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Dr. Jack Erhard, Chair
Pennsylvania State Board of Dentistry
P.O. Box 2649
Harrisburg, PA 17105-2649

Dear Dr. Erhard,

I am writing to express some serious concerns I have about the Draft Proposed Regulation 49 Pa. Code @ 33.205b, which I understand the SBOD will be discussing at their meeting tomorrow. I feel that the expansion of PHDHP independent practice to the sites addressed in the draft proposed regulation jeopardizes patient safety while perpetuating a tiered system of care that provides limited additional access to address unmet dental needs.

I have had the occasion to treat homebound patients as well as patients in nursing homes. These people are typically an ASA 3 or 4 patient, taking multiple medications and having a complex medical history. They often have involved dental problems as well. Sometimes the best treatment for them is to instruct them in routine home care and assure them to continue with this. The person who is best capable of making an evaluation of the type and extent of dental care that should be rendered is a dentist, who has received the dental school training to diagnose dental problems and has the experience to make that evaluation, not a PHDH! For a PHDHP to treat such patients in an outpatient setting is fraught with problems. Our first duty as professionals is to "primum non nocere" (first do no harm).

My team of 6 staff members has treated patients brought over from a local nursing home as well as patients referred by Jewish Family Services and Donated Dental Services. The care is rendered in our office where radiographs can be taken to evaluate the dental conditions appropriately and an emergency kit, oxygen and AED are available should there be any emergent problems.

It is my hope that you will take the following considerations in your discussions:

Expanding practice to physicians' offices does not necessarily provide additional access to care. Physicians can locate their practice where they see fit, including high-access or affluent areas of the state.

In-home treatment, especially for the medically compromised with health complications, is inherently risky. It should not be attempted by someone without emergency care training, Basic Life Support certification, and portable life-saving equipment.

There is no consideration or statement of who will be held civilly liable for malpractice or if the standard of care is not met for services provided by a PHDHP in a physician's office or child-care setting. Additionally, there is no statement regarding the supervisory responsibilities for physicians.

I recommend the State Board of Dentistry take the opportunity to amend these regulations with the goal of ensuring patient safety while fulfilling the original goal of PHDHP treatment, which is getting more people into a dental home.

Thank you,

Sincerely,

Frederick C. Lally, D.D.S., MAGD