Texas State Board of Dental Examiners
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Austin, Texas 78701-3942
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www.tsbde.texas.gov

FACULTY DENTIST RENEWAL FORM

INSTRUCTIONS: You may renew your dental license within 45 days of your expiration date. Make your check or money order payable to TSBDE. Processing may take up to two weeks, please ensure you have completed all the minimum requirements prior to submitting your renewal application. **All fields are required.** An incomplete application will delay your process.

Annual Renewal Fee	Anesthesia Fee	Late Fee if paid 1-90 days after the Expiration Date	Late Fee if paid 91-365 days after the Expiration Date	Name Change if being made at time of license renewal	TOTAL AMOUNT PAID:
$ 169.00	(If Applicable)**+ $ 10.00** ***Nitrous Oxide is considered an Anesthesia Permit**	(If Applicable)**+ $ 47.50**	(If Applicable)**+ $ 47.50**	(If Applicable)**+ $ 25.00**	**$ _____**

First Name:	Last Name:	E-mail Address:
For Name Change: Attached the required legal documentation which states your new legal name NEW LEGAL NAME:		
License Number:	License Expiration Date:	Daytime #:
Jurisprudence Completion Date:	BLS CPR Issue Date:	BLS CPR Expiration Date:

All Texas licensed dentists must hold a current Basic Life Support CPR Card. If you do not hold a current BLS CPR card, you must attach a letter of explanation from your physician or proof of residence outside the U.S.

Current Address:		City:	State:	Zip
Home Address:		City:	State:	Zip:
Office Address:		City:	State:	Zip:

Preferred mailing address: **(preferred address will be made available to the public)**
☐ Current ☐ Home ☐ Office

PRACTICE DATA. Sec. 254.007of the DPA requires the Board to annually collect data for each dental license holder. Active license holders should complete each section below for each location you have practiced dentistry during the past 12 months. For this purpose, practice shall be defined as being available for patient care. Out-of -State licensees are not required to complete this section. If you hold an Active dental license and are not currently practicing dentistry enter "Not Actively Practicing Dentistry".

Do you work for a corporate practice? ☐ Yes ☐ No

Name of Dental Practice	Physical Address (Including Zip code)	County	# of hours per week	# of weeks per year	Type of practice	Number of Hygienists	Number of Assistants

Health Insurance

_____**Yes** _____**No** Are you a Texas Medicaid Provider?

_____**Yes** _____**No** Are you a participating provider in the Texas Children's Health Insurance Program (CHIP)?

Applicant's Name:	Dental License Number:

Dentist License Renewal Questionnaire (✓ Check one)

_____**Yes** _____**No** Are you in compliance with completing the Dentist license renewal questionnaire?

Annual License Continuing Education Compliance (✓ Check one) Anesthesia CE hours required are in addition to the annual requirement : Level 1: 6 hours; Level 2 and Level 3: 8 hours; Level 4: 12 hours. Dentists will be required to provide proof of completed anesthesia CE upon request of the Board

_____**Yes** _____**No** Are you in n compliance with completing all required continuing education for this registration period?

_____**Yes** _____**No** If you hold an anesthesia permit, have you completed the additional continuing education hours required for the highest permitted level of sedation?

☐ I am in my first registration period and exempt from completing continuing education for this registration period.

Anesthesia Privileges & ACLS/PALS Certification Compliance (✓ Check the highest level of sedation permit you hold.) Dentists treating children 12 years old or younger must, as a minimum, hold a PALS Certification

☐ I do not hold an anesthesia permit		
☐ Nitrous Oxide Conscious Sedation	***Level 3 and Level 4 Anesthesia Permit Holders must provide dates of ACLS and/or PALS Certification Issue dates below**	
☐ Level 1-Minimal Sedation		
☐ Level 2-Moderate Enteral Sedation		
☐ Level 3-Moderate Parenteral Sedation*	**ACLS Issue Date**	
☐ Level 4- Deep Sedation/General Anesthesia*	**PALS Issue Date**	

LICENSE HISTORY: Please answer each of the following questions by putting a check (✓) in the appropriate box on the right. You must answer each question with a "Yes" or "No" response as no other response is acceptable. All "Yes" answers MUST be explained in detail in a separate SIGNED and NOTARIZED affidavit. The affidavit should include all relevant dates and identify the relevant jurisdiction and/or entity involved. Failure to disclose any of the requested information may result in the denial of your application or other appropriate action.

NOTE: If you answer "Yes" to any of the questions below and you have already submitted a detailed affidavit to this licensing authority explaining your response you need not submit another detailed affidavit. Please note the date of your previous submission next to the applicable question(s).

1. Since your last renewal, have you ever had any application for any professional license refused or denied by any licensing authority?	YES ☐	NO ☐
2. Since your last renewal, have you ever voluntarily surrendered your dental license?	YES ☐	NO ☐
3. Have you ever allowed your dental license to lapse, or had a limited license issued by any _____ licensing authority?	YES ☐	NO ☐
4. Since your last renewal, have you ever voluntarily surrendered any other professional license?	YES ☐	NO ☐
5. Since your last renewal, have you ever allowed any other professional license to lapse, or had a limited license issued by any _____ licensing authority?	YES ☐	NO ☐
6. Since your last renewal, has your dental license ever been revoked by any jurisdiction?	YES ☐	NO ☐
7. Since your last renewal, have you ever had any other professional license revoked?	YES ☐	NO ☐

8. Since your last renewal, have you Been the subject of disciplinary action not yet reported to the TSBDE? **If you answer "Yes" you must attach documentation of disciplinary action not previously reported to TSBDE.**	YES ☐	NO ☐
9. Since your last renewal, have you ever been the subject of disciplinary action by any licensing agency with regard to any other professional license?	YES ☐	NO ☐
10. Since your last renewal, have you ever had a registration issued by a controlled substance authority revoked, suspended, surrendered, limited, or restricted?	YES ☐	NO ☐
11. Since your last renewal, have you ever voluntarily surrendered a registration issued by a controlled substance authority?	YES ☐	NO ☐
12. Since your last renewal, have you ever been denied a Drug Enforcement Administration (DEA) or Texas Department of Public Safety (DPS) controlled substance registration certificate or has your controlled substance registration ever been placed on probation, suspended voluntarily surrendered or revoked? **If YES**, please specify date.	YES ☐	NO ☐
13. Is there any disciplinary action pending against you by any licensing jurisdiction, the USDA, Drug Enforcement Agency, or any state drug enforcement authority? If YES, where and when? _____	YES ☐	NO ☐
14. Since your last renewal, have you ever been arrested, indicted or received a court order for any criminal offense not yet reported to the TSBDE? If you answer "YES", you must attach documents regarding criminal offenses that have not been reported to the TSBDE.	YES ☐	NO ☐
15. Since your last renewal, have you ever been charged with or convicted (including a nolo contendere plea or guilty plea) of a felony (or criminal offense) in any state or in federal court (other than minor traffic violations) whether or not sentence was imposed or suspended? **If YES**, in addition to the affidavit, attach a certified copy of the court records regarding your conviction, the nature of the offense, date of discharge, if applicable, as well as a statement from the probation or parole officer.	YES ☐	NO ☐
16. Since your last renewal, Have you ever had a record expunged from a felony (or criminal) conviction?	YES ☐	NO ☐
17. Are you currently addicted to any chemical substance including alcohol (excluding tobacco and caffeine)?	YES ☐	NO ☐
18. Are you currently abusing any chemical substance including alcohol (excluding tobacco and caffeine)?	YES ☐	NO ☐
19. Do you currently have or have you been since your last renewal, previously diagnosed with any condition or impairment (including by not limited to, substance abuse, alcohol abuse, or a mental, emotional or nervous disorder or condition) that in any way affects your ability to practice as a _____ in a competent, ethical, and professional manner?	YES ☐	NO ☐
20. Since your last renewal, have you ever been named as a defendant to a civil suit related to your profession (i.e., malpractice)?	YES ☐	NO ☐
21. Since your last renewal, have you ever had anesthesia permits in Texas or any other jurisdiction suspended, probated, or revoked?	YES ☐	NO ☐

Attestation Statement

I hereby attest by my signature, under penalty of perjury, that I have completed and possess all required certifications as required by the Occupations Code and the SBDE Rules and Regulations. Further, I understand that it is a violation of the Texas Administrative Code and the Penal Code to submit a false statement to a government agency and I consent to the release of confidential information to the Texas State Board of Dental Examiners and further authorize the Board to use and to release said information as needed for the evaluation and disposition of my application for licensure All information provided on this form is true and accurate and I understand that I may be asked to produce for the SBDE any documentation I am required to maintain for licensure.

Signature	Date

General Renewal Information

Dentists who do not renew their license before the expiration date, **may not** practice until your license is brought into a current status. You may begin practicing again after you have received your registration certificate and display it where services are provided.

Dentist Penalties Texas Occupations Code, Section 257.002 states that a person whose license has been expired may not engage in activities that require a license until the license has been renewed. A person whose license has been expired for less than 90 days may renew the license by paying a renewal fee that is equal to 1-1/2 times the normally required renewal fee. A license that has been expired for more than 90 days but less than one year may be renewed by paying a renewal fee that is two times the normally required renewal fee. A license that has been expired for one year or more may not be renewed. No exceptions will be made to this provision.

CPR Requirement: Section 257.004 of the Texas Occupations Code requires that all licensed dentists, dental hygienists, and registered dental assistants sign a written statement that the applicant has successfully completed a current course/program in CPR, or holds a physician's verification that the applicant is physically unable to complete CPR, or applicant resides in a foreign country. CPR training must include a written assessment and a demonstration of skills. Computer and video-based CPR training courses given by an instructor that include training on a hands-on practice manikin by the applicant and a written assessment of skills, either taken online or in a classroom setting, are acceptable. Online courses that do not include a live instructor for a demonstration of skills and training on a practice manikin by the applicant are not acceptable.

Jurisprudence Assessment: The Jurisprudence Assessment is required once every 3 years. If you need assistance in finding the date of your last assessment please visit: https://txn.esslearning.com/catalogs/tsbde/. To purchase the SBDE Jurisprudence Assessment visit: **www.tsbde.state.texas.gov/Jurisprudence**

Continuing Education

All Texas licensees holding an active license to practice in Texas must annually collect a minimum of 12 hours of appropriate Continuing Education (CE), as required by the Texas Occupations Code and the SBDE Rules and Regulations at Chapter 104.

The following conditions and restrictions shall apply to coursework submitted for renewal purposes:

- At least 8 hours of coursework must be either technical or scientific as related to clinical care. The terms "technical" and "scientific" as applied to CE shall mean that courses have significant intellectual or practical content and are designed to directly enhance the practitioner's knowledge and skill in providing clinical care to the individual patient.
- Up to 4 hours of coursework may be in risk-management courses. Acceptable "risk management" courses include courses in risk management, record-keeping, and ethics.
- Up to 6 hours of coursework may be self-study. These self-study hours must be provided by those entities cited in SBDE Rule 104.2 of this title (relating to Providers). Examples of self-study courses include correspondence courses, video courses, audio courses, and reading courses.
- Hours of coursework in the standards of the OSHA or in CPR may not be considered in the 12-hour requirement.
- Hours of coursework in practice finance may not be considered in the 12-hour requirement.

CE Exemption for the First Registration Period: Dentists in their first registration period are exempt from completing CE

Anesthesia - Continuing Education In conjunction with the annual renewal of a dental license, a dentist seeking to renew a minimal sedation, moderate sedation or deep sedation/general anesthesia permit must complete the following hours of CE every two years on the administration of or medical emergencies associated with the highest permitted level of sedation. CE shall be in addition to any additional courses required for licensure. ACLS and PALS course may not be used to fulfill CE requirements for renewal of an anesthesia permit. CE Hours Required: Level 1: 6 hours; Level 2 and Level 3: 8 hours; Level 4: 12 hours. Dentists will be required to provide proof of completed anesthesia CE upon request of the Board.

CE Audits: TSBDE audits approximately 5% of the selected renewal population 60 days before the license is due to expire. If you have been selected for an audit, you will not be able to renew your license until you have complied and the audit has been approved by TSBDE staff. Late fees will accrue if you cannot provide the required approved documentation, prior to your expiration date.

Student Loan Default: Dentists in default of student loans will not be allowed to renew a license until a repayment agreement has been approved by the Texas Guaranteed Student Loan Corporation or Texas Higher Education Coordinating Board and notification has been received by the Board.

Child Support Default: Dentists in default of paying child support will not be allowed to renew a license until a repayment agreement has been approved by the Texas Attorney General, Office of Child Support and notification has been received by the Board.

Licensure Retirement: Dentists requesting their license be retired are required to submit a Retirement Request Form **PRIOR** to the expiration of their license. A request for licensure retirement is subject to the license being current and in good standing with no open investigations or active board orders in effect at the time of request. Once the retirement is granted, annual licensure fees and continuing education requirements are waived for the period the license is in retirement. Dentists seeking licensure retirement must also surrender drug prescribing privileges to the Department of Public Safety. Reactivation of a retired license must be requested in writing and in compliance with SBDE Rule 101.7 which is available for review on the SBDE website.