

Tips for Avoiding Complaints

What follows is a composite of some of the issues that may result in the filing of a complaint against a practitioner. Having a complaint filed against you can be extremely disruptive and upsetting. If a case alleges unprofessional conduct, as defined by the Board's laws and rules, the Office will order an investigation. Although many complaints do not result in disciplinary action they are still investigated. Many of those complaints that are closed might have been avoided altogether if the practitioner had better communicated with the patient. Many insurance carriers, and many State's now ask if you are, or have ever been the subject of an investigation.

If a complaint is filed and the Investigating Team finds unprofessional conduct, the Board has the authority to take disciplinary action. We hope that you will read this carefully, it does not cover every possible scenario, but it may help you avoid common pitfalls that result in a complaint, and/or disciplinary action. Some of these items may seem to be unimportant, but every one of them has been based on an actual complaint.

1. Billing an insurance company for any type of oral evaluation done by a hygienist and not the dentist could be fraud. The collection and recording of some data and the components of the dental examination may be delegated; however, the evaluation, diagnosis and treatment planning are the responsibility of the dentist.
2. A dentist has a responsibility to periodically see patients who receive dental services in their practice. While the frequency of evaluations by the dentist are not defined in the laws, they should be regular in nature. The Board considers regular to be, at least, annually.
3. That it is inappropriate to write a prescription for a relative, friend, or even a patient of record, if that drug is not being used within the scope of the dentist's practice.
4. The performance of an intra-oral task by a dental assistant shall be under the direct supervision of a dentist. The dentist must be on the premises, but not necessarily in the room with the assistant.
5. Coronal polishing and placement of sealants is within the scope of duties that a dentist may assign to Traditional Dental Assistants. The Board does not consider a coronal polishing by a dental assistant to be comparable to an oral prophylaxis as defined in the CDT II (Codes: 01110 & 01120).
6. Failing to make available promptly a copy of a patient's dental records or radiographs to a patient, the patient's representative, succeeding health care professionals or institutions, upon proper request may be grounds for discipline. Fees as outlined in [Title 18, § 9419](#) may be charged for copying and duplicating, but copies cannot be withheld for failure to pay fees (including duplicating charges) or as an incentive to secure payment for a balance on a patient bill. The Board interprets promptly to mean within thirty days of receipt of the request.
7. Termination of dental services. When a decision has been made to terminate a patient from your practice the Board strongly encourages the practitioner to do so, in writing. Termination should not occur during the course of treatment for a procedure that requires multiple visits, such as crown work. However, if it does the patient should also be provided with names of other practitioners that they can contact.
8. Fitting dentures in terms of your patients satisfaction (partials or complete) is difficult at best. Quite often a patient does not understand fully the common problems that occur in making dentures. They assume that the dentures were improperly made, when in fact it may be how they fit that causes the problem. Be absolutely sure to take the time to explain to new denture patients, as well as patients who have had dentures but are replacing them, what you expect in terms of fit. Find out what their expectations are of how the dentures might fit, for that is the time to correct any mis-perception they may have. With some patients you may need to have more visits for adjustments than with others, be flexible, and communicate.
9. Informed Consent - many times practitioners assume that their patients fully understand what they are doing, and what will happen. More often than not, this is not the case. Practitioners can save themselves a lot of hassle by being sure that patients know at each visit what is planned, and what it entails. This helps to avoid the possibility that the patient expects one procedure, and you perform another. Be especially communicative when dealing with minor children, keep the parent(s) informed before proceeding.
10. Be absolutely sure that all your dental assistants, and hygienists are properly registered with this Office. You will be held responsible if it is determine that you allowed an unregistered, or unqualified person to perform work in your practice. It is your license that is at risk.
11. Review the [ADA Code of Ethics](#)