Keep your Knowledge Current: Antibiotic Prophylaxis

“What is the College’s position on antibiotic prophylaxis for dental patients with total joint replacements?”

“What should I do if my patient says her orthopaedic surgeon told her she should always take antibiotics before a dental procedure?”

These are the sorts of questions we get from registrants looking for guidance when it comes to antibiotic prescribing.

The fact is, antibiotic prophylaxis is not required for dental patients with prosthetic joints. Dentistry has long taken this approach, which was confirmed by the 2016 consensus statement* from the Canadian Orthopaedic Association, the Canadian Dental Association and the Association of Medical Microbiology and Infectious Disease.

While this consensus statement represents the expected standard of care, it is a guidance document and is not meant to be prescriptive. Depending on the procedure and/or the patient’s medical status, prophylactic antibiotics may very well be required, but not specifically because of the presence of a prosthetic joint.

At the end of the day, it’s up to the treating dentist to use their own clinical expertise and judgment and to take into account the patient’s history, including any existing condition that might affect treatment outcomes. It is always up to the dentist to make the final recommendation as to the need for pre-treatment antibiotics when dental services are being provided.

* www.cda-adc.ca/en/about/position_statements/jointreplacement

Continues on page 2 >>
Staying Current

As the regulator, the College intentionally does not always define or quantify specific aspects of patient care at the patient/dentist interface. This allows the practitioner latitude to provide care that is specific to the patient and in their best interest.

It is, however, the ethical duty of all registrants to “commit to the highest level of professionalism by maintaining current knowledge and competency” (Principle 4, CDSBC Code of Ethics).

Beyond this ethical requirement, staying current in our knowledge is also an expectation from our patients – it’s part of what makes us professionals.

Back to the opening question about the patient asking for antibiotics on the advice of her surgeons: the best approach here would be to explain to the patient what you see as best practices. If the patient insists on having the medication prescribed, it would be prudent to contact the surgeon in question and have a discussion with them about the case and your concerns before any treatment is provided. Colleague-to-colleague discussion may well be the best way to resolve the issue and is in the patient’s best interest.

Dr. Chris Hacker is CDSBC’s Acting Registrar.

For the College’s expectations for prescribing, please refer to the Standards & Guidelines document “Prescribing and Dispensing Drugs” at www.cdsbc.org/library.

Is your CE Up to Date?

Eligible credits earned by the 31 December deadline will be applied to your transcript in time for renewal.

Registrants whose continuing education (CE) cycle ends on 31 December 2018 and who have not yet met the minimum requirements for renewal next year still have time.

Submit your CE credits by email, mail or online at www.cdsbc.org/login.

The College offers a variety of relevant online courses such as More Tough Topics in Dentistry, which can help you earn CE credits before the 31 December deadline. Visit www.cdsbc.org/courses to see more online course offerings.
Best Practices Regarding Diagnostic Interpretation

As the number of cone beam computed tomography (CBCT) scanners owned and operated by dental practitioners has increased, CDSBC believes it timely to provide a “reminder call” regarding best practices and patient-centred care as they relate to radiographic assessments.

Elements of public protection:

• Clinical indications for radiographic analysis are limited to the appropriate images necessary to support a diagnosis.
• This includes limiting the field of view in a CBCT scan to only the area under consideration in order to form a diagnosis.
• The dose is sufficient to produce a fully diagnostic image – as affirmed by the ALARA Principle (as low as reasonably achievable)
• Only appropriately trained and registered staff may expose the prescribed images.

As dentists, when we bring such due consideration patients are protected from unnecessary doses of ionizing radiation.

Best practices regarding diagnostic interpretation:

• A thorough and comprehensive diagnosis of all images prescribed is provided by a dentist fully competent to interpret the particular radiographic survey prescribed.
• In cases where the interpretation of all aspects of the image does not lie within the area of expertise of the prescribing dentist, he/she must forward the images to a dental or medical practitioner competent to provide an accurate and comprehensive interpretation.
• The images are compared with any pre-existing images. This is best practice and can provide crucial diagnostic information which assists in forming the diagnosis evident from the radiographic appearance(s).
• Acting in accordance with CDSBC’s Code of Ethics, it is always our responsibility to “maximize benefits and minimize harm for the welfare of the patient”. This includes not practising beyond our particular level of competency.
• Whether it is a periapical radiograph or a CBCT scan, the principles are the same.

Please take this opportunity to review CDSBC’s Dental Radiography Standards & Guidelines.

Thank you all for your care and attention to this important area of practice.

Updates to Minimal and Moderate Sedation Services (non-hospital facilities) Standards & Guidelines Document

In September 2018, CDSBC’s Minimal and Moderate Sedation Services (non-hospital facilities) Standards & Guidelines document was republished to the CDSBC website with the following updates.

