

Chairman Cutrona, Vice Chair Gross, Ranking Member Somani and all members of the House Health Provider Services Committee, thank you for the opportunity to speak today regarding my concerns and my opposition to the current version of Senate Bill 40. My name is Dr. Mark Armstrong and I live and practice in Troy, Ohio. I am currently a general dentist in family practice in Troy for the past 34 years, and in Versailles for the past 20 years. I am also the current Chairman of the CDCA-WREB-CITA, an international 3rd party independent dental testing organization that administers dental board exams in every dental school and over 80% of all hygiene schools in the United States. I was a gubernatorial appointment in 2004 and served two consecutive terms on the Ohio State Dental Board before leaving due to term limits. I served on many different committees while on the Board, and also served as Vice Chair in 2007 and 2008, and as Chairman in 2009. When I took the oath of office in 2004, I swore to protect the citizens of Ohio. I have continued to do that since leaving the Board.

The purpose of my testimony is NOT to oppose licensure compacts in general, but to address the critical flaws of this particular compact, that, if enacted as written, would put Ohio citizens at risk. Here are a few examples of cases I adjudicated while on the OSDB.

Dr. Shampaine referred in his testimony to the fact that the Board would have no way to enforce compliance with Ohio's laws about dentists prescribing controlled substances. This is a very serious issue. For example, when I was on the Board, a licensee was charged and disciplined by the Board for giving an underage teenage boy cocaine and having inappropriate sexual contact with him.

In another case, a licensee was charged and disciplined by the Board for standard of care violation for a patient who had teeth extracted, and then bled to death because of inadequate follow-up care.

A third case that was adjudicated while I was on the Board, a licensee was charged and disciplined by the board for standard of care violation for overdosing a 5 year old child on anesthetic. The child subsequently died of the overdose.

If that dentist had been practicing in Ohio under a compact privilege, the Board would have been powerless to address any of the above violations. Had any of these cases happened in another state, the Board may not even be informed that

they had happened for a practitioner coming into the state under SB-40 Compact Privilege.

I am not alone in my concerns. I have spoken with several former members of the Ohio State Dental Board and they agree with the deficiencies of Senate Bill 40. I am happy to provide you with a list of those individuals.

Once again, I want to thank the members of the committee for your time and attention to a critical matter that could change the face of dentistry and lower the standards of dentistry in Ohio.

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