5) An applicant who is now, or has been, licensed to practice any health profession in another state shall submit a self-query form completed by the following:

(A) The National Practitioner Data Bank (NPDB).

(B) The Healthcare Integrity and Protection Data Bank (HIPDB) data bank.

(d) All applicants must submit the applicant’s United States Social Security number in order to be eligible for licensure. (State Board of Dentistry; PT 2, Rule 2; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 52;
828 IAC 1-2-3 Examinations required for licensure
Authority: IC 25-1-8-5; IC 25-13-1-5
Affected: IC 25-13-1-4; IC 25-13-1-7

Sec. 3. (a) In order to obtain an Indiana license to practice dental hygiene, each applicant must pass an examination that includes the following:
(1) All sections of the national dental hygiene board examination.
(2) A clinical examination.
(3) A written examination covering Indiana law relating to the practice of dentistry and dental hygiene.
(b) To be eligible for licensure by examination, an applicant must meet one (1) of the following clinical examination requirements:
(1) Have passed all parts of one (1) of the following examinations within the five (5) year period immediately before the date of the board’s receipt of the applicant’s application:
   (A) The Central Regional Dental Testing Service (CRDTS) examination.
   (B) The North East Regional Board (NERB) examination.
   (C) The Southern Regional Testing Agency (SRTA) examination.
   (D) The Western Regional Examining Board (WREB) examination.
(2) Have taken an examination administered by the board and received a passing score as established by the board.

828 IAC 1-2-4 Supervision of examinations; candidate identification numbers

Sec. 4. (Repealed by State Board of Dentistry; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2246)

828 IAC 1-2-5 Written examination; scope

Sec. 5. (Repealed by State Board of Dentistry; filed Nov 7, 1986, 9:00 a.m.: 10 IR 432)

828 IAC 1-2-6 National board examination; dental and dental hygiene law examination
Authority: IC 25-13-1-5
Affected: IC 25-13-1-4; IC 25-13-1-7

Sec. 6. (a) A passing score on a national board dental hygiene examination, as approved by the board, must be achieved by the applicant before the applicant will be permitted to take the written examination covering Indiana law relating to the practice of dentistry and dental hygiene.
(b) Passage of the Indiana dental and dental hygiene law examination with a score of at least seventy-five (75) is mandatory before the applicant may be licensed. Applicants failing the law examination may retake the law examination at a time, date, and place to be set by the board not sooner than thirty (30) days from the time the law examination was last taken. (State Board of Dentistry; PT 2, Rule 6; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 52; filed Apr 12, 1984, 8:34 a.m.: 7 IR 1521; filed Nov 7, 1986, 9:00 a.m.: 10 IR 431; filed Apr 19, 1991, 3:00 p.m.: 14 IR 1727; filed Jan 28, 1992, 5:00 p.m.: 15 IR 1014; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2244; filed Feb 26, 2004, 3:45 p.m.: 27 IR 2280; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2543)

828 IAC 1-2-7 Clinical examination; two sections; required score (Repealed)

Sec. 7. (Repealed by State Board of Dentistry; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

828 IAC 1-2-8 Supplies for examinations; duty to provide (Repealed)

Sec. 8. (Repealed by State Board of Dentistry; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

828 IAC 1-2-9 Conduct during examinations (Repealed)

Sec. 9. (Repealed by State Board of Dentistry; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

828 IAC 1-2-10 Dismissal of candidate for use of unfair assistance
Authority: IC 25-13-1-5
Affected: IC 25-13-1-7

Sec. 10. The board reserves the right to dismiss any applicant who may be detected in using, or attempting to use, any unfair assistance for herself or himself or another candidate. (State Board of Dentistry; PT 2, Rule 10; filed Aug 10, 1973, 11:00 a.m.: Rules and Regs. 1974, p. 53; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2244)

828 IAC 1-2-11 Other considerations in grading examinations (Repealed)

Sec. 11. (Repealed by State Board of Dentistry; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2246)

828 IAC 1-2-12 Failure; reexamination (Repealed)

Sec. 12. (Repealed by State Board of Dentistry; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

828 IAC 1-2-12.1 Invalid license; reapplication (Repealed)
Sec. 12.1. (Repealed by State Board of Dentistry; filed Oct 29, 1991, 3:00 p.m.: 15 IR 242)

828 IAC 1-2-13 Competency; physical or mental examination

Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-14-1-19.1

Sec. 13. (a) The board may determine “dental hygiene competency” on a case by case basis using comparable or equal standards as used in determining qualifications for initial licensure.

(b) “Dental hygiene incompetency or improper conduct of dental hygienists” includes but is not limited to any one (1) or any combination of the following acts:

(1) Practicing while under the influence of alcohol or other drugs which impair skill or judgment.
(2) Practicing with a physical disability, mental disability, disease, or disorder which impairs skill or judgment.
(3) Practicing while knowingly afflicted with a serious disease which could be transmitted to the patient.
(4) Repeatedly performing a treatment or procedure which is beyond the skill or knowledge of the practitioner with the results being detrimental to the patient.
(5) Repeatedly performing a treatment or procedure which violates acceptable standards of practice and results in failure or is detrimental to the patient.
(6)(A) Engaging in conduct constituting gross negligence; or (B) repeatedly failing to meet standards of performance in treatment as measured against generally prevailing peer performance.
(7) Practicing or offering to practice beyond the scope permitted by law.
(c) The Indiana state board of dental examiners may order a dental hygienist to submit to a reasonable physical or mental examination if his or her physical or mental capacity to practice safely is at issue in a disciplinary proceeding. The choice of the practitioner to administer the examination is subject to approval by the board.
(d) As a condition of reinstatement of a suspended or revoked license the board may, at its discretion, require the applicant for reinstatement to submit to all or part of the examination for initial licensure or to a similar examination. (State Board of Dentistry: 828 IAC 1-2-13; filed Apr 25, 1983, 8:52 am: 6 IR 1086; errata, 7 IR 700; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-2-14 Remedial education (Repealed)

Sec. 14. (Repealed by State Board of Dentistry; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

Rule 3. Dentists and Dental Hygienists; Licensure by Endorsement

Sec. 1. (Repealed by State Board of Dentistry; filed Sep 27, 2002, 2:38 p.m.: 26 IR 375)

828 IAC 1-3-1 Dental licensure by endorsement; credentials

Authority: IC 4-1-8-1; IC 25-14-1-13
Affected: IC 25-14-1-16

Sec. 1.1. (a) Persons seeking licenses to practice dentistry by endorsement shall do the following:
(1) File an application on a form supplied by the board.
(2) Submit the fees required by 828 IAC 0.5-2-3.
(b) The applicant for a license shall provide the following:
(1) Where the name on any document differs from the applicant’s name, one (1) of the following:
   (A) A notarized or certified copy of a marriage certificate.
   (B) Legal proof of a name change.
(2) Two (2) recent passport-type photographs of the applicant, taken within eight (8) weeks before filing of the application.
(3) An original transcript of the applicant’s dental education, including the following:
   (A) The degree or degrees conferred.
   (B) The date each degree was conferred.
(4) If the applicant has been convicted of a criminal offense, excluding minor traffic violations, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been convicted. This notarized statement must include the following:
   (A) The offense of which the applicant was convicted.
   (B) The court in which the applicant was convicted.
   (C) The cause number under which the applicant was convicted.
   (D) The penalty imposed by the court.
(5) An applicant who is now, or has been, licensed to practice any health profession in another state or Canadian province must submit verification of license status. This information must be sent by the state or province that issued the license directly to the Indiana board.
(6) The applicant shall submit a self-query form completed by the following:
   (A) The National Practitioner Data Bank (NPDB).
   (B) The Healthcare Integrity and Protection Data Bank (HIPDB) data bank.
(7) The applicant shall submit proof of the following:
(A) Completion of at least twenty (20) hours of continuing dental education taken in the previous two (2) years. No more than two (2) hours of training in basic life support shall count toward this requirement.

(B) That the applicant successfully completed the:

(i) National Board Dental Examination provided by the Joint Commission on Dental Examinations; or

(ii) National Dental Examining Board of Canada Written Examination provided by the National Dental Examining Board of Canada.

(C) That the applicant satisfactorily completed a national, regional, state, or provincial clinical licensing examination in any other state or Canadian province having and maintaining a standard of examination for licensure and laws regulating the practice of dentistry within that state or province that is substantially equivalent to the examination and licensing requirements of Indiana.

(D) That the applicant has been engaged in the active practice of dentistry for not less than two (2) years out of the three (3) years immediately preceding the submission of the application.

(8) The applicant shall submit the following:

(A) Written statements from at least three (3) practicing dentists verifying the applicant’s active, moral, and ethical practice of dentistry. The statements must:

(i) be originals; and

(ii) have been written not more than eight (8) weeks before the submission of the application.

(B) Proof that the applicant is currently certified in one (1) of the following:

(i) Basic life support.

(ii) Advanced cardiac life support.

(9) All information on the application shall be submitted under oath or affirmation, subject to the penalties for perjury.

(c) All applicants must submit the applicant’s United States Social Security number in order to be eligible for licensure. (State Board of Dentistry; 828 IAC 1-3-1.1; filed Sep 27, 2002, 2:38 p.m.: 26 IR 373; errata filed Sep 27, 2002, 2:59 p.m.: 26 IR 383; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2543)

828 IAC 1-3-1.5 Licensure to practice dental hygiene by endorsement; credentials

Authority: IC 4-1-8-1; IC 25-13-1-5; IC 25-14-1-13

Affected: IC 25-13-1-7; IC 25-13-1-17

Sec. 1.5. (a) Persons seeking licensure to practice dental hygiene by endorsement shall do the following:

(1) File an application on a form supplied by the board.

(2) Submit the fees required by 828 IAC 0.5-2.4.

(b) The applicant for a license shall provide the following:

(1) Where the name on any document differs from the applicant’s name, one (1) of the following:

(A) A notarized or certified copy of a marriage certificate.

(B) Legal proof of a name change.

(2) Two (2) recent passport-type photographs of the applicant, taken within eight (8) weeks before filing of the application.

(3) An original transcript of the applicant’s dental hygiene education, including the following:

(A) The degree or degrees conferred.

(B) The date each degree was conferred.

(4) If the applicant has been convicted of a criminal offense, excluding minor traffic violations, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been convicted. This notarized statement must include the following:

(A) The offense of which the applicant was convicted.

(B) The court in which the applicant was convicted.

(C) The cause number under which the applicant was convicted.

(D) The penalty imposed by the court.

(5) An applicant who is now, or has been, licensed to practice any health profession in another state must submit verification of license status. This information must be sent by the state that issued the license directly to the Indiana board.

(6) The applicant shall submit the following:

(A) A self-query form completed by the following:

(i) The National Practitioner Data Bank (NPDB).

(ii) The Healthcare Integrity and Protection Data Bank (HIPDB) data bank.

(B) Proof of completion of at least fourteen (14) hours of continuing dental hygiene education taken within the previous two (2) years. No more than two (2) hours of training in basic life support shall count toward this requirement.
Sec. 2. (a) Under IC 25-14-1-16(b)(2), an applicant for licensure by endorsement must have practiced dentistry for at least two (2) out of the three (3) years preceding the date of application.

(b) “Practice of dentistry” means that the applicant has actively engaged in clinical patient contact for at least an average of twenty (20) hours per week for two (2) years. A maximum of one (1) year of the two (2) year requirement may have been in postdoctoral training in a program approved by the board. (State Board of Dentistry; 828 IAC 1-3-2; filed Apr 19, 1991, 3:00 p.m.: 14 IR 1728; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Sep 27, 2002, 2:38 p.m.: 26 IR 375; filed Mar 23, 2006, 10:15 a.m.: 29 IR 2545)

828 IAC 1-3-3 “Satisfactory practice of dental hygiene” defined
Authority: IC 25-13-1-5
Affected: IC 25-13-1-17
Sec. 3. (a) An applicant for a dental hygiene license under IC 25-13-1-17(a) must have engaged in the satisfactory practice of dental hygiene for at least two (2) years out of the preceding five (5) years.

