



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

**Wednesday, January 18, 2012  
Dental Board of California  
333 S. Anita Drive, Suite 930  
Orange, CA 92868  
(916) 263-2300**

**Members Present:**

Robert Gramins, DDS – Chair  
Anil Punjabi, MD, DDS  
Peter Scheer, DDS  
Brian Wong, MD

**Members Absent:**

Louis Gallia, DMD, MD

**Also Present:**

Suzanne McCormick, DDS, Board Liaison to Committee  
Nellie Forgét, EFCS Program Coordinator  
Kristy Shellans, DCA Legal Counsel  
Karen Fischer, Associate Analyst

**Dental Board of California Office:**

2005 Evergreen Street, Ste 1550 - Conference Room  
Sacramento, CA 95815  
(916) 263-2300

**Due to cancelled flights staff teleconferenced in from the Sacramento Office. Please note that this was not an official teleconference.**

Dr. Robert Gramins, Committee Chair, called the roll by meeting location and established a quorum at 2:12 p.m. No public was in attendance.

**AGENDA ITEM 1 – Introduction of New Committee Member**

Dr. Suzanne McCormick, Board Liaison, administered the Oath of Office to Dr. Brian Wong.

Mrs. Karen Fischer, Special Assistant to the Executive Officer, announced that Dr. Bruce Whitcher is the new EFCS Board Liaison and Dr. Suzanne McCormick, Board Liaison, will be resigning. Mrs. Fischer and the Committee thanked Dr. McCormick for her service.

**AGENDA ITEM 2 - Approval of October 12, 2011 Meeting Minutes**

M/S/C (Scheer/Punjabi) to accept the minutes of the October 12, 2011 meeting with corrections to the other teleconference location phone numbers. By roll call vote, the motion passed with three (3) in favor and one abstention (Wong). Mrs. Fischer pointed out the future meeting dates on page two of the minutes for those who were inquiring. Kristy Shellans, Legal Counsel, noted that at the last meeting it was decided that the rest of the meetings will be teleconference.

**AGENDA ITEM 3 – Overview of the Business and Professions code section 1638.1 relating to the EFCS Permit Application Process**

Mrs. Nellie Forgét, Program Coordinator, reviewed the application process for the new committee members. She described the pathway checklist which outlines the pathway the applicant decides to take and is also used to keep track of the items the applicant has submitted. Mrs. Forgét explained the applicant's choice of applying for Category A and/or Category B with limited or unlimited privileges and the requirement of 10 operative reports from the category(ies) applying. Once applications are reviewed by the Committee, recommendations are made to the Board. These recommendations include granting an EFCS permit with or without restrictions, tabling an application review pending submission of further documentation, or denying an application.

Mrs. Fischer commented that the Committee packet always includes a copy of the Business & Professions code and because there are no regulations in place, the Committee must follow statute very strictly. Mrs. Forgét pointed out that a sample checklist was in the packet and each item is pulled straight from the code.

Mrs. Fischer described in more detail the two pathways, Pathway A and Pathway B, which an applicant can choose to take. Pathway A is for people coming straight out of training and Pathway B is for people who have been out of training for some time. Both require the applicant to complete a residency program in Oral and Maxillofacial Surgery, submit 10 operative reports, and submits documentation to the board showing the surgical privileges the applicant possesses at any licensed general acute care hospital and any licensed outpatient surgical facility in this state. There are clear differences between pathway A & B. Pathway B does not require the applicant to have a letter from residency chair indicating training and competence has been fulfilled. Dr. Robert Gramins, Committee Chair, stated that via Pathway A, the applicant has been mentored by their residency program director who verifies the applicant's training and experience and Pathway B the applicant is a dentist who has been in practice and whose experience has been verified by the hospital staff that the applicant has applied to get those privileges.

Dr. McCormick clarified the historical perspective of establishing both pathways. She emphasized the most important thing for the Committee to recognize is that there is a licensing process and certain standards that need to be upheld.

