

STATE BOARD OF DENTISTRY NEWSLETTER

New Board Member Bio

In March 2016, Andrew S. Matta, DMD, was appointed to a six-year term on the State Board of Dentistry. Dr. Matta is currently a resident of New Castle, PA, and is a Co-Founder and Chief Medical Officer of North American Dental Group. In addition, he works clinically in the field of implant dentistry, both teaching and providing patient care.

Dr. Matta is a graduate of Allegheny College, with a dual Bachelor of Science degree in Neuroscience and Psychology. In 2004, he was awarded a DMD from the University of Pittsburgh School of Dental Medicine. While at the University of Pittsburgh, Dr. Matta also attended the Katz School of Business and subsequently completed an MBA program through Tulane University. During his practice of dentistry, Dr. Matta has completed an Implant Specialty Mastership and graduated from the Misch International Implant Institute. Dr. Matta is a Diplomate of both the American Board of Oral Implantology and the International Congress of Oral Implantology.

Dr. Matta acquired his first practice in New Castle, PA in 2005, and the following year founded Serenity Dental Care. Over the next four years, this group dental practice acquired multiple other practices in the region, focusing on high-quality patient care and treating the anxious patient. In 2010, Dr. Matta co-founded Refresh Dental Management, now the North American Dental Group. The company is a multi-state DSO model, with a record of continuous rapid growth, and currently includes more than 75 practices in Indiana, Michigan, Ohio and Pennsylvania.

In addition to his practice and business responsibilities, Dr. Matta is a triathlete, with a focus on endurance distances. He was an "Ironman" finisher in Lake Placid in July 2016 and competes in triathlons throughout the country.

Patient Records: Reducing the Risk of Liability Claims

By John F. Erhard, DDS, Chairman, State Board of Dentistry

In addition to state regulations that govern preparing, maintaining and retaining patient records (Pennsylvania Code, Title 49, Professional and Vocational Standards – Chapter 33, State Board of Dentistry, Section 33.209, Preparing, maintaining and retaining patient records), keeping accurate, current and intelligible patient records is considered one of the best ways to protect a dental practice in the event of a liability claim.

Documentation of treatments performed and treatment planning criteria, along with evidence of sound professional judgment creates a strong front line of defense when clinical decisions and treatments are challenged. A dentist's knowledge of the laws and regulations that govern patient records is an indispensable tool when professional judgment is reviewed by a third party.

The ultimate responsibility for the accuracy and thoroughness of a patient's record lies with the attending dentist. Although clinical staff may notate in the patient record, it is the dentist who is accountable to assure that all records are accurate, legible and clear. Amendments to the record should not remove or obscure the original postings, and they should be dated and signed. Patient treatment records should NOT include financial or anecdotal comments.

Patient charts are legal documents and should include both clinical and appropriate personal information, such as:

- description of the patient's dental condition
- diagnosis and treatment plan
- progress notes on treatment(s) performed and results
- medical health history, with updates
- dental history
- vital and diagnostic signs
- oral cancer screening remarks
- TMJ evaluation
- periodontal evaluation
- diagnostic test findings
- consultant and referral reports

- patient concerns
- examination and treatment notes
- administration of anesthesia
- diagnostic models and photographs
- dated radiographs
- notes of interaction with the patient, including electronic and telephone communications
- appropriate legal documents, i.e., custody orders
- authorization for release of records

When a patient requests release of his/her record, a signed form authorizing release should be obtained by the office, copied, and kept with the original patient record. The release of records for a minor is generally granted to the responsible parent or guardian with a signed request. There are occasions when requests for records of a minor may be challenged or denied. Usually, the welfare of the minor is the guiding factor in making a determination. If there is uncertainty about the release of a record, a legal opinion should be obtained from the dentist's attorney.

Section 33.209(h) states that a dentist's failure to comply with the section will be considered unprofessional conduct and will subject the noncomplying dentist to disciplinary action. Records should also be released within 30 days of receipt of a written request for the records, irrespective of a patient's unpaid balance for dental services. Fees charged for record gathering and copying should be reasonable and defensible. Finally, when properly requested, patient records should be released "in full".

(Please note that this article is intended to be a reminder of certain provisions of the State Board of Dentistry's regulations and is not to be considered legal advice nor is it an advisory opinion of the Board. To the extent that any provisions of the Dental Law or the Board's regulations conflict with any information provided in this article, the provisions of the law and the regulations will control.)