(b) As used in this section, “satisfactory practice of dental hygiene” means that the applicant has actively engaged in practicing dental hygiene for at least an average of twenty (20) hours per week for two (2) years. A maximum of one (1) year of the two (2) year requirement may have been in post associate degree training in dental hygiene in a program approved by the board. (State Board of Dentistry; 828 IAC 1-3-3; filed Apr 19, 1991, 3:00 p.m.: 14 IR 1728; filed Feb 4, 1994, 5:00 p.m.: 17 IR 1094; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Sep 27, 2002, 2:38 p.m.: 26 IR 375)

828 IAC 1-3-4 Dental licensure by endorsement; failure to renew expired license
Authority: IC 25-14-1-13
Affected: IC 25-14-1-10; IC 25-14-1-16
Sec. 4. The holder of a license that has expired under IC 25-14-1-10 for failure to renew may not apply for licensure by endorsement under IC 25-14-1-16(b) and this rule if the holder of the license has practiced dentistry in Indiana during the period of time while the license was expired. (State Board of Dentistry; 828 IAC 1-3-4; filed Feb 4, 1994, 5:00 p.m.: 17 IR 1094; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Feb 28, 2002, 3:17 p.m.: 25 IR 2246)

828 IAC 1-3-5 Dental hygiene licensure by endorsement; failure to renew expired license
Authority: IC 25-13-1-5
Affected: IC 25-13-1-8; IC 25-13-1-17
Sec. 5. The holder of a license that has expired under IC 25-13-1-8 for failure to renew may not apply for licensure by endorsement under IC 25-13-1-17(a) and this rule if the holder of the license has practiced dental hygiene in Indiana during the period of time while the license was expired. (State Board of Dentistry; 828 IAC 1-3-5; filed Feb
Rule 4. Practice of Dentistry

828 IAC 1-4-1 Definitions

Authority: IC 25-14-1-13
Affected: IC 25-14-1

Sec. 1. Definitions. The following terms as used in this rule [828 IAC 1-4] only shall mean:

(1) Dentists. Any person licensed to practice dentistry in any of the various states of the United States.

(2) Unlicensed Person. Any person not holding a valid license to practice dentistry.

(3) Dental Diagnostic Materials. Any device, models, impressions, or dental radiographs of a dental patient which are prepared and used by a dentist in the diagnosis or treatment of any lesion or disease of the human oral cavity, teeth, gums, maxillary or mandibular structures. Claim forms are not dental diagnostic materials.

(4) Dental Treatment Plan. Any course of dental treatment prescribed by a dentist.

(5) Dental Benefits. Any funds, money, or reimbursement, paid either to a dentist or to a dentist’s patient by a third party, that compensates in-full or in part for the cost of dental treatment.

828 IAC 1-4-2 Practice of dentistry; license

Authority: IC 25-14-1-13
Affected: IC 25-14-1-23

Sec. 2. Practice of Dentistry—License Required. Any person using dental diagnostic materials for the purpose of recommending changes in the treatment plan upon which benefits are based is practicing dentistry and must be a dentist. (State Board of Dentistry; 828 IAC 1-4-2; filed Apr 8, 1982, 11:00 am: 5 IR 992; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-4-3 Unauthorized practice of dentistry

Authority: IC 25-14-1-13
Affected: IC 25-14-1-19.1

Sec. 3. Assisting the Unauthorized Practice of Dentistry Prohibited. Indiana dentists shall not knowingly submit dental diagnostic materials to any party involved in the Unauthorized Practice of Dentistry. (State Board of Dentistry; 828 IAC 1-4-3; filed Apr 8, 1982, 11:00 am: 5 IR 993; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 1-4-4 Board members; duties

Authority: IC 25-14-1-13
Affected: IC 25-14-1-12

Sec. 4. (a) Board members who are not trained and licensed as dentists may not assume duties which require the expertise of a dentist.

(b) The president of the board or his representative shall assign duties to members of the board. If a board member objects to one of these assignments, a majority vote of the board members present shall be taken to resolve the issue. (State Board of Dentistry; 828 IAC 1-4-4; filed Apr 25, 1983, 8:52 am: 6 IR 1084; errata, 7 IR 700; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

Rule 5. Continuing Education for Renewal of License

828 IAC 1-5-1 Application for approval of study clubs

Authority: IC 25-13-2-10; IC 25-14-3-12
Affected: IC 25-13-2; IC 25-14-3

Sec. 1. (a) Study clubs must submit an application and a fee for approval of the study club as a sponsor of continuing education credit for dentists and/or dental hygienists. Programs presented:

(1) prior to the receipt of approval; or

(2) after the withdrawal or termination of approval of the study club;

by the board shall not count toward continuing education requirements.

(b) The application for approval shall include the following:

(1) The name of the study club.

(2) The address of the study club.

(3) A statement that the study club is organized for the purpose of scientific study.

(4) A statement that the study club operates under the direction of elected officers.

(5) The names and addresses of each officer.

(6) A copy of the study club’s bylaws.

(7) The names of at least five (5) members of the study club.

(8) A statement that the study club will conduct regular meetings.

(9) A statement that the study club will maintain written attendance records of all meetings, which shall be submitted to the board upon request.

(10) A description of the types of programs or activities the study club intends to present.

(c) The application for approval must be signed by an officer of the study club. (State Board of Dentistry; 828 IAC 1-5-1; filed Jan 28, 1992, 5:00 p.m.: 15 IR 1015; filed Mar 26, 1993, 5:00 p.m.: 16 IR 1952; filed Sep 1, 2000, 2:20 p.m.: 24 IR 22; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Oct 8, 2002, 12:43 p.m.: 26 IR 371)

828 IAC 1-5-1.5 Study club sponsor approval; expiration

Authority: IC 25-13-2-10; IC 25-14-3-12
Affected: IC 25-13-2-2; IC 25-14-3-2

Sec. 1.5. (a) A study club continuing education sponsor approval issued by the board shall be valid for the remainder of the approval period in effect on the date the approval was issued.

(b) The approval issued by the board expires on March 2 of even-numbered years.
(c) The approval is not renewable. A new application and fee for study club continuing education sponsor approval must be filed for each license period.

(d) The approval of a study club sponsor issued by the board:

(1) prior to the effective date of this rule; and

(2) that is current and good standing;

shall remain valid until March 2, 2004. (State Board of Dentistry; 828 IAC 1-5-1.5; filed Oct 8, 2002, 12:43 p.m.: 26 IR 371)

828 IAC 1-5-2 Application for approval of organizations or individuals

Authority: IC 25-13-2-10; IC 25-14-3-12

Affected: IC 25-13-2-2; IC 25-14-3-2

Sec. 2. (a) This section applies to organizations or individuals referred to in IC 25-13-2-2(18) and IC 25-14-3-2(18).

(b) Individuals or organizations applying for approval must submit an application and a fee for approval as a sponsor of continuing education credit for dentists and/or dental hygienists. Programs presented:

(1) prior to the receipt of approval; or

(2) after the withdrawal or termination of approval of the individual or organization;

by the board shall not count toward continuing education requirements.

(c) The application for approval shall include the following:

(1) The name of the sponsoring individual or organization.

(2) The address and telephone number of the individual or organization.

(3) The following for organizations:

(A) A copy of all documents relating to the formation and continued existence of the organization.

(B) A description of the specific purposes for which the organization was formed.

(C) For each individual in the organization with direct responsibility for teaching and conducting an educational program of the organization, a vita or resume listing all educational and relevant work experience.

(4) For individuals, a vita or resume listing all educational and relevant work experience.

(5) A list of each educational program presented or sponsored by the individual or organization for five (5) years prior to the date of the request for approval.

(6) The following for each program listed under subdivision (5) given in the prior two (2) years:

(A) The date and location of the program.

(B) A brief summary of the content of the program.

828 IAC 1-5-2.5 Individual or organization sponsor approval; expiration

Authority: IC 25-13-2-10; IC 25-14-3-12

Affected: IC 25-13-2-2; IC 25-14-3-2

Sec. 2.5. (a) Approval of an individual or organization as a sponsor of continuing education issued by the board shall be valid for the remainder of the approval period in effect on the date the approval was issued.

(b) The approval issued by the board expires on March 2 of even-numbered years.

(c) The approval is not renewable. A new application and fee for an individual or organization continuing education sponsor approval must be filed for each license period.

(d) The approval of a sponsor issued by the board:

(1) prior to the effective date of this rule; and

(2) that is current and in good standing;

shall remain valid until March 2, 2004. (State Board of Dentistry; 828 IAC 1-5-2; filed Jan 28, 1992, 5:00 p.m.: 15 IR 1015; filed Mar 26, 1993, 5:00 p.m.: 16 IR 1953; filed Sep 1, 2000, 2:20 p.m.: 24 IR 22; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896; filed Oct 8, 2002, 12:43 p.m.: 26 IR 372)

828 IAC 1-5-3 Verification of attendance

Authority: IC 25-13-2-10; IC 25-14-3-12

Affected: IC 25-13-2-2; IC 25-14-3-2

Sec. 3. Organizations, individuals, or study clubs approved under IC 25-13-2 or IC 25-14-3-2, shall provide each attendee with verification of attendance which shall include the following:

(1) A record of the number of hours spent in the continuing education course.
(2) The name of the course or a description of the subject matter presented.
(3) The name of the sponsoring approved organization, individual, or study club.
(4) The date and location of the program.

828 IAC 1-5-4 Civil penalties for a dental hygienist
Authority: IC 25-13-2-11; IC 25-13-2-12

Sec. 4. If a dental hygienist is not in compliance with IC 25-13-2 and is assessed a civil penalty under IC 25-13-2-11(b)(1) [IC 25-13-2-11 was repealed by P.L.157-2006, SECTION 76, effective July 1, 2006,] or IC 25-13-2-12(b)(1) [IC 25-13-2-12 was repealed by P.L.157-2006, SECTION 76, effective July 1, 2006,], the amount of the civil penalty shall be based on the number of continuing education credit hours needed per license period to be in compliance as follows:

<table>
<thead>
<tr>
<th>Number of hours needed to be in compliance</th>
<th>Civil penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–2 hours</td>
<td>$50</td>
</tr>
<tr>
<td>3–5 hours</td>
<td>$100</td>
</tr>
<tr>
<td>6–10 hours</td>
<td>$250</td>
</tr>
<tr>
<td>11–14 hours</td>
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</tr>
</tbody>
</table>

828 IAC 1-5-5 Civil penalties for a dentist
Authority: IC 25-14-3-12

Sec. 5. If a dentist is not in compliance with IC 25-14-3 and is assessed a civil penalty under IC 25-14-3-13(b)(1) [IC 25-14-3-13 was repealed by P.L.157-2006, SECTION 76, effective July 1, 2006,] or IC 25-14-3-14(b)(1) [IC 25-14-3-14 was repealed by P.L.157-2006, SECTION 76, effective July 1, 2006,], the amount of the civil penalty shall be based on the number of continuing education credit hours needed per license period to be in compliance as follows:

<table>
<thead>
<tr>
<th>Number of hours needed to be in compliance</th>
<th>Civil penalty</th>
</tr>
</thead>
<tbody>
<tr>
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<td>$250</td>
</tr>
<tr>
<td>6–10 hours</td>
<td>$500</td>
</tr>
<tr>
<td>11–15 hours</td>
<td>$750</td>
</tr>
<tr>
<td>16–20 hours</td>
<td>$1,000</td>
</tr>
</tbody>
</table>
(f) In order to comply with IC 25-13-1-8(b)(3), a course in basic life support must be successfully completed during each two (2) year license period.