• Edits were made to clarify the description of the dentist educational requirements contained in section 4.3 of the document with respect to continuing dental education for moderate parenteral (IV) sedation.
• An existing addendum regarding capnography requirements for moderate sedation has been incorporated into the appropriate place(s) in the document (see pages 11 and 14 of the document).
• The expectations for members of the sedation team to maintain current CPR-HCP levels of training every two years was made clear in the document (section 4.3).

Please familiarize yourself with these changes to the Minimal and Moderate Sedation Services (non-hospital facilities) Standards & Guidelines.
Regulation of Dental Therapists to Continue

The College of Dental Surgeons of BC is pleased to announce that regulatory oversight of dental therapists will continue, uninterrupted, into the foreseeable future.

In 2013, the Provincial Government approached CDSBC regarding the provision of regulatory oversight for dental therapists in B.C. The intention was to allow First Nations Health Authority (FNHA) to employ dental therapists to provide preventative and restorative dental care for remote and under-serviced Indigenous communities under the supervision of a dentist registrant with requisite authority.

Authority for the regulation of dental therapists was provided through an amended CDSBC bylaw deposited with the Ministry of Health in 2013 and given final approval in early 2014. At the same time, an agreement was struck amongst the Ministry of Health, FNHA and CDSBC to allow provision of these much-needed services.

Regulation of dental therapists by CDSBC has continued, uninterrupted, since that time but, recently, had been threatened by the existence of the unaddressed termination clause in the initial agreement.

Ongoing conversation with the Ministry of Health has determined that regulation of dental therapists by CDSBC can continue indefinitely as authority for the regulatory oversight resides in the bylaw amendments from 2014.

The College looks forward to a long and healthy relationship with FNHA and the Ministry of Health and is proud to count the dental therapists amongst our registrants.

About dental therapists

Dental therapists provide oral healthcare services to underserved, and often remote, First Nations populations. They may be the primary oral health professionals in their community.

Dental therapists in B.C. must be employed by the First Nations Health Authority and may only provide services to First Nations communities under the supervision and direction of a dentist in good standing.

There are currently seven dental therapists registered with CDSBC.

Update on the Cayton Review

Since the Ministry of Health appointed Mr. Harry Cayton to conduct a review into Board governance as well as the administrative and operational practices of CDSBC in March 2018, the College has hosted him at our office several times.

The College has welcomed Mr. Cayton’s review as an opportunity to confirm where we are performing well and identify areas for continued improvement.

Mr. Cayton has been analyzing the College’s policies and procedures, as well as how the College interprets the Health Professions Act and the CDSBC Bylaws.

In the process he has sought input from individuals and organizations that he believes to be relevant, and has conducted interviews with board and committee members, staff, and other key stakeholders (both current and former).

Mr. Cayton has observed meetings of the Board, various committees and working groups, and staff. He most recently attended the September meeting of the CDSBC Board and will return to Vancouver once more before submitting his draft and final reports later this fall.

The findings of the review will be made public.

The terms of reference of Mr. Cayton’s review can be found at cdsbc.org/cayton-review.

Mr. Cayton is a leader in the field of professional regulation, and his team at the Professional Standards Authority have helped many regulators enhance and reform their regulatory oversight mechanisms and processes.
Join the Consultation Conversation

The College invites you to comment on the following open consultations:

Proposed Quality Assurance Program

The proposed Quality Assurance (QA) program will change the QA requirements for dentists, certified dental assistants and dental therapists. If approved, it will require significant development and a gradual roll-out plan to implement the new program throughout the province.

We are inviting feedback on the proposed program until 20 November 2018. You can do this by:

- Participating in our new online forum: www.cdsbc.org/Pages/Proposed-QA-Program.aspx
- Sending physical mail to the College (Attention: Proposed QA program consultation)
- Email: consultation@cdsbc.org (include “Quality Assurance” in the subject line)

View the proposed Quality Assurance program and learn about the background, research and rationale: www.cdsbc.org/Pages/Proposed-QA-Program.aspx

Draft 2019-22 Strategic Plan

Improved health outcomes for the public, strengthening stakeholder relationships, embracing leading regulatory practices and stronger governance are at the core of CDSBC’s new strategic plan.

We are inviting feedback on three questions about the draft 2019-22 Strategic Plan until 26 October 2018. (Note that this consultation period is shorter than normal). You can share your feedback by:

- Participating in our new online forum: www.cdsbc.org/Pages/draft-strategic-plan-consult.aspx
- Sending physical mail to the College (Attention: Strategic Plan Consultation)
- Email: consultation@cdsbc.org (include “Strategic Plan” in the subject line)

Visit the dedicated consultation page to read more about the draft 2019-22 Strategic Plan: www.cdsbc.org/Pages/draft-strategic-plan-consult.aspx
Responses from the Complaints Process Exit Surveys

The public report on the responses to the complaints process exit surveys is now available online. The report encompasses the second year of the exit surveys project. Read the full report at cdsbc.org/exit-surveys.