Mrs. Fischer presented background information on the Elective Facial Cosmetic Surgery (EFCS) permit. She stated that there are currently 19 permit holders out of over 600 plus oral surgeons in the state. She explained that if someone is a dual degreed oral surgeon and is licensed through the Medical Board they are not eligible for this permit. It is only when someone is an oral surgeon licensed by the Dental Board and has a dental license number that they are eligible for this permit. If someone is licensed by the Medical Board then their scope of practice will be defined by the Medical Board. Mrs. Shellans clarified that the law requires an EFCS permit applicant have a dental license to be eligible to receive the permit.

Due to applications being resubmitted numerous times, Mrs. Shellans addressed the issue of how long an application should stay active before deeming it abandoned. The Dental

Board's abandonment regulation at (Section 1004, title 16, California Code of Regulations) does not address how to deal with an application that is deficient. Her recommendation is to adopt a regulation that would deal with incomplete applications; a proposal to the effect of "an applicant who fails to complete all the requirements within one year after being notified of the deficiencies may be deemed to have abandoned the application and may be required to file a new application." However, she believes that there is a rule of reason with respect to completeness of an application.

In reference to another question from the previous EFCS permit meeting regarding whether candidates should be doing procedures in accredited facilities, Mrs. Shellans referenced Business & Professions code 1638.1 (f) which requires EFCS procedures be performed in an acute care hospital or certified surgery center. Dr. Anil Punjabi, EFCS Committee member, stated that that is a flaw in the law because procedures such as Botox and fillers are never performed in the hospital. Mrs. Fischer referenced statute under Category II procedures, which states "cosmetic soft tissue contouring or rejuvenation, which may include, but is not limited to facelift, blepharoplasty, facial skin resurfacing, or lip augmentation." When this legislation came about, Botox and fillers were likely not being considered but they are still covered under the statute. If someone is permitted in a Category II and has submitted operative reports for facelifts, blepharoplasties or something else then they would also be able to do Botox or fillers even though they did not submit operative reports to do so.

Mrs. Shellans added that for the future regulation changes the Committee will need to consider the section in statute requiring a licensee to submit proctored procedures that are representative of procedures that the licensee intends to perform.

**Agenda Item 4: Discussion of possible action to recommend to the Dental Board the initiation of a rulemaking for the EFCS permit process and the terms of office for Credentialing Committee members**

Mrs. Shellans explained that regulatory language was drafted two years ago and the Committee and staff will once again take a look at these changes. The EFCS Permit Credentialing Committee will develop the initial document and submit it to the Dental Board which will officially start the regulatory process which includes public input.

Mrs. Shellans suggested coming back to the regulation recommendations at the next meeting after our newer committee members, Dr. Louis Gallia and Dr. Brian Wong, have had time to become familiar with the language. Mrs. Shellans suggested the staff tighten the proposed regulatory changes and revise the application and then bring it to the next meeting for review. M/S/C (Punjabi/Scheer) By roll call vote, the motion passed unanimously.

**CLOSED SESSION** – Consideration of Elective Facial Cosmetic Surgery Permit Applications  
Closed Session began at 2:49 p.m. and returned to open session at 3:24 p.m.

**RETURN TO OPEN SESSION - Recommendations to the Dental Board of California Regarding Elective Facial Cosmetic Surgery Permit Applications**

Dr. Gramins reported that the Credentialing Committee reviewed two applications.

Applicant Dr. AA: The Committee unanimously agreed to reject applicant's application because applicant failed to meet the minimum requirements of Business and Professions Code 1638.1 (c)(2)(B)(i): Insufficient documentation that the applicant has been granted privileges by the medical staff at a licensed general acute care hospital to perform the procedures requested in his application. The applicant would be given the opportunity to re-apply.

Applicant Dr. MM: The Committee unanimously agreed to deny Category I (cosmetic contouring of the osteocartilaginous facial structure, which may include, but not limited to, rhinoplasty and otoplasty) privileges, and issue a permit limited to the following Category II (cosmetic soft tissue contouring or rejuvenation, which may include, but not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation) procedures: submental liposuction, Botox and fillers, and chemical peels. Applicant did not submit operative reports that demonstrate training to perform all requested classes of procedures.

**PUBLIC COMMENT**

There was no public comment.

**ADJOURNMENT**

The meeting was adjourned at 3:25 p.m.