(g) If a dental hygienist is audited for compliance with the requirement for completion of a basic life support course, at the time of the audit the dental hygienist must submit any of the following:

1. A copy of the cardiopulmonary resuscitation card showing the date of issuance and the date of expiration or date it is due for renewal.
2. A copy of the attendance sheet for the course that has been signed by the instructor and includes the date the course was given and certifies that the applicant successfully completed the course.
3. Proof of reasonable cause for noncompliance. A waiver will only be granted for medical conditions or disabilities that prevent the dental hygienist from complying with the basic life support requirement. All requests for waivers of the basic life support requirement must be submitted in writing. A physician's statement documenting the disability or medical condition must be submitted with the request.

Rule 7. Inactive Dental License

828 IAC 1-7-1 Inactive status for dentists
Authority: IC 25-14-1-10; IC 25-14-1-13
Affected: IC 25-14-1-27.1; IC 25-14-3-8

Sec. 1. (a) The board may issue a license to the holder of an inactive license under IC 25-14-1-27.1 if the applicant:

1. applies in the form and manner required by the board;
2. pays the renewal fee and reinstatement fee established in 828 IAC 0.5-2-3; and
3. meets the continuing education requirements established under this section.
(b) The applicant must complete fifty percent (50%) of the continuing education that would have been required for renewal under IC 25-13-2-6 during each license period or partial license period the license was inactive.

(c) Not more than twenty-five percent (25%) of the continuing education required under this section may be in the area of practice management.
(d) The continuing education submitted must include a certification program in basic life support. Not more than two (2) credit hours for certification programs in basic life support may be applied toward the credit hour requirement. The board may waive the basic life support requirement for applicants who show reasonable cause.
(e) Documentation verifying the completion of the continuing education must be submitted to the board prior to the reactivation of the applicant’s license.
(f) If the applicant’s license has been inactive for five (5) or more years, the applicant shall make a personal appearance before the board. (State Board of Dentistry; 828 IAC 1-7-1; filed Sep 11, 2000, 2:20 p.m.: 24 IR 376; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2899; filed Oct 8, 2002, 12:40 p.m.: 26 IR 376)

828 IAC 1-7-2 Inactive status for dental hygienists
Authority: IC 25-13-1-5; IC 25-14-1-13
Affected: IC 25-13-1-17.2; IC 25-13-2-6

Sec. 2. (a) The board may issue a license to the holder of an inactive license under IC 25-13-1-17.2 if the applicant:

1. applies in the form and manner required by the board;
2. pays the renewal fee and reinstatement fee established in 828 IAC 0.5-2-4; and
3. meets the continuing education requirements established under this section.
(b) The applicant must complete fifty percent (50%) of the continuing education that would have been required for renewal under IC 25-13-2-6 during each license period or partial license period the license was inactive.
(c) Not more than twenty-five percent (25%) of the continuing education required under this section may be in the area of practice management.
(d) The continuing education submitted must include a certification program in basic life support. Not more than two (2) credit hours for certification programs in basic life support may be applied toward the credit hour requirement. The board may waive the basic life support requirement for applicants who show reasonable cause.
(e) Documentation verifying the completion of the continuing education must be submitted to the board prior to the reactivation of the applicant’s license.
(f) If the applicant’s license has been inactive for five (5) or more years, the applicant shall make a personal appearance before the board. (State Board of Dentistry; 828 IAC 1-7-2; filed Oct 8, 2002, 12:40 p.m.: 26 IR 377)

ARTICLE 2. DENTAL PROFESSIONAL CORPORATIONS

Rule 1. Corporations; Dental

828 IAC 2-1-1 Name of corporation
Authority: IC 25-14-1-13
Affected: IC 23-1.5; IC 25-14

Sec. 1. (a) Any dental professional corporation whose name does not contain the words “professional services corporation” or “professional corporation” or an abbreviation of those words so named before September 1, 1983, the effective date of IC 23-1.5, is hereby grandfathered and need not contain these words.
(b) The purpose of the name of a dental professional corporation is primarily to identify that corporation and should not be named as to be a means of false and misleading advertising.
(c) Only a professional corporation in which all shareholders are dentists licensed under IC 25-14 may use the term “dental” in its corporate name.
(d) Any dental professional corporation must prominently display its name at each place of business and/or professional practice. (State Board of Dentistry; 828
ARTICLE 3. ANESTHESIA AND SEDATION

Rule 1. General Requirements

828 IAC 3-1-1 Application; general requirements
Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9

Sec. 1. (a) Prior to administering general anesthesia, deep sedation, or light parenteral conscious sedation, a dentist shall obtain from the board a permit that authorizes the dentist to utilize the form of anesthesia or sedation desired.

(b) The board shall issue a permit to utilize the anesthesia or sedation technique requested if the following requirements are met:

(1) Submission of an application form provided by the board.
(2) Current licensure by the board.
(3) Satisfactory evidence of completion of educational and training requirements as defined in section 3 or 5 of this rule.
(4) Payment of the required fees.
(5) Submission of satisfactory evidence that all requirements for equipment, personnel, and procedures have been met.
(6) Submission of an affidavit that the practitioner’s office meets the equipment requirements of section 10 or 11 of this rule.
(7) Submission of proof that:
   (A) the dentist is trained in and has successfully completed a course in advanced cardiac life support; or
   (B) the dentist is certified as an instructor in advanced cardiac life support.

(c) An applicant who is granted a general anesthesia-deep sedation permit may administer light parenteral conscious sedation without holding a separate light parenteral conscious sedation permit.

828 IAC 3-1-2 General anesthesia-deep sedation permit
Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9

Sec. 2. (a) An applicant for a permit to employ general anesthesia or deep sedation must provide satisfactory evidence of completing a minimum of one (1) year of advanced (postdoctoral) training in anesthesiology and related academic subjects (postdoctoral) beyond the undergraduate dental school level in a residency in anesthesiology or oral surgery which meets the requirements stated in section 3 of this rule.

(b) Satisfactory evidence of completion of advanced training requirements means:

   * (1) a certificate of completion of the educational or training program signed by the dean of the board approved dental school or director of the board approved anesthesiology residency from which the training was obtained; or
   (2) an official transcript from the board approved dental school which clearly designates completion of the education or training.

828 IAC 3-1-3 Training and education programs for general anesthesia and deep sedation
Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9

Sec. 3. (a) The same level of training is necessary for administration of both deep sedation and general anesthesia.

(b) For the purpose of obtaining a permit to administer general anesthesia or deep sedation, a residency in anesthesiology or a residency in oral and maxillofacial surgery shall meet the following requirements:

(1) The training program must be full time and be a minimum of one (1) year in duration.
(2) The program shall be a joint cooperative effort between the training institution's department of anesthesiology and department of dentistry.
(3) Instruction in both didactic basic science and clinical procedures must be incorporated into the program. This instruction may be given in a seminar or conference format, or may include formal courses.
(4) The program shall include preanesthetic patient evaluation, administration of anesthesia in the operating room on a daily scheduled basis, postanesthetic care and management, and emergency call.
(5) Training must include anesthetic management for ambulatory outpatient procedures and the use of inhalation and intravenous sedation techniques.
(6) The program shall include instruction in pain and pain mechanisms.
(7) Beginning September 1, 1992, the program shall include training and successful completion of a course in advanced cardiac life support.

828 IAC 3-1-4 Light parenteral conscious sedation permit

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9

Sec. 4. (a) Dentists holding permits to administer general anesthesia-deep sedation will not be required to obtain a separate permit to administer light parenteral conscious sedation.

(b) In order to obtain a permit to utilize light parenteral conscious sedation, an applicant must meet one of the following educational and training criteria:

(1) The applicant graduated from an approved dental school which included training in conscious sedation techniques at the predoctoral level. This training must meet the requirements of section 5 of this rule.

(2) The applicant completed an intensive postdoctoral training program in the use of light parenteral conscious sedation which meets the requirements of section 5 of this rule.

(c) Satisfactory evidence of completion of educational and training requirements means the following:

(1) A certificate of completion of the educational or training program signed by the dean of the board approved dental school or medical school or director of a board approved hospital program from which the training was obtained.

(2) An official transcript from a board approved dental school which clearly designates completion of the educational or training program.

(3) A certificate of completion of a continuing education program which meets the requirements of section 5 of this rule. The certificate of completion shall be signed by the director of the continuing education program.

828 IAC 3-1-5 Training and education programs in light parenteral conscious sedation

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-14-1-3.1

Sec. 5. (a) A predoctoral training program in light parenteral conscious sedation shall meet the following requirements:

(1) Be obtained in a board approved dental school.

(2) Instruction shall include the following areas:

(A) Philosophy of pain control and patient management, including the nature and purpose of pain.

(B) Review of physiologic and psychological aspects of pain and apprehension.

(C) Physiologic monitoring.

(D) Organic pain problems and their management.

(E) Control of preoperative and operative pain and apprehension.

(F) Techniques of administration of light parenteral conscious sedation including intramuscular, intravenous, submucosal, and subcutaneous sedation.

(G) Prevention, recognition, and management of complications and emergencies, including the principles of advanced cardiac life support. Beginning September 1, 1992, instruction shall include training in and successful completion of a course in advanced cardiac life support.

(H) Interaction of pharmacological and psychological methods.

(I) Control of postoperative pain and apprehension.

(3) Each student must have experience in managing a minimum of ten (10) patients.

(b) A postdoctoral training program in light parenteral conscious sedation shall meet the following requirements:

(1) Include a minimum of sixty (60) hours of instruction.

(2) Include management of at least ten (10) patients.

(3) Include the following in the course content:

(A) Historical, philosophical, and psychological aspects of pain and anxiety control.

(B) Patient evaluation and selection through review of medical history taking, physical diagnosis, and psychological profiling.

(C) Definitions and descriptions of physiological and psychological aspects of pain and anxiety.

(D) A description of the stages of drug-induced central nervous system depression through all levels of consciousness and unconsciousness, with special emphasis on the distinction between the conscious and the unconscious state.

(E) Review of respiratory and circulatory physiology and related anatomy.

(F) Pharmacology of agents used in the conscious sedation techniques being taught, including drug interaction and incompatibility.
may become outdated soon after being written. However, the administration of light parenteral conscious sedation carries with it significant risks that mandate basic minimum requirements for patient protection.

(b) The following are the minimum standards of care when light parenteral conscious sedation is utilized:

(1) An appropriate medical history form must be completed and dated for each patient.
(2) The medical history form must be reviewed by the dentist, and all significant responses must be evaluated and noted on the form.
(3) If medical consultation or additional laboratory testing is indicated, it must be obtained prior to initiation of treatment except in an extreme emergency situation.
(4) Physical evaluation and pretreatment vital signs must be taken and recorded on the patient's chart.
(5) In addition to the dentist who has obtained training in resuscitation protocols, there must be present during administration of light parenteral conscious sedation at least one (1) additional person who has successfully completed a course in basic cardiac life support.
(6) Personnel trained in basic cardiac life support shall provide direct supervision and monitoring of the patient during the procedure and until the patient is deemed ready to leave the facility by the dentist.
(7) The patient shall be monitored by the pulse oximeter throughout the procedure.
(8) A blood pressure must be taken periodically throughout the procedure.
(9) The skin color, movement of breathing bag, blood color, or other parameters of adequate blood oxygenation shall be monitored throughout the procedure.
(10) At or before the time of discharge, printed postoperative instructions must be provided to the patient and a responsible adult who will accompany the patient. Vital signs must be stable and the patient must be appropriately responsive before leaving the dentist's office. The patient must be instructed not to operate any vehicle or other potentially hazardous device or engage in a potentially hazardous activity for an appropriate period of time.
(11) It is strongly recommended that the dentist and trained staff hold drills on emergency procedures four (4) times per year. A record that the drills have taken place should be maintained in the office of the dentist. The record should include the date that the drill took place and the names of those persons who participated in the drill. The records may be destroyed after three (3) years.
(12) The dentist shall maintain a record that the dentist has training in resuscitation protocols and that the dentist's staff has maintained, on an annual basis, current training in basic cardiac life support.

Sec. 6. (Repealed by State Board of Dentistry; filed Dec 24, 1997, 11:35 a.m.: 21 IR 1756)

828 IAC 3-1-6 Required emergency equipment
(Repealed)

828 IAC 3-1-6.1 Standard of care; light parenteral conscious sedation

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-14-1-23

Sec. 6.1. (a) The standard of care is a dynamic process impacted upon by technological advances and information gained by clinical and basic research. Therefore, any arbitrary list of equipment, protocols, and/or techniques...
(13) The equipment used during the procedure must be in good working order and serviced and certified as necessary.

(State Board of Dentistry; 828 IAC 3-1-6.1; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2242; filed Sep 21, 1992, 9:00 a.m.: 16 IR 721; filed Oct 14, 1993, 5:00 p.m.: 17 IR 406; filed Jun 1, 1994, 5:00 p.m.: 17 IR 2332; filed Dec 24, 1997, 11:35 a.m.: 21 IR 1754; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 3-1-6.5 Standard of care; general anesthesia and deep sedation

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-13; IC 25-14-1-23

Sec. 6.5. (a) The standard of care is a dynamic process impacted upon by technological advances and information gained by clinical and basic research. Therefore, any arbitrary list of equipment, protocols, and/or techniques may become outdated soon after being written. However, the administration of general anesthesia or deep sedation carries with it significant risks that mandate basic minimum requirements for patient protection.

(b) As used in this section, “anesthetic team” means the following:

(1) At least one (1) dentist who holds a permit to administer general anesthesia or deep sedation. All dentists under this section shall be trained and currently competent in advanced cardiac life support.

(2) At least two (2) persons who are employed in the dental office under IC 25-14-1-23(c) or who are dental hygienists licensed under IC 25-13. All such persons who are members of the anesthetic team shall be trained and currently competent in basic life support.

(c) The following are the minimum standards of care when general anesthesia or deep sedation is utilized:

(1) An appropriate medical history form must be completed and dated for each patient.

(2) The medical history form must be reviewed by the dentist, and all significant responses must be evaluated and noted on the form.

(3) If medical consultation or additional laboratory testing is indicated, it must be obtained prior to initiation of treatment, except in an extreme emergency situation.

(4) Physical evaluation and pretreatment vital signs must be taken and recorded on the patient’s chart.

(5) A separate anesthetic record must be kept for each anesthetic.

(6) Documentation of the presence and identity of each anesthetic team member throughout the administration of general anesthesia and deep sedation must be maintained.

(7) The anesthetic team must be present during the administration of general anesthesia or deep sedation, and one (1) assistant’s sole responsibility is to monitor the patient’s vital signs and/or maintain an airway. This section does not relieve the dentist of responsibility for monitoring the patient.

(8) Continuous supervision and monitoring of the patient includes, but is not limited to, oxygenation and ventilation, which must be continuously monitored during the administration of the anesthetic by the following:

(A) Palpation or observation of the reservoir breathing bag.

(B) Monitoring of skin color, mucosa, nail beds, and surgical site for color.

(C) Auscultation of breath and/or heart sounds is recommended.

(D) Pulse oximeter.

(E) Palpation of peripheral pulse.

(F) Blood pressure taken periodically throughout the procedure.

(G) Electrocardiogram (EKG) continuously displayed until the patient leaves the operating area.

(9) The anesthetic team must be clinically aware of any changes in the patient’s body temperature. The equipment to take and record the patient’s body temperature should be readily available at all times.

(10) At the completion of the anesthetic when continuous monitoring is no longer required, the patient must be transferred to a recovery facility for continual and direct supervision by a person trained in basic cardiac life support.

(11) At or before the time of discharge, printed postoperative instructions must be provided to the patient and a responsible adult who will accompany the patient. Vital signs must be stable and the patient must be appropriately responsive before leaving the dentist’s office. The patient must be instructed not to operate any vehicle or other potentially hazardous device or engage in any potentially hazardous activity for an appropriate period of time.

(12) It is strongly recommended that the dentist and trained staff hold drills on emergency procedures four (4) times per year. A record that the drills have taken place should be maintained in the office of the dentist. The record should include the date that the drill took place and the names of those persons who participated in the drill. The records may be destroyed after three (3) years.

(13) The dentist shall maintain a record that the dentist has training in advanced cardiac life support and that the dentist’s staff has maintained, on an annual basis, current training and successful completion of a course in basic life support.

(14) The equipment used during the procedure must be in good working order and serviced and certified as necessary.

(State Board of Dentistry; 828 IAC 3-1-6.5; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2242; filed Sep 21, 1992, 9:00 a.m.: 16 IR 721; filed Oct 14, 1993, 5:00 p.m.: 17 IR 406; filed Jun 1, 1994, 5:00 p.m.: 17 IR 2332; filed Dec 24, 1997, 11:35 a.m.: 21 IR 1754; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)
828 IAC 3-1-7 Renewal and reinstatement

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-14-1

Sec. 7. (a) All dentists holding a general anesthesia, deep sedation, or light parenteral conscious sedation permit shall renew the permit biennially at the same time the dental license is renewed by paying the fee required by the board under 828 IAC 0.5-2-2. If the holder of a permit does not renew the permit on or before the renewal date, the permit expires and becomes invalid without any action by the board.

(b) A permit thus invalidated may be reinstated by the board up to three (3) years after such invalidation upon payment to the board by the holder of the invalidated permit of a penalty fee set by the board under 828 IAC 0.5-2-2, plus all past due and current renewal fees. If the lapse of time in revalidating the permit continues beyond three (3) years, the holder of the invalid permit must submit an original application for a permit. (State Board of Dentistry; 828 IAC 3-1-7; filed Dec 2, 1987, 9:34 a.m.: 11 IR 1291; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2243; filed Oct 14, 1993, 5:00 p.m.: 17 IR 407; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 3-1-7.5 Renewal of permit; continuing education

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-14-1; IC 25-14-3

Sec. 7.5. (a) In order to renew a permit to administer general anesthesia, deep sedation, or light parenteral conscious sedation, a dentist shall obtain five (5) hours of continuing education in every license period in the area of anesthesia. This continuing education may include, but is not limited to, a course in advanced cardiac resuscitation protocols. Courses in basic cardiac life support will not be accepted. The five (5) hours of continuing education required under this section counts toward the completion of continuing education requirements under IC 25-14-3.

(b) This section is effective for the renewal in March 2000 and every two (2) years thereafter. (State Board of Dentistry; 828 IAC 3-1-7.5; filed Dec 24, 1997, 11:35 a.m.: 21 IR 1756; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 3-1-8 Mandatory reporting (Repealed)

Sec. 8. (Repealed by State Board of Dentistry; filed Sep 21, 1992, 9:00 a.m.: 16 IR 721)

828 IAC 3-1-9 Display of permit; additional locations; violations

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9

Sec. 9. (a) All holders of a permit shall not fail to post and keep conspicuously displayed in plain sight of patients in each dental office where the practitioner practices, the permit.

(b) Prior to practicing in any office, the practitioner must submit to the board an affidavit stating that the office complies with the requirements of section 6 [828 IAC 3-1-6 was repealed filed Dec 24, 1997, 11:35 a.m.: 21 IR 1756.] of this rule and which lists the emergency equipment available and in good working order in the office.

(c) Any violation of this or any other rule shall subject the practitioner to disciplinary sanctions.

(d) Administering general anesthesia, deep sedation, or light parenteral conscious sedation without the appropriate permit or with an expired, voided, revoked, or suspended permit shall subject the practitioner to severe disciplinary penalties. (State Board of Dentistry; 828 IAC 3-1-9; filed Dec 2, 1987, 9:34 a.m.: 11 IR 1291; filed Jun 8, 1992, 5:00 p.m.: 15 IR 2244; filed Oct 14, 1993, 5:00 p.m.: 17 IR 408; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)

828 IAC 3-1-10 Required emergency equipment; general anesthesia and deep sedation

Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-14-1

Sec. 10. (a) All practitioners utilizing general anesthesia or deep sedation must have in their offices, as a minimum, the following emergency equipment available and in good working order:

1. A portable oxygen system capable of delivering positive pressure highflow oxygen, such as:
   - (A) an ambu bag;
   - (B) a Robert Shaw demand valve or equivalent;
   - (C) a full face mask; and
   - (D) oral and nasal airways.

2. An emergency source of power that can be utilized in the event of a power failure and is sufficient to operate the equipment and provide an emergency source of light.

3. A suction apparatus capable of aspirating gastric contents efficiently from the pharynx or mouth.

4. An electrocardiograph.

5. A laryngoscope and assorted blades.

6. Endotracheal tubes in assorted sizes.

7. Drugs necessary to follow advanced cardiac life support protocols.

8. Equipment for continuous intravenous fluid infusion to facilitate drug administration.


10. A body temperature measuring device.

11. A defibrillator.


(b) Violation of this section subjects the practitioner to disciplinary action under IC 25-1-9-9. (State Board of Dentistry; 828 IAC 3-1-10; filed Dec 24, 1997, 11:35 a.m.: 21 IR 1756; filed Aug 20, 1999, 1:50 p.m.: 23 IR 24; readopted filed Apr 11, 2001, 3:21 p.m.: 24 IR 2896)
828 IAC 3-1-11 Required emergency equipment; light parenteral conscious sedation
Authority: IC 25-14-1-3.1; IC 25-14-1-13
Affected: IC 25-1-9-9; IC 25-14-1

Sec. 11. (a) All practitioners utilizing light parenteral conscious sedation must have in their offices, as a minimum, the following emergency equipment available and in good working order:
(1) A portable oxygen system capable of delivering positive pressure high flow oxygen, such as:
   (A) an ambu bag;
   (B) a Robert Shaw demand valve or equivalent;
   (C) a full face mask; and
   (D) oral and nasal airways.
(2) An emergency source of power that can be utilized in the event of a power failure and is sufficient to operate the equipment and provide an emergency source of light.
(3) A suction apparatus capable of aspirating gastric contents efficiently from the pharynx or mouth.
(4) A laryngoscope and assorted blades.
(5) Endotracheal tubes in assorted sizes.
(6) Drugs necessary to follow life support protocols.
(7) Equipment for continuous intravenous fluid infusion to facilitate drug administration.
(8) A stethoscope.
(9) A body temperature measuring device.
(10) A pulse oximeter.
(11) A sphygmomanometer.

(b) Violation of this section subjects the practitioner to disciplinary action under IC 25-1-9-9.

ARTICLE 4. MOBILE DENTAL FACILITIES AND PORTABLE DENTAL OPERATIONS

Rule 1. Applicability; Exceptions

828 IAC 4-1-1 Applicability
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 1. This article applies to the operator of a mobile dental facility or portable dental operation who:
(1) provides dental services; and
(2) does not have a physically stationary office in the county where the services are provided.

(State Board of Dentistry; 828 IAC 3-1-11; filed Dec 24, 1997, 11:35 a.m.; 21 IR 1756; filed Aug 20, 1999, 1:50 p.m.; 23 IR 24; readopted filed Apr 11, 2001, 3:21 p.m.; 24 IR 2896)

828 IAC 4-1-2 Exceptions
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 2. (a) Federal, state, and local governmental agencies are exempt from the requirements of this rule.
(b) Dentists licensed to practice in Indiana who have not registered with the board to operate a mobile dental facility or a portable dental operation may provide dental services through use of dental instruments, materials, and equipment taken out of a dental office without registering if the service is provided as emergency treatment for their patients of record.
(c) Dentists who:
   (1) do not operate a mobile dental facility or portable dental operation; or
   (2) are not employed by or independently contracting with a mobile dental facility or portable dental operation;
may provide treatment for their patients of record in the county in which the dentist maintains a physically stationary office or in a county adjacent to the county in which the dentist maintains a physically stationary office if such services are provided outside the physically stationary office or outside the county of the physically stationary office fewer than thirty (30) days per year.
(d) Dental hygienists who are providing dental hygiene services, instruction, and in-service training in accordance with IC 25-13-1-10 and IC 25-13-1-11 of the dental hygienist practice act are exempt from the requirements of this rule. Furthermore, dental hygienists may provide dental hygiene services, instruction, and in-service training in accordance with IC 25-13-1-10 and IC 25-13-1-11 in a mobile dental facility or portable dental operation.

