

ALASKA LEGISLATURE COMMITTEE FILES, 1989-1990 8672

6390 SENATE LABOR & COMMERCE

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military and
public health
} applies
Senate
Bill 126

The fifth routine use will permit disclosure to any Federal entity, employing a health care practitioner or having the authority to sanction such practitioners covered by a Federal program, which (1) enters into a memorandum of agreement with HHS, (2) conducts a formal professional review process in determining an adverse action against a practitioner, and (3) maintains a Privacy Act system of records regarding information collected on the health care practitioners it employs. The purpose of the disclosures is to further the quality of the health care provided by these entities.

These Federal entities include the Department of Defense and the Veterans Administration which will contribute data to and withdraw data from the system. They will request data on their staff every two years and also will check with the system on a practitioner prior to reaching a medical staff or clinical privileging affiliation agreement with the individual.

The sixth routine use provides for disclosure to the Department of Justice should HRSA or the Department become the defendant in a litigation.

G. Supporting Documentation

1. Preamble and system notice: Advance copies of the preamble and proposed system notice are attached.
2. Agency rules: No change to existing Department Privacy Act regