



MILITARY DENTIST RENEWAL FORM

INSTRUCTIONS: A license may only be renewed within 45 days of its expiration date. Make your check or money order payable to the TSBDE.

FULL NAME: _____ E-MAIL ADDRESS: _____

LICENSE NUMBER: _____ LICENSE EXPIRATION DATE: _____ DAYTIME PHONE: _____

1. HAVE YOU CHANGED YOUR NAME OR ADDRESS IN THE LAST 60 DAYS: Yes No (Complete Page 2 to report a name or address change)

2. JURISPRUDENCE ASSESSMENT: Licensed dentists are required to complete the Jurisprudence Assessment once every 3 years. Find the last time you completed your assessment at: https://txn.esslearning.com/catalogs/tsbde/

Date of your Jurisprudence Assessment for License Renewal Certificate of Completion: _____(MM/DD/YYYY)

3. DENTAL INSURANCE QUESTIONS

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

4. BASIC LIFE SUPPORT CPR COMPLIANCE: (Check One) All Texas licensed dentists must hold a current Basic Life Support CPR Card.

- My BLS CPR is current. CPR Card Issued Date: _____(MM/DD/YYYY) CPR Card Expiration Date: _____(MM/DD/YYYY)
My BLS CPR Card is not current. I am attaching my physician's letter of explanation or proof of residence outside the U.S.

5. I AM COMPLIANT IN COMPLETING THE TEXAS DENTIST LICENSE RENEWAL QUESTIONNAIRE? Yes No

6. ANESTHESIA PRIVILEGES AND 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 1 - Minimal Sedation.
Level 2 - Moderate Enteral Sedation.
Level 3 - Moderate Parenteral Sedation.
Level 4 - Deep Sedation/General Anesthesia.

LEVEL 2, LEVEL 3 AND LEVEL 4 PERMIT HOLDERS
ACLS AND PALS CERTIFICATION

Level 2, Level 3 and Level 4 Anesthesia Permit Holders must provide dates of ACLS and/or PALS Certification Issue dates below:

ACLS Issue Date: _____(MM/DD/YYYY)

PALS Issue Date: _____(MM/DD/YYYY)

ANESTHESIA CONTINUING EDUCATION COMPLIANCE. In accordance with Rule 110.9, a dentist seeking to renew a dental license must renew their sedation privileges and complete the required number of hours of CE once every two years on the administration of or medical emergencies associated with the permitted level of sedation.

7. ANNUAL LICENSE RENEWAL CONTINUING EDUCATION COMPLIANCE: (Check One)

- I am in compliance with completing all required continuing education for this registration period.
I am in my first registration period and exempt from completing continuing education for this registration period.

8. DISCIPLINARY ACTION HISTORY: (Check One)

- I have not been the subject of any disciplinary action not yet reported to the Board.
I have been the subject of disciplinary action not yet reported to the Board and I am attaching a letter of explanation and a certified copy of all actions taken against my license.

9. CRIMINAL HISTORY: (Check One)

- I have not been arrested, indicted, convicted or received a court order for any criminal offense not yet been reported to the Board.
I have been arrested, indicted, convicted or received a court order for a criminal offense not yet reported to the Board and I am attaching a letter of explanation and certified copies of legal documentation pertaining to the arrest, indictment, conviction or court order.

10. REQUIRED 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 license and are not currently practicing dentistry enter "Not Actively Practicing Dentistry". Faculty should enter "Faculty", Residents/Interns should enter "Resident / Intern". Military Active Duty may enter "Military". Use a second sheet of paper to record additional information if needed.

Table with 8 columns: Name of Dental Practice, Physical Address (Including Zip Code), County, # hours per week, # of weeks per year, Type of Practice, Number of Hygienists, Number of Assistants

11. FEES DUE. Pay all fees as they apply to you. PENALTY FEE NOTE: If paying the penalty fee for being 91-365 days past your expiration date you must also pay the penalty fee for being 1 to 90 and/or 91-365 days past due.

Table with 3 columns: Fee Description, Military Exemption, No Fee OR
- Military Exempt if your Command does not require a fee be paid.
- Annual Fee if your Command does requires a renewal be fee.
- Nitrous Oxide is considered an Anesthesia Permit.
- Penalty Fee if paid 1-90 days after the Expiration Date.
- Penalty Fee if paid 91-365 days after the Expiration Date.
- Name Change if being made at time of license renewal.

TOTAL AMOUNT PAID: \$ _____

12. SIGNATURE AND DATE. 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 TSBDE Rules and Regulations. All information provided on this form is true and accurate and I understand that I may be asked to produce for the TSBDE any documentation I am required to maintain for licensure.

Signature: _____ Date: _____

ADDRESS CHANGE Complete this section if you have not reported your change of address in the last 60 days.**Important Notice:** Your primary mailing address will be displayed on the internet and made available to the public._____ Use my **Home Address** as my primary mailing address.Home
Address: _____

City: _____

State: _____ Zip Code: _____

Telephone Number: _____

OR _____ Use my **Office Address** as my primary mailing address.Office
Name: _____Office
Address: _____

City: _____

State: _____ Zip Code: _____

Telephone Number: _____

NAME CHANGE**Instructions:** Mail legal documentation with this Renewal Form showing proof of the name change (e.g., Marriage License, Divorce Decree, etc.) Do not mail in your annual registration certificate.**NAME CHANGE FEE:** \$25 at time of Renewal

PRINT YOUR FULL LEGAL NAME HERE

GENERAL INFORMATION**Renewal Requirements****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.**Jurisprudence Assessment for License Renewal.** This requirement may only be met by taking the online TSBDE Jurisprudence Assessment once every three years for licensure renewal. To purchase the TSBDE Jurisprudence Assessment visit: www.tsbde.state.texas.gov/Jurisprudence.**Annual Renewal - 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 TSBDE Rules and Regulations at Chapter 104.

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

- At least 8 hours 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 may be in risk-management. Acceptable "risk management" courses include courses in risk management, record-keeping, and ethics.
- Up to 6 hours may be self-study. These self-study hours must be provided by those entities cited in TSBDE Chapter 104 of this title. Examples of self-study courses include correspondence courses, audio or video courses and reading courses. Live or recorded webinars are considered self-study and not lecture.
- 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 Permit - 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.**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.**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. Applicants signing the statement on Page 1 of this application must maintain documentation of CPR status. 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.**Licensure Retirement.** Dentists requesting their license be retired are required to submit an TSBDE 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 TSBDE Rule 101.7 which is available for review on the TSBDE website.