(State Board of Dentistry; 828 IAC 4-1-2; filed May 2, 2002, 10:24 a.m.; 25 IR 2736)

Rule 2. Definitions

828 IAC 4-2-1 Applicability
Authority: IC 25-14-1-13
Affected: IC 25-14

* Sec. 1. The definitions in this rule apply throughout this article. (State Board of Dentistry; 828 IAC 4-2-1; filed May 2, 2002, 10:24 a.m.; 25 IR 2736)

828 IAC 4-2-2 “Mobile dental facility or portable dental operation” defined
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 2.“Mobile dental facility or portable dental operation” means either of the following:
(1) Any self-contained facility in which dentistry will be practiced, which may be moved, towed, or transported from one (1) location to another.
(2) Any nonfacility in which dental equipment, utilized in the practice of dentistry, is transported to and utilized on a temporary basis at an out-of-office location, including, but not limited to:
(A) other dentists’ offices;
(B) patients’ homes;
(C) schools;
(D) nursing homes; or
Rule 3. Registration

828 IAC 4-3-1 Application
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 1. (a) In order to operate a mobile dental facility or portable dental operation, the operator shall register with the board.

(b) The applicant shall complete an application in the form and manner required by the board.

(c) The applicant shall pay the registration fee at the time of application as set by the board by rule.

(d) The applicant shall provide the board with evidence of compliance with the requirements of this rule.

(e) The applicant shall submit proof of radiographic equipment inspection with the application for registration. (State Board of Dentistry; 828 IAC 4-3-1; filed May 2, 2002, 10:24 a.m.: 25 IR 2737)

828 IAC 4-3-2 Official business or mailing address
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 2. (a) The operator of a mobile dental facility or portable dental operation shall maintain an official business or mailing address of record, which shall not be a post office box and which shall be filed with the board.

(b) The operator of a mobile dental facility or portable dental operation shall maintain an official telephone number of record, which shall be filed with the board.

(c) The board shall be notified within thirty (30) days of any change in the address or telephone number of record.

(d) All written or printed documents available from or issued by the mobile dental facility or portable dental operation shall contain the official address and telephone number of record for the mobile dental facility or portable dental operation.

(e) When not in transit, all dental and official records shall be maintained at the official office address of record. (State Board of Dentistry; 828 IAC 4-3-2; filed May 2, 2002, 10:24 a.m.: 25 IR 2737)

828 IAC 4-3-3 Written procedures; communication facilities; conformity with requirements; driver requirements
Authority: IC 25-14-1-13
Affected: IC 12-15; IC 12-17.6; IC 25-14

Sec. 3. The operator of a mobile facility, mobile unit, or portable dental operation shall ensure the following:

(1) There is a written procedure for emergency follow-up care for patients treated in the mobile dental facility and that such procedure includes arrangements for treatment in a dental facility that is permanently established in the area where services were provided.

(2) The mobile dental facility has communication facilities that will enable the operator thereof to contact necessary parties in the event of a medical or dental emergency. The communications facilities must enable the patient or the parent or guardian of the patient treated to contact the operator for emergency care, follow-up care, or information about treatment received. The provider who renders follow-up care must also be able to contact the operator and receive treatment information, including radiographs.

(3) The mobile dental facility conforms to all applicable federal, state, and local laws, regulations, and ordinances dealing with radiographic equipment, flammability, construction, sanitation, zoning, infectious waste management, universal precautions, OSHA guidelines, and federal Centers for Disease Control Guidelines, and the applicant possesses all applicable county and city licenses or permits to operate the unit.

(4) The driver of the unit possesses a valid Indiana driver's license appropriate for the operation of the vehicle.

(5) No services are performed on minors without a signed consent form from the parent or guardian, which indicates that:

(A) if the minor already has a dentist, the parent or guardian should continue to arrange dental care through that provider; and

(B) if the mobile dental facility accepts a patient and provides preventive treatment, including prophylaxis, radiographs, and fluoride, but does not follow-up with treatment when such treatment is clearly indicated, is considered to be abandoning the patient. Arrangements must be made for treatment services.

(6) A mobile dental facility that accepts a patient and provides preventive treatment, including prophylaxis, radiographs, and fluoride, but does not follow-up with treatment when such treatment is clearly indicated, is considered to be abandoning the patient. Arrangements must be made for treatment services.

(7) The mobile dental facility also be able to contact the operator and receive treatment information, including radiographs.

828 IAC 4-3-4 Physical requirements for mobile dental facility
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 4. The operator shall ensure that the mobile dental facility or portable dental operation has the following:

(1) Ready access to a ramp or lift if services are provided to disabled persons.

(2) A properly functioning sterilization system.

(3) Ready access to an adequate supply of potable water, including hot water.
(4) Ready access to toilet facilities.
(5) A covered galvanized, stainless steel, or other noncorrosive container for deposit of refuse and waste materials.

828 IAC 4-3-5 Identification of personnel; notification of changes in written procedures; display of licenses
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 5. (a) The operator shall identify and advise the board in writing within thirty (30) days of any personnel change relative to all licensed dentists and licensed dental hygienists associated with the mobile dental facility or portable dental operation by providing the full name, address, telephone numbers, and license numbers where applicable.

(b) The operator shall advise the board in writing within thirty (30) days of any change in the written procedure for emergency follow-up care for patients treated in the mobile dental facility, including arrangements for treatment in a dental facility, which is permanently established in the area. The permanent dental facility shall be identified in the written procedure.

c) Each dentist and dental hygienist providing dental services in the mobile dental facility or portable dental operation shall prominently display his or her Indiana dental or Indiana dental hygienist license in plain view of patients.

828 IAC 4-3-6 Identification of location of services
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 6. (a) Each operator of a mobile dental facility or portable dental operation shall maintain a written or electronic record detailing for each location where services are provided:

1. the street address of the service location;
2. the dates of each session;
3. the number of patients served; and
4. the types of dental services provided and quantity of each service provided.

(b) The written or electronic record shall be made available to the board within ten (10) days of a request by the board. Costs for such records shall be borne by the mobile dental facility.

828 IAC 4-3-7 Licensed dentist in charge
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 7. A mobile dental facility or portable dental operation shall at all times be in the charge of a dentist licensed to practice dentistry in Indiana. A dentist licensed to practice dentistry in Indiana shall be present at all times that clinical services are rendered.

828 IAC 4-3-8 Prohibited operations
Authority: IC 25-14-1-13
Affected: IC 25-13; IC 25-14

Sec. 8. The operator of a mobile dental facility or portable dental operation is prohibited from hiring, employing, allowing to be employed, or permitting to work in or about a mobile dental facility or portable dental operation, any person who performs or practices any occupation regulated under IC 25-13 or IC 25-14 who is not duly licensed by the board.

828 IAC 4-3-9 Information for patients
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 9. (a) During or at the conclusion of each patient’s visit to the mobile dental facility or portable dental operation, the patient shall be provided with an information sheet. If the patient has provided consent to an institutional facility to access the patient’s dental health records, the institution shall also be provided with a copy of the information sheet. An institutional facility includes, but is not limited to, a long term care facility or school.

(b) An information sheet shall include the following:

1. Pertinent contact information as required by this article.
2. The name of the dentist and other dental staff who provided services.
3. A description of the treatment rendered, including billed service codes and fees associated with treatment, and tooth numbers when appropriate.
4. If necessary, referral information to another dentist as required by this article.

828 IAC 4-3-10 Cessation of operations
Authority: IC 25-14-1-13
Affected: IC 16-39; IC 25-14

Sec. 10. (a) Upon cessation of operation by the mobile dental facility or portable dental operation, the operator shall notify the board within thirty (30) days of the last day of operations in writing of the final disposition of patient records and charts.

(b) If the mobile dental facility or portable dental operation is sold, a new registration application must be filed with the board.

(c) Upon choosing to discontinue practice or services in a community, the operator of a mobile dental facility or portable dental operation shall:

1. notify all of the operator’s active patients in writing, or by publication once a week for three consecutive weeks in a newspaper of general circulation in the community, that the operator intends to discontinue the mobile dental facility’s...
or portable dental operation’s practice in the community; and
(2) encourage the patients to seek the services of another dentist.

(d) The operator shall make reasonable arrangements with the active patients of the mobile dental facility or portable dental operation for the transfer of the patient’s records, including radiographs or copies thereof, to the succeeding practitioner or, at the written request of the patient, to the patient, in compliance with IC 16-39.

(e) As used in this section, "active patient" applies and refers to a person whom the mobile dental facility or portable dental operation has examined, treated, cared for, or otherwise consulted with during the two (2) year period prior to discontinuation of practice, or moving from or leaving the community.

(f) Nothing in this section supersedes the requirements of IC 16-39. (State Board of Dentistry; 828 IAC 4-3-10; filed May 2, 2002, 10:24 a.m.: 25 IR 2739)

828 IAC 4-3-11 Renewal of registration
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 11. (a) The registration shall be renewed on March 1 of even-numbered years in the form and manner provided by the board.

(b) The registrant shall pay the registration renewal fee in an amount set by the board by rule. (State Board of Dentistry; 828 IAC 4-3-11; filed May 2, 2002, 10:24 a.m.: 25 IR 2739)

828 IAC 4-3-12 Failure to comply
Authority: IC 25-14-1-13
Affected: IC 25-14

Sec. 12. Failure to comply with state statutes or rules regulating the practice of dentistry, dental hygiene, and the operation of mobile dental facilities or portable dental operations shall subject the registrant and all practitioners providing services through a mobile dental facility or portable dental operation to disciplinary action. (State Board of Dentistry; 828 IAC 4-3-12; filed May 2, 2002, 10:24 a.m.: 25 IR 2739)

ARTICLE 5. INSTRUCTOR’S LICENSES

Rule 1. General Requirements

828 IAC 5-1-1 Application
Authority: IC 25-1-8-2; IC 25-13-1-5; IC 25-14-1-13; IC 25-14-1-27.5
Affected: IC 25-14-1-10

Sec. 1. (a) Applicants for licensure as an instructor under IC 25-14-1-27.5 shall apply in the manner required by the board and shall submit the fee required by 828 IAC 0.5-2-3.

(b) The applicant for an instructor’s license shall provide the following:

(1) Where the name on any document differs from the applicant’s name, a notarized or certified copy of a marriage certificate or legal proof of name change.

(2) Proof that the applicant has been approved under the credentialing process of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry as required under IC 25-14-1-27.5. The proof shall include a notarized statement of approval submitted by an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry and copies of all documentation reviewed by the school or affiliated medical center in determining its approval of the applicant.

(3) Documentation or a demonstration of clinical and academic competency, which shall include the following:

(A) If the applicant is a graduate of a school of dentistry outside the United States, its possessions, or Canada, the applicant must submit an original transcript of the applicant’s dental education, including the degree conferred and the date the degree was conferred. If the original transcript is in a language other than English, the applicant must include a certified translation of the transcript. If an original transcript is not available, the applicant must submit the following:

(i) A notarized or certified copy of the original dental school transcript, which must include the degree conferred and the date the degree was conferred.

(ii) An affidavit fully and clearly stating the reasons that an original transcript is not available.

(B) If the applicant has taken the National Board Dental Examination provided by the Joint Commission on Dental Examinations or has taken the National Dental Examining Board of Canada Written Examination provided by the National Dental Examining Board of Canada, the applicant shall submit proof of having taken the examination and the results thereof.

(C) If the applicant has taken a clinical licensing examination in any other state, country, territory, or recognized jurisdiction, the applicant shall submit proof of having taken the examination and the results thereof.

(4) If the applicant has been convicted of a criminal offense, excluding minor traffic violations, a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been
convicted. This notarized statement must include the following:

(A) The offense of which the applicant was convicted.
(B) The court in which the applicant was convicted.
(C) The cause number under which the applicant was convicted.
(D) The penalty imposed by the court.

