



**ELECTIVE FACIAL COSEMTIC SURGERY PERMIT (EFCS)  
CREDENTIALING COMMITTEE  
MEETING MINUTES**

Wednesday, January 19, 2011  
2005 Evergreen Street, Lake Tahoe Room  
Sacramento, CA

**Members Present:**

Robert Gramins, DDS  
Nestor Karas, MD, DDS – Committee Chair  
Anil Punjabi, MD, DDS

**Members Absent:**

Peter Scheer, DDS  
Jonathan Sykes, MD

**Also Present:**

Suzanne McCormick, DDS, Board Liaison to Committee  
Denise Johnson, Assistant Executive Officer  
Karen Fischer, EFCS Program Coordinator  
Sarah Wallace, Dental Board Regulatory & Legislative Analyst  
Kristy Shellans, DCA Legal Counsel  
Justin Paddock, DCA Regulatory & Legislative Analyst

Dr. Karas, Committee Chair, called the roll and established a quorum.

**Agenda Item 1 – Election of Committee Chair**

Dr. Karas called for nominations for a new Committee chair who will preside for a two year term beginning at the next Committee meeting. M/S/C (Gramins/Karas) to nominate Dr. Robert Gramins. There were no other nominations. The Committee voted unanimously to elect Dr. Robert Gramins as Chair of the Committee. There was no public comment.

**Agenda Item 2 – Approval of November 3, 2009 Minutes**

M/S/C (Gramins/Karas) to approve the Committee minutes of the November 3, 2009 meeting. The Committee voted unanimously to accept the minutes as presented. There was no public comment.

**Agenda Item 3 – Report of Board Activities and Priorities for 2011**

Dr. Suzanne McCormick, Board Liaison brought greetings to the Committee from Board President Dr. John Bettinger and all Board members, and thanked Committee members for serving. She reported that during the last year, the Board's main focus has been on enforcement issues and preparation for Sunset Review, which began October 1, 2010 when staff submitted a report to the Senate Business, Professions, & Economic Development Committee. She explained the Sunset Review process and reported that the first Legislative Committee hearing is scheduled for March 14, 2011.

Dr. McCormick went on to report that Sarah Wallace had replaced Donna Kantner as the Legislative/Regulatory Analyst for the Board, and that the Board had prioritized the regulatory issues that it would be addressing during the next year. Those issues are (1) the Consumer Protection Enforcement Initiative (CPEI), (2) Portfolio Examination Pathway to licensure, and (3) the Uniform Standards relating to substance abuse.

Sarah Wallace explained the regulatory process and timeframes associated with the development of regulations. Dr. McCormick explained that the Board is unable to set the EFCS Permit regulatory package as a priority in 2011. However, Kristy Shellans, legal counsel advised the Committee members that they should continue deliberations of the proposed regulatory language in order to demonstrate the necessity of clarification of the statute in order to build a record for the rule-making file.

Dr. McCormick reported that the Board is continuing to monitor a pilot project of the Office of Statewide Health Planning and Development (OSHPD) which would expand the scope of duties for allied health professionals in community settings.

**Agenda Item 4 – Review the Elective Facial Cosmetic Surgery (EFCS) Permit Application Process and Discuss Possible Recommendations for Changes**

Karen Fischer, Program Coordinator, reported that the proposed regulatory language with the revisions discussed at the November 2009 Committee meeting were included in the packet. She suggested that the Committee consider discussing and clarifying additional areas of the application process. Dr. Karas, Committee Chair, emphasized that the basic requirements need to be specific and precise.

**OPERATIVE REPORTS:** (1) Applicants have submitted operative reports that are illegible, too light to read or reproduce. The Committee agreed that the applicant is responsible for submitting reports that are legible. The application is incomplete if operative reports are not legible. Staff will develop language to put on the website to indicate that submitting operative reports that are clear and easily reproducible will ensure the application process is not delayed.

(2) Operative reports do not indicate a facility name and/or location. The Committee agreed that if an operative report lacks identification, such as name and address of the facility, it may be a surgicenter (office) and documentation of accreditation, as listed in statute, will be required.

(3) Operative reports do not identify the applicant as either primary surgeon or first assistant. The Committee agreed that at least ten (10) operative reports should identify the applicant as either the primary surgeon or the first assistant. Additional operative reports, up to 30, may submitted identifying the applicant as second or third assistant.

