

# **Kansas Administrative Regulations**

## **Kansas Dental Board**

### **Article 8.—Mobile Dental Facilities and Portable Dental Operations**

#### **71-8-5. Written procedures; communication facilities; conformity with requirements; driver requirements; consent forms; follow-up treatment.**

Each operator of a mobile dental facility or portable dental operation shall ensure that the following conditions and requirements are met:

(a) A written procedure for emergency follow-up care is used for patients treated in the mobile dental facility or portable dental operation, and the procedure includes arrangements for treatment in a health care facility that is permanently established in the area where services were provided.

(b) The mobile dental facility or portable dental operation has communication facilities that will enable the operator to contact necessary parties if a medical or dental emergency occurs. The communications facilities shall enable the patient or the parent or guardian of the patient treated to contact the operator for emergency care, follow-up care, or information about treatment received. The health care provider who renders follow-up care shall also be able to contact the operator and receive treatment information, including radiographs when taken.

(c) The mobile dental facility or portable dental operation and the dental procedures performed meet the requirements of K.A.R. 71-1-18.

(d) The driver of the mobile dental facility or portable dental operation possesses a valid driver's license appropriate for the operation of the vehicle.

(e) No services are performed on minors or individuals for whom a guardian has been established without a signed consent form signed by the parent or guardian that includes the following:

(1) An authorization for the treatment to be provided;

(2) an acknowledgement by the parent or guardian that the treatment of the patient at the mobile dental facility or portable dental operation could affect the future benefits that the patient could receive under any of the following:

(A) Private insurance;

(B) medicaid; or

(C) a children's health insurance program; and

(3) an acknowledgement by the parent or guardian that the parent or guardian has been advised to arrange for continued dental care for the patient.

(f) If the mobile dental facility or portable dental operation accepts any patients and provides preventive treatment, including prophylaxis, radiographs, and fluoride, the operator offers follow-up treatment when this treatment is indicated.

(Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

\*\*\*\*\* Authenticated Kansas Administrative Regulation \*\*\*\*\*