(5) An applicant who is now, or has been, licensed to practice any health profession in another state within the United States, or in any other country, territory, or recognized jurisdiction must submit verification of license status. This information must be sent by the state, country, territory, or other recognized jurisdiction that issued the license directly to the Indiana board.

(6) A self-query form completed by the National Practitioner Data Bank (NPDB) and the Healthcare Integrity and Protection Data Bank (HIPDB) data bank.

(7) Proof of completion of at least twenty (20) hours of continuing dental education in dentistry taken in the previous two (2) years. No more than two (2) hours of training in basic life support shall count toward this requirement. Practice management courses will not be accepted.

(8) Graduates of a school of dentistry outside of the United States in which the instruction was conducted in a language other than English shall submit proof of having passed the Test of English as a Foreign Language (TOEFL).

(9) Proof that the applicant has been licensed or has had the equivalent of a license to practice dentistry in the United States or in any country, territory, or other recognized jurisdiction for not less than five (5) years out of the nine (9) years immediately preceding the submission of the application.

(10) Proof that the applicant is currently certified in basic life support or advanced cardiac life support.

(c) The applicant shall certify that the applicant will teach and practice dentistry only at or on behalf of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry. The applicant shall further certify that the applicant will not engage in the private practice of dentistry.

(d) All information on the application shall be submitted under oath or affirmation, subject to the penalties for perjury. (State Board of Dentistry; 828 IAC 5-1-1; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2713)

828 IAC 5-1-2 Jurisprudence examination

Authority: IC 25-13-1-5; IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-14-1-27.5

Sec. 2. An applicant for an instructor’s license must obtain a passing score of at least seventy-five (75) on the Indiana dental and dental hygiene law examination before the applicant may be licensed. Applicants failing the law examination may retake the law examination at a time, date, and place to be set by the board not sooner than thirty (30) days from the time the law examination was last taken. (State Board of Dentistry; 828 IAC 5-1-2; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2714)

828 IAC 5-1-3 Duties of employer dental school or affiliated medical center

Authority: IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-14-1-27.5

Sec. 3. (a) The Indiana school of dentistry or affiliated medical center that intends to employ an instructor under IC 25-14-1-27.5 shall submit the following directly to the board:

(1) A notarized statement verifying that the applicant for an instructor’s license has been approved under the credentialing process of the Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry as required under IC 25-14-1-27.5. The proof shall include copies of all documentation reviewed by the school or affiliated medical center in determining its approval of the applicant.

(2) A statement verifying the number of individuals who are currently employed by the Indiana school of dentistry as full-time faculty.

(b) The Indiana school of dentistry or affiliated medical center that employs the holder of an instructor’s license shall do the following:

(1) Hold and display in plain view of the patients the instructor’s license of the individual who is employed by the Indiana school of dentistry or affiliated medical center.

(2) Ensure that the holder of the instructor’s license teaches and practices dentistry only at or on behalf of the Indiana school of dentistry or affiliated medical center by which the individual is employed.

(3) Notify the board in writing upon the termination of the employment contract of the holder of the instructor’s license and surrender the license not later than thirty (30) days after the employment of the holder of the instructor’s license is terminated. (State Board of Dentistry; 828 IAC 5-1-3; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2714)

828 IAC 5-1-4 Renewal

Authority: IC 25-1-8-2; IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-1-8-6; IC 25-14-1-10; IC 25-14-3

Sec. 4. (a) All dentists holding an instructor’s license shall renew the license annually on the date set by the health professions bureau by paying the fee required by the board under 828 IAC 0.5-2-3. If the holder of an instructor’s license does not renew the license on or before the renewal date, the license expires and becomes invalid without any action by the board.

(b) As a condition of renewal, the holder of an instructor’s license must complete ten (10) hours of
continuing education during each annual license period subject to the following requirements:

(1) The continuing education must meet the requirements of IC 25-14-3 and 828 IAC 1-5.

(2) The holder of an instructor's license may not earn more than two and one-half (2.5) credit hours toward the continuing education requirements of this section in the area of practice management.

(c) As a condition of renewal, the holder of an instructor's license must continue to be employed by an Indiana school of dentistry or an affiliated medical center.

(d) If the dental instructor's license expires for failure to renew the license on or before the renewal date, the holder of the dental instructor's license must meet the requirements of IC 25-1-8-6 in order to renew the license.

(1) Hold the general anesthesia, deep sedation, or light parenteral conscious sedation permit; application

Authority: IC 25-1-8-2; IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-14-1-10

Sec. 5. (a) Prior to administering general anesthesia, deep sedation, or light parenteral conscious sedation, a dentist who holds an instructor's license shall obtain from the board a permit that authorizes the dentist to utilize the form of anesthesia or sedation desired.

(b) The board shall issue a permit to utilize the anesthesia or sedation technique requested if the following requirements are met:

(1) Submission of an application in the form and manner provided by the board.

(2) Current licensure as an instructor by the board.

(3) Payment of the required fees.

(4) Submission of proof that the applicant has been approved under the credentialing process of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry as required under IC 25-14-1-27.5 as qualified to administer general anesthesia, deep sedation, or light parenteral conscious sedation and meets requirements substantially equal to the requirements of 828 IAC 3. The proof shall include a notarized statement of approval submitted by an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry and copies of all documentation reviewed by the school or affiliated medical center in determining its approval of the applicant.

(5) Submission of proof that the dentist is:

A. trained in and has successfully completed a course in advanced cardiac life support; or

B. certified as an instructor in advanced cardiac life support.

(c) The applicant shall certify that the applicant will teach and practice dentistry, including the administration of general anesthesia, deep sedation, or light parenteral conscious sedation, only at or on behalf of an Indiana school of dentistry or an affiliated medical center of an Indiana school of dentistry. The applicant shall further certify that the applicant will not engage in the private practice of dentistry.

(d) All information on the application shall be submitted under oath or affirmation, subject to the penalties for perjury.

(e) The holder of an instructor's license who is granted a general anesthesia, deep sedation permit may administer light parenteral conscious sedation without holding a separate light parenteral conscious sedation permit. (State Board of Dentistry: 828 IAC 5-1-5; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2715)

828 IAC 5-1-6 General anesthesia, deep sedation, or light parenteral conscious sedation permit; renewal

Authority: IC 25-1-8-6; IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-1-8-6; IC 25-14-1-10

Sec. 6. (a) All dentists with instructor's licenses holding a general anesthesia, deep sedation, or light parenteral conscious sedation permit shall renew the permit annually at the same time the dental instructor's license is renewed by paying the fee required by the board under 828 IAC 0.5-2-3. If the holder of a permit does not renew the permit or before the renewal date, the permit expires and becomes invalid without any action by the board.

(b) In order to renew a permit to administer general anesthesia, deep sedation, or light parenteral conscious sedation, a dentist with an instructor's license shall obtain two and one-half (2.5) hours of continuing education in every license period in the area of anesthesia. This continuing education may include, but is not limited to, a course in advanced cardiac resuscitation protocols. Courses in basic cardiac life support will not be accepted. The two and one-half (2.5) hours of continuing education required under this section count toward the completion of continuing education requirements under section 4 of this rule.

(c) A permit invalidated under subsection (a) may be reinstated by the board as provided under IC 25-1-8-6. (State Board of Dentistry; 828 IAC 5-1-6; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2716)

828 IAC 5-1-7 General anesthesia, deep sedation, or light parenteral conscious sedation permit duties of employer dental school or affiliated medical center

Authority: IC 25-14-1-13; IC 25-14-1-27.5

Affected: IC 25-14-1-27.5

Sec. 7. The Indiana school of dentistry or affiliated medical center that employs the holder of an instructor's license and a permit to administer general anesthesia, deep sedation, or light parenteral conscious sedation shall do the following:

(1) Hold the general anesthesia, deep sedation, or light parenteral conscious sedation permit of the holder of an instructor's license who is employed by the Indiana school of dentistry or affiliated medical center.
(2) Ensure that the holder of the instructor’s license teaches and practices dentistry only at or on behalf of the Indiana school of dentistry or affiliated medical center by which the individual is employed.

(3) Ensure that the facility in which the holder of the permit administers general anesthesia, deep sedation, or light parenteral conscious sedation maintains the equipment required by 828 IAC 3-1-10.

(State Board of Dentistry; 828 IAC 5-1-7; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2716)

828 IAC 5-1-8 Invalidation upon termination of employment

Authority: IC 25-14-1-13; IC 25-14-1-27.5
Affected: IC 25-14-1-27.5

Sec. 8. If the Indiana school of dentistry or affiliated medical center that employs the holder of an instructor’s license notifies the board of the termination of the employment contract of the holder of the instructor’s license, the instructor’s license and any general anesthesia, deep sedation, or light parenteral conscious sedation permit issued to the holder of the instructor’s license becomes invalid without any action of the board. (State Board of Dentistry; 828 IAC 5-1-8; filed Apr 18, 2005, 2:00 p.m.: 28 IR 2716)

TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

ARTICLE 1. COMMUNICABLE DISEASE CONTROL

* Rule 3. Infectious Waste

410 IAC 1-3-1 “Bedding” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 1. “Bedding” means bedding that has been used for laboratory animals. (Indiana State Department of Health; 410 IAC 1-3-1; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.: 22 IR 436; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-2 “Carcasses, body parts, blood and body fluids, and bedding of laboratory animals” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 2. “Carcasses, body parts, blood and body fluids, and bedding of laboratory animals” means carcasses, body parts, blood and body fluids in liquid or semiliquid form, and bedding of animals that have been intentionally or are suspected of having been exposed to pathogens in:

(1) research;
(2) production of biologicals;
(3) the in vivo testing of pharmaceuticals; or
(4) other procedures.

(Indiana State Department of Health; 410 IAC 1-3-2; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.: 22 IR 436; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-3 “Container” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 3. “Container” means any portable device or material in which infectious waste is:

(1) stored;
(2) transported;
(3) treated;
(4) disposed of; or
(5) otherwise handled.

(Indiana State Department of Health; 410 IAC 1-3-3; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.: 22 IR 436; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-4 “Contaminated sharp” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 4. “Contaminated sharp” means an object that is capable of cutting or penetrating the skin and has been in contact with blood or body fluids. The term includes any of the following:

(1) Hypodermic or suture needle.
(2) Syringe.
(3) Scalpel blade.
(4) Pipette.
(5) Lancet.
(6) Broken glass.