(4) Operative reports are not organized by category (Category I: Osteocartilaginous or Category II: Soft Tissue). The Committee suggested including a blank index on the website, and language to be developed to encourage applicants to organize the operative reports by category by completing and submitting a list or index of operative reports as part of the application. An operative report can reference procedures from both Category I and Category II, however, the report still only counts as one of the ten minimum reports required.

**APPLICATION:** The Committee discussed including a checklist as part of the application process. Staff has utilized a checklist for in-house verification that applicants have completed the application requirements. This checklist could be offered to applicants to assist in completing the application process.

Dr. McCormick confirmed with legal counsel that many of the suggested changes relating to clarification of the application process might be addressed on the Board's website until these changes can be developed into regulatory language. Legal counsel agreed that these changes could not be mandatory at this time, but rather that staff could develop language to encourage applicants to submit clear, legible, and indexed operative reports, and a checklist to ensure the application process would not be delayed.

Dr. Punjabi requested that the Committee review the suggested language for the website and the changes to the draft proposed regulatory language at the next Committee meeting.

**RENEWAL OF PERMIT AT SIX YEARS:** Regarding the statutory requirement for a permit holder to submit evidence of continuing competence every six years upon renewal of the EFCS permit, the Committee concluded that the requirements for renewal at six years would be (1) certification that the permit holder is on active status on the staff of a general acute care hospital or licensed outpatient surgical facility in California and maintains the necessary privileges based on the bylaws of the hospital to maintain that status, (2) proof of malpractice insurance for specific privileges of the permit, (3) continued Board certification (If the permit holder qualified for the permit through pathway B, this is not a requirement.), and (4) documentation of continued accreditation of the surgical center where procedures are being performed. M/S/C (Karas/Gramins) to draft these requirements into the proposed regulatory language. The motion passed unanimously.

**ADDITIONAL ITEMS DISCUSSED:** The Committee had asked legal counsel to clarify if a permit holder could upgrade a limited permit and if so, what would be the procedure.

Kristy Shellans', Legal Counsel, opinion is that statute doesn't address upgrading an EFCS permit. She suggested that the permit holder will need to re-apply for the permit, submitting another application and fee along with the documentation for the additional privileges. The Committee discussed that the current application could be revised to include the question as to whether or not the applicant has a current permit. Staff would review the file to see whether or not other documentation would need to be updated (e.g. hospital privileges). The Committee would review the application to upgrade and if approved, the prior permit number would be cancelled and a new permit number would be issued.

The Committee would like to encourage a permit holder to re-apply any time to upgrade the permit. The Committee agreed that the evaluation process would be expedited.

Dr. McCormick pointed out that the term "Cancelled" license has been an issue with the Board. There is a public perception that a cancelled license has negative connotations.

Dr. Karas suggested that the website be revised to include another category, following "Renewing Your Permit" which would explain how a permit holder with a limited permit can upgrade his/her permit for additional privileges at any time. He requested that staff draft language to be posted on the website and to revise the current application to include a box that indicates the permit holder's current Elective Facial Cosmetic Surgery Permit number.

#### **Agenda Item 5 – Future Meeting Dates**

The Committee reviewed the Board meeting dates that were provided in the packet and scheduled meetings for Wednesday, April 27, 2011 in Southern California; and Wednesday, July 13, 2011 in Sacramento. Dr. McCormick asked that the Committee consider teleconferencing. The members agreed that teleconferencing is a good idea. There was no public comment.

**CLOSED SESSION - Consideration of Elective Facial Cosmetic Surgery Permit Applications.** CLOSED SESSION began at 3:30 pm. Open Session resumed 4:00 pm.

**Recommendations to Dental Board regarding Elective Facial Cosmetic Surgery Permit Applications**

Dr. Karas reported that the Credentialing Committee reviewed three (3) permit applications.

Applicant Dr. JB: The Committee unanimously agreed to recommend to the Board that this applicant is ineligible for an EFCS permit because he does not meet the criteria specified under Business & Professions Code, Section 1638.1. This applicant holds a license issued by the Medical Board, not the Dental Board.

Applicant Dr. JPD: The Committee unanimously agreed to recommend to the Board that this application be deferred for review pending further documentation by the applicant.

Applicant Dr. EF: The Committee unanimously agreed to recommend to the Board that this application be approved for unlimited privileges in both Category I and Category II as requested in the application.

**Public Comment**

There was no public comment.

**Adjournment**

The meeting adjourned at 4:05 p.m.