Background

The College remains committed to a complaints process that is thorough, fair and timely. For this reason, the exit surveys have been distributed to complainants and registrants at the closing of each complaint file since 2016. The surveys are administered by Pivotal Research Inc. Feedback is received via two surveys: one for registrants and another for complainants.

Here are some highlights that emerged from both the registrant and complainant surveys in the 2017/18 fiscal year.

What Registrants Said

- The majority of registrant respondents strongly agreed with how the process is conducted in terms of fairness, courtesy, timeliness of the process, and thoroughness.
- The outcome of the complaint (dismissal, action to improve practice) had little impact on the registrant’s overall agreement with the process.
- Registrants agreed that the College’s communication was easy to understand and the College kept them informed about developments in the complaint process.
- Their expectations of the process matched the outcomes for the most part. As such, they were likely to be satisfied with the process.

What Complainants Said

- Complainants were equally split between those who agreed and disagreed with the fairness and thoroughness of the process.
- They generally agreed that their complaint was handled with courtesy and respect.
- Similar to last year, complainants were likely to feel that their complaint was not handled in a timely manner.
- Those whose complaints were dismissed are more likely to disagree with the fairness, timeliness, and thoroughness of the process while those whose complaint resulted in the registrant taking some action to improve their practice were mostly dissatisfied with timeliness.
- Complainants whose cases were dismissed were more likely to disagree about being well informed.
Save a life: the dentist's role in the early detection of oral cancer

**CDSBC and BC Cancer at the Vancouver and District Dental Society's 2018 Midwinter Clinic**

Friday, 30 November 2018 (panel runs 8:30 – 10:30 am)
Westin Bayshore, 1601 Bayshore Drive, Vancouver
Register at www.vdds.com

Early detection of oral cancer can save a life. Dentists have an excellent opportunity to screen for oral cancer. The responsibility lies with both general practitioners and specialists alike. Join our panel discussion on early detection, which will include biopsy management and sample protection, and the psychosocial impacts of a cancer diagnosis.

**Panellists:** Dr. Alan Bates, Dr. Ash Varma, Dr. Catherine Poh, Dr. Allan Hovan
**Moderator:** Dr. Meredith Moores, Acting Director of Professional Practice, CDSBC

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**Public Notification**

**Dr. Zahra Davami**  
*Burnaby, B.C.*

**Background**

Dr. Zahra Davami is a general dentist who formerly practised in Burnaby. She resigned from the practice of dentistry as of 16 June 2017. She has not applied for reinstatement.

Following an investigation by CDSBC, the Inquiry Committee directed that a citation (notice of hearing) be issued against Dr. Davami. A discipline hearing in Vancouver had been scheduled for July 2018 but was cancelled when Dr. Davami made admissions and proposed a resolution under section 37.1 of the *Health Professions Act*.

**Admissions and Resolution**

Dr. Davami has admitted to professional misconduct with respect to a number of patients in that she failed to exercise reasonable care, skill and judgment in the provision of dental treatment, and specifically with respect to diagnosis, treatment and recordkeeping. A panel of the Inquiry Committee received and considered Dr. Davami’s proposal and orders:

- Dr. Davami pay $2,000 to CDSBC towards the costs of the investigation and hearing preparation.

- Dr. Davami remains resigned from the practice of dentistry.

- If she applies for reinstatement to practise dentistry:
  - Her application will be addressed by the Registration Committee; and
  - In addition, her practice may be subject to an education and/or monitoring program.

This is a summary of the consent order approved by the Inquiry Committee on 18 July 2018.
### College Calendar

**30 November 2018**

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Board Meeting</strong></td>
<td>8:30 am</td>
<td>Terminal City Club, “Terrace B / Wilson Beck”, Level 2 837 West Hastings St. Vancouver, B.C.</td>
</tr>
<tr>
<td><strong>Save a life: the dentist’s role in the early detection of oral cancer</strong></td>
<td>8:30-10:30 am</td>
<td>CDSBC and BC Cancer at the Vancouver and District Dental Society Midwinter Clinic Westin Bayshore, 1601 Bayshore Drive, Vancouver, B.C.</td>
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**To register visit** [www.vdds.com](http://www.vdds.com)

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**Are you receiving our monthly eNewsletter?**

If not, you may need to add communications@cdsbc.org to your address book to avoid our messages being filtered out by your email provider.

If your personal information has changed, log in to your account to update it at: [www.cdsbc.org/contact-info](http://www.cdsbc.org/contact-info)

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