(Indiana State Department of Health; 410 IAC 1-3-4; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.: 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-5 “Communicable disease” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-2-1

Sec. 5. “Communicable disease” means a communicable disease as defined by rule under IC 16-41-2-1. (Indiana State Department of Health; 410 IAC 1-3-5; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.: 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-5.5 “Department” defined

Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 5.5. “Department” means the Indiana state department of health. (Indiana State Department of Health; 410 IAC 1-3-5.5; filed Sep 18, 1998, 11:38 a.m.: 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-6 “Emergency medical services provider” defined
Sec. 6. “Emergency medical services provider” means a person certified under IC 16-31-3. (Indiana State Department of Health; 410 IAC 1-3-7; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.; 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-7 “Facility” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-21-2; IC 16-28-1; IC 16-41-12; IC 16-41-16

Sec. 7. “Facility” means any of the following places where infectious waste activity occurs:
1. Hospital.
2. Ambulatory surgical center as defined in IC 16-21-2.
3. Medical/diagnostic laboratory.
4. Blood center as defined in IC 16-41-12.
5. Pharmaceutical company.
6. Academic research laboratory company.
7. Industrial research laboratory.
8. Health facility as defined in IC 16-28-1.
9. Office and mobile units of a health care provider.
10. Diet or health care clinic.
12. Veterinary hospital.
13. Emergency medical services provider.
14. Mortuary. (Indiana State Department of Health; 410 IAC 1-3-7; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1382; filed Sep 18, 1998, 11:38 a.m.; 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-8 “Health care provider” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-18-2-163; IC 16-41-16

Sec. 8. “Health care provider” means a person employed as, or by, or receiving training from, a provider as defined in IC 16-18-2-163, or by a laboratory, blood center, state institution, or any other facility where the person is likely to have direct contact with blood or body fluids. (Indiana State Department of Health; 410 IAC 1-3-8; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1383; filed Sep 18, 1998, 11:38 a.m.; 22 IR 437; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-9 “Infectious waste activity” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 9. “Infectious waste activity” means the:
1. generation;
2. collection;
3. storage;
4. transportation;
5. treatment; or
6. disposal of infectious waste; as defined in this rule. (Indiana State Department of Health; 410 IAC 1-3-9; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1383; filed Sep 18, 1998, 11:38 a.m.; 22 IR 438; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-10 “Infectious waste” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 10. (a) “Infectious waste”, except as provided in subsection (b), means waste that epidemiologic evidence indicates is capable of transmitting a dangerous communicable disease. The term includes, but is not limited to, the following:
1. Contaminated sharps or contaminated objects that could potentially become contaminated sharps.
2. Infectious biological cultures, infectious associated biologicals, and infectious agent stock.
3. Pathological waste.
5. Carcasses, body parts, blood and body fluids in liquid and semiliquid form, and bedding of laboratory animals.
6. Other waste that has been intermingled with infectious waste.
(b) The term, as it applies to a home health agency or to services delivered in the home of a hospice patient, includes only contaminated sharps. (Indiana State Department of Health; 410 IAC 1-3-10; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1383; filed Sep 18, 1998, 11:38 a.m.; 22 IR 438; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-11 “Mortuary” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16; IC 25-15-2-15

Sec. 11. “Mortuary” means a funeral home as defined in IC 25-15-2-15. (Indiana State Department of Health; 410 IAC 1-3-11; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1383; filed Sep 18, 1998, 11:38 a.m.; 22 IR 438; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-12 “Pathological waste” defined
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 12. “Pathological waste” means:
1. tissues;
2. organs;
3. body parts; and
4. blood or body fluids in liquid or semiliquid form of humans; that are removed during surgery, biopsy, or autopsy. (Indiana State Department of Health; 410 IAC 1-3-12; filed Jan 17, 1989, 3:30 p.m.; 12 IR 1383; filed Sep 18, 1998, 11:38 a.m.; 22 IR 438; readopted filed Jul 11, 2001, 2:23 p.m.; 24 IR 4234)

410 IAC 1-3-13 “Person” defined
Sec. 13. “Person” means any:
(1) individual;
(2) facility;
(3) partnership;
(4) copartnership;
(5) firm;
(6) company;
(7) association;
(8) joint-stock company;
(9) corporation;
(10) governmental entity; or
(11) agent.

Sec. 14. “Secured area” means an area that is designed and maintained to prevent the entry of unauthorized persons.

Sec. 15. “Semiliquid blood and blood products” means blood and blood products that have intermediate fluid properties and are capable of flowing in a manner similar to a liquid.

Sec. 16. “State board” defined (Repealed)

Sec. 17. “Storage” means the containment of infectious waste in such a manner as not to constitute:
(1) collection;
(2) treatment;
(3) transport; or
(4) disposal.

Sec. 18. “Veterinarian” means a person authorized to practice veterinary medicine under IC 15-5-1.1.

Sec. 19. “Waste” means any solid, liquid, or semiliquid material that:
(1) is discarded or being accumulated prior to being discarded; or
(2) has served its natural, biological, medical, or intended purpose and is generally discarded and not reused.


Sec. 21. (a) This rule applies, without regard to quantity, to defined facilities and persons involved in infectious waste activity.
(b) This rule represents minimum standards, and persons may utilize more stringent standards.
(c) All written policies required under this rule shall, at a minimum, comply with the requirements of IC 16-41-11.

Sec. 22. For purposes of IC 16-41-16 and this rule, the generator of infectious waste is responsible for the
appropriate containment, appropriate labeling, effective treatment, transport, and disposal of infectious waste as required by this rule. A person may provide services to the generator of infectious waste, including the appropriate containment, appropriate labeling, effective treatment, transport, or disposal of infectious waste. Both the generator of infectious waste and the person providing services to the generator of infectious waste are responsible for complying with the requirements set forth in this rule. (Indiana State Department of Health; 410 IAC 1-3-22; filed Jan 17, 1989; 3:30 p.m.: 12 IR 1384; filed Sep 18, 1998, 11:38 a.m.: 22 IR 439; readopted filed Jul 11, 2001; 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-23 Written policies, procedures
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16-9

Sec. 23. All persons and facilities subject to this rule shall:

(1) have a written policy and procedures that, at a minimum, contain:
(A) the requirements contained in this rule; and
(B) the sanctions, including discipline and dismissal of persons, if warranted, for failure to follow the requirements set forth in this rule;

(2) provide necessary instruction and materials, including protective garments, to implement this rule prior to giving a person an assignment where contact with infectious waste is likely;

(3) maintain a record of such instruction, including an attendance record of a person’s participation in the instruction; and

(4) make all records available to the department for inspection under IC 16-41-16-9.

(Indiana State Department of Health; 410 IAC 1-3-23; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1384; filed Sep 18, 1998, 11:38 a.m.: 22 IR 439; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-24 Containment
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 24. (a) All persons and facilities subject to this rule shall ensure that infectious waste is at all times contained in a manner that will reasonably protect waste handlers and the public from contracting dangerous communicable disease that may result from exposure to the infectious waste.

(b) All persons and facilities subject to this rule shall place contaminated sharps or contaminated objects that could potentially become contaminated sharps, infectious biological cultures, infectious associated biologicals, and infectious agent stock in containers that are:

(1) leak proof, rigid, puncture-resistant;

(2) tightly sealed to prevent expulsion;

(3) labeled with the biohazard symbol; and

(4) effectively treated in accordance with this rule prior to being stored in an unsecured area and sent for final disposal.

(c) All persons and facilities subject to this rule shall place pathological waste; laboratory animal carcasses, laboratory animal body parts, laboratory animal blood and body fluids, and laboratory animal bedding; human blood; human blood products in liquid or semiliquid form; and human body fluids that are visibly contaminated with blood in containers that are:

(1) impervious to moisture;

(2) sufficient strength and thickness to prevent expulsion;

(3) secure to prevent leakage or expulsion;

(4) labeled with the biohazard symbol; and

(5) effectively treated in accordance with this rule prior to being placed in an unsecured area and sent for final disposal.

(Indiana State Department of Health; 410 IAC 1-3-24; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1385; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-25 Storage
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 25. If infectious waste is stored prior to final disposal, all persons subject to this rule shall:

(1) store infectious waste in a secure area that:

(A) is locked or otherwise secured to eliminate access by or exposure to the general public;

(B) affords protection from adverse environmental conditions and vermin; and

(C) has a prominently displayed biohazard symbol;

(2) store infectious waste in a manner that preserves the integrity of the container, and is not conducive to rapid microbial growth and putrefaction; and

(3) disinfect reusable containers for infectious waste each time that they are emptied, unless the surfaces of the reusable containers have been protected from contamination by disposable liners, bags, or other devices that are removed with the infectious waste.

(Indiana State Department of Health; 410 IAC 1-3-25; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1386; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-26 Treatment
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 26. (a) All persons and facilities subject to this rule shall either effectively treat infectious waste in accordance with this rule or transport infectious waste off-site for effective treatment in accordance with this rule.

(b) A treatment is effective if it reduces the pathogenic qualities of infectious waste for safe handling, is designed for the specific infectious waste involved, and is carried out in a manner consistent with this rule. Effective treatment may include:

(1) incineration;
(2) steam sterilization;
(3) chemical disinfection;
(4) thermal inactivation;
(5) irradiation; or
(6) discharge in a sanitary sewer or septic system that is properly installed and operating in accordance with state and local laws.

c) Except as provided in section 28 of this rule, all persons and facilities subject to this rule may store, transport, and dispose of infectious waste that has been effectively treated in accordance with this rule in the usual manner for waste that is noninfectious.

410 IAC 1-3-27 Protection in transport
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 27. All persons and facilities subject to this rule shall:
(1) transport infectious waste in a manner that reasonably protects waste handlers and the public from contracting dangerous communicable disease; and
(2) effectively treat infectious waste in accordance with this rule before it is compacted.

410 IAC 1-3-28 Transporting off-site
Authority: IC 16-19-3-4; IC 16-41-16-8
Affected: IC 16-41-16

Sec. 28. (a) All persons and facilities subject to this rule who are transporting infectious waste off-site, whether effectively treated or not, shall:
(1) mark containers of infectious waste with a label that states the name, address, and telephone number of the generating facility and treatment facility, if applicable; and
(2) provide a form that contains:
   (A) the name, address, and telephone number of the generating facility and treatment facility, if applicable;
   (B) a brief description of the waste and the method of effective treatment; and
   (C) the signature of a responsible person.

(b) The information required in subsection (a) may be enclosed between the secondary packaging and the outer packaging, when such packaging is used. The outer packaging must contain a biohazard symbol. (Indiana State Department of Health; 410 IAC 1-3-28; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1386; filed Sep 18, 1998, 11:38 a.m.: 22 IR 440; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-3-29 Penalties for violation
Authority: IC 16-19-3-4; IC 16-41-16-8

Sec. 29. Penalties for violation of this rule are set forth in IC 16-41-16-10. (Indiana State Department of Health; 410 IAC 1-3-29; filed Jan 17, 1989, 3:30 p.m.: 12 IR 1386; filed Sep 18, 1998, 11:38 a.m.: 22 IR 440; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

Rule 4. Universal Precautions

410 IAC 1-4-0.5 Applicability of definitions
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 0.5. The definitions in this rule apply throughout this rule. Additionally, the definitions of any other terms contained in the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030) are incorporated by reference. (Indiana State Department of Health; 410 IAC 1-4-0.5; filed Nov 22, 1993, 5:00 p.m.: 17 IR 753; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-1 "Blood" defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 1. "Blood" means human blood, human blood components, and products made from human blood. (Indiana State Department of Health; 410 IAC 1-4-1; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 753; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-1.1 "Bloodborne pathogens" defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 1.1. "Bloodborne pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, HBV, HCV, and HIV. (Indiana State Department of Health; 410 IAC 1-4-1.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 753; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2536)

410 IAC 1-4-1.2 "Contaminated" defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 1.2. "Contaminated" means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface. (Indiana State Department of Health; 410 IAC 1-4-1.2; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-1.3 "Contaminated laundry" defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 1.3. "Contaminated laundry" means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface. (Indiana State Department of Health; 410 IAC 1-4-1.3; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)
Sec. 1.3. “Contaminated laundry” means laundry which has been soiled with blood or other potentially infectious materials or laundry which may contain sharps. (Indiana State Department of Health; 410 IAC 1-4-1.3; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-1.4 “Covered individual” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11-4

Sec. 1.4. “Covered individual” means any individual covered by IC 16-41-11-4 whose professional, employment, training, or volunteer activities or duties include any reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials. (Indiana State Department of Health; 410 IAC 1-4-1.4; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-1.5 “Decontamination” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 1.5. “Decontamination” means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item which does not require sterilization to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal. (Indiana State Department of Health; 410 IAC 1-4-1.5; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-2 “Department” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 2. “Department” means the Indiana state department of health. (Indiana State Department of Health; 410 IAC 1-4-2; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-2.1 “Employee” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11; IC 22-8-1.1-1

Sec. 2.1. “Employee” has the meaning set forth in IC 22-8-1.1-1. (Indiana State Department of Health; 410 IAC 1-4-2.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-3 “Employer” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11; IC 22-8-1.1-1

Sec. 3. “Employer” has the meaning set forth in IC 22-8-1.1-1. (Indiana State Department of Health; 410 IAC 1-4-3; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-3.1 “ERP” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 3.1. “ERP” means expert review panel, as defined in section 8.1 of this rule. (Indiana State Department of Health; 410 IAC 1-4-3.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4 “Facility” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4. “Facility” means a building or location where an individual can be reasonably anticipated in the course of performing his or her professional, employment, training, or volunteer activities or duties to have skin, eye, mucous membrane, or parenteral contact with potentially infectious materials. (Indiana State Department of Health; 410 IAC 1-4-4; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 754; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.1 “HBeAg” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.1. “HBeAg” means the presence of hepatitis B e antigen in human blood as an indicator of high infectivity for hepatitis B virus. (Indiana State Department of Health; 410 IAC 1-4-4.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.2 “HBsAg” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.2. “HBsAg” means the presence of hepatitis B surface antigens in human blood as an indicator of infectivity for hepatitis B virus. (Indiana State Department of Health; 410 IAC 1-4-4.2; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.3 “HBV” and “HCV” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.3. (a) “HBV” means hepatitis B virus.
(b) “HCV” means hepatitis C virus. (Indiana State Department of Health; 410 IAC 1-4-4.3; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2536)

410 IAC 1-4-4.4 “Health care worker” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11
Sec. 4.4. “Health care worker” means any covered individual providing health care for or to a patient during the patient's care or treatment and whose professional, employment, volunteer, or student training duties or activities can be reasonably anticipated to result in skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials. (Indiana State Department of Health; 410 IAC 1-4-4.4; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.5 “HIV” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.5. “HIV” means human immunodeficiency virus. (Indiana State Department of Health; 410 IAC 1-4-4.5; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.6 “Other potentially infectious materials” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.6. “Other potentially infectious materials” means the following:

(1) Human body fluids as follows:
   A. Semen.
   B. Vaginal secretions.
   C. Cerebrospinal fluid.
   D. Synovial fluid.
   E. Pleural fluid.
   F. Pericardial fluid.
   G. Peritoneal fluid.
   H. Amniotic fluid.
   I. Saliva in dental procedures.
   J. Any body fluid that is visibly contaminated with blood.
   K. All body fluids where it is difficult or impossible to differentiate between body fluids.

(2) Any unfixed tissue or organ, other than intact skin, from a human, living or dead.

(3) HIV-containing cell or tissue cultures, organ cultures, and HIV or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

(Indiana State Department of Health; 410 IAC 1-4-4.6; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.7 “Parenteral” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.7. “Parenteral” means piercing the mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, or abrasions. (Indiana State Department of Health; 410 IAC 1-4-4.7; filed Nov 22, 1993, 5:00 p.m.: 17 IR 755; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-4.8 “Sterilize” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 4.8. “Sterilize” means the use of a physical or chemical procedure to destroy all microbial life, including highly resistant bacterial endospores. (Indiana State Department of Health; 410 IAC 1-4-4.8; filed Nov 22, 1993, 5:00 p.m.: 17 IR 756; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-5 “Universal precautions” defined
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 5. “Universal precautions” means an approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. (Indiana State Department of Health; 410 IAC 1-4-5; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 756; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-6 Facility operator responsibilities
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 6. (a) An individual or entity that is a facility operator shall comply with the following:

(1) Inform all health care workers and covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of the facility, that it is strongly recommended by the department that all persons who have reason to believe they are at risk of HIV infection should know their HIV status.

(2) Inform all health care workers that it is strongly recommended by the department that all:

   A. who perform procedures during which there is a recognized risk of percutaneous injury to the health care worker, and, if such injury occurs, the health care worker's blood may contact the patient's body cavity, subcutaneous tissue, or mucous membranes; and

   B. who do not have serologic evidence of immunity to HBV from vaccination or from previous infection should know their HBsAg status and, if that is positive, should also know their HBeAg status.

(3) Ensure that the training described in the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030) is provided to all covered individuals whose professional,
410 IAC 1-4-7 Facility operator policies

**Authority:** IC 16-41-11-9  
**Affected:** IC 16-41-11

Sec. 7. A facility operator shall develop a written policy in compliance with this rule and the requirements of the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030), that:

1. requires the use of universal precautions by a covered individual when performing those professional, employment, training, or volunteer activities or duties that include any reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials;
2. provides sanctions, including discipline and dismissal, if warranted, for failure to use universal precautions; and
3. prescribes the facility operator, or any covered individual acting at or on behalf of the facility, from retaliating against any person, including any professional, employee, trainee, volunteer, or patient, for filing a complaint with the department in good faith under this rule.

(Indiana State Department of Health: 410 IAC 1-4-7; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 757; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-7.1 Covered individuals’ minimum training and certification requirements

**Authority:** IC 16-41-11-9  
**Affected:** IC 16-41-11

Sec. 7.1. All covered individuals shall comply with the following:

1. Covered individuals, including health care workers, whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of a facility, must complete the training programs which the facility is required to have employees attend under the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030). Approved programs under this rule shall be as follows:
   A. A bloodborne pathogen training session provided by a facility or employer under the Indiana occupational safety and health administration's bloodborne pathogens standards (as found in 29 CFR 1910.1030).
   B. A bloodborne pathogen training session provided by an Indiana State Department of Health-certified program or a program accredited by a professional organization approved by the department.

(Indiana State Department of Health; 410 IAC 1-4-7.1; filed Nov 22, 1993, 5:00 p.m.: 17 IR 757; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 1-4-8 Precautions generally

**Authority:** IC 16-41-11-9  
**Affected:** IC 16-41-11

Sec. 8. (2) Covered individuals who are health care workers shall, either individually or through their employer, upon receipt of a written request by the department, employer, or a patient to whom direct services have been provided, provide evidence of compliance with the requirements of this section.

(Indiana State Department of Health; 410 IAC 1-4-8; filed Mar 25, 1994, 5:00 a.m.: 15 IR 373; readopted filed Nov 22, 1993, 5:00 p.m.: 17 IR 757; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)
Sec. 8. (a) All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration’s bloodborne pathogens standards (as found in 29 CFR 1910.1030).

(b) The operator and all covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of a facility providing services to patients or other members of the public in which there is a reasonably anticipated risk of skin, eye, mucous membrane, or parenteral contact with human blood or other potentially infectious materials shall also comply with the following requirements:

1. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.
2. Heating procedures capable of sterilization must be used when heat stable, nondisposable equipment is sterilized. Monitoring of heat sterilization procedures shall include documentation of the following:
   (A) Each sterilization cycle.
   (B) Use of chemical indicators when sterilizing packaged nondisposable equipment.
   (C) That biological indicators were used within thirty (30) days prior to the current sterilization procedure.
   (D) Routine equipment maintenance according to manufacturer recommendations.

Documents required under this subdivision must be made available to the department upon request.

3. Reusable equipment requiring sterilization that is destroyed or altered by heat must be sterilized by chemical means.

4. Environmental surfaces and equipment not requiring sterilization which have been contaminated by blood or other potentially infectious materials shall be cleaned with an absorbent material prior to disinfection. Disinfectant solutions shall:
   (A) be a germicide registered with the Environmental Protection Agency (EPA) for use as a hospital disinfectant and labeled tuberculocidal or registered germicide with specific inactivation claims against HIV and HBV; or
   (B) be a sodium hypochlorite solution dated and not used after twenty-four (24) hours old as follows:
      (i) A minimum of 1:100 dilution (one-quarter (¼) cup of five and twenty-five hundredths percent (5.25%) common household bleach in one (1) gallon of water).
      (ii) A 1:10 dilution (one (1) part five and twenty-five hundredths percent (5.25%) common household bleach in nine (9) parts water) shall be used when a blood, culture, or OPIM spill occurs in the laboratory.

5. If a patient’s diagnosis, laboratory analysis, or medical condition requires additional infection control measures or isolation, those specific measures apply in addition to the requirements of this rule and other requirements found at IC 16-19.

(Indiana State Department of Health; 410 IAC 1-4-8; filed Oct 6, 1989, 4:20 p.m.: 13 IR 280; filed Nov 22, 1993, 5:00 p.m.: 17 IR 757; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Mar 28, 2006, 12:45 p.m.: 29 IR 2537; errata filed Aug 16, 2006, 2:30 p.m.: 20060830-IR-410050259ACA)

410 IAC 1-4-8.1 Expert review panel
Authority: IC 16-41-11-9
Affected: IC 16-41-11

Sec. 8.1. (a) An HIV infected or HBV infected (and HBeAg positive) health care worker whose practices include digital palpation of a needle tip in a body cavity or the simultaneous presence of the health care worker's finger and needle or other sharp instrument in a poorly visualized or highly confined human anatomic site should either seek the advice of an ERP approved by the department or voluntarily cease these practices.

(b) As used in this rule, “expert review panel” means a group of experts authorized under this rule to provide confidential consultation and advice to HIV and HBV (and HBeAg) infected health care workers as indicated to promote the highest achievable level of safe, professional care. To be deemed authorized, an ERP must be sponsored by an organization which has been approved by the department under subsection (c).

(c) Before any public or private medical, surgical, dental, nursing, or other health care organization may sponsor an authorized ERP under this section, the potential sponsor must be approved by the department as having provided credible assurances that:

1. the sponsor is capable of establishing specific ERP protocols and procedures that will accomplish the purposes of an ERP under this section; and
2. it will comply with general protocols to be established and disseminated on request by the department.

(d) The ERP will consist of:

1. an expert review entity consisting of:
   (A) the HIV or HBV infected health care worker's treating physician, either directly or through medical and historical treatment records;
(B) an infectious disease specialist knowledgeable in the epidemiology of HIV and HBV infection;  
(C) a health care provider of the same profession as the infected health care provider with expertise in the procedures practiced; and  
(D) an infection control expert or epidemiologist; or  
(2) any other expert review entity expressly authorized by the department.  
(e) An ERP sponsored by an organization approved by the department under subsection (c) will be deemed an authorized ERP.  
(f) An ERP shall advise the health care worker whether and how to modify techniques or to cease performing certain procedures. In rendering this advice, the ERP shall consider the past history of the health care worker's technique, and the extent to which, in the context of other indicated procedures with a measurable and unavoidable significant risk to patients, an indicated invasive procedure in the hands of that health care worker does or does not expose patients to the significant risk of HIV or HBV transmission from the health care worker.  
(g) The role of the ERP is strictly confidential and advisory to the health care worker.  
(h) All proceedings and communications of the ERP shall be confidential. All communications to an ERP shall be privileged communications. Neither the personnel nor any participant in a panel proceeding shall reveal the identity of any health care worker consulting such panel nor any content of communication to the records of or the outcomes of an ERP outside the panel to any person or other entity, other than the health care worker consulting such panel.  
(i) No person who participates in an ERP proceeding shall be permitted or required to disclose any information acquired in connection with, or in the course of, the proceeding, any opinion, recommendation, or evaluation of the panel or of any panel member.  
(j) The only duty of an ERP is to provide good faith consultation and advice to the HIV or HBV infected health care worker seeking such advice. A health care worker is not, by this rule, relieved of any responsibility, either to himself or herself or to others, for all actions taken or not taken in his or her professional capacity after consulting with an ERP. Neither an ERP nor any member of an ERP is approved by this rule to substitute or assume consultation with an ERP. Neither an ERP nor any member of an ERP shall consider the past history of the health care worker's technique, and the extent to which, in the context of other indicated procedures with a measurable and unavoidable significant risk to patients, an indicated invasive procedure in the hands of that health care worker does or does not expose patients to the significant risk of HIV or HBV transmission from the health care worker.  
(k) Neither an ERP nor any member of an ERP shall, by virtue of their consultation and advice, assume any liability of any kind to the health care worker, his or her patients, or any other person. The personnel and members of an ERP shall be immune from any civil action arising from any determination or recommendation made in good faith in the scope of their duties.  
(Indiana State Department of Health; 410 IAC 1-4-8; filed Nov 22, 1993, 5:00 p.m.: 17 IR 759; errata, 17 IR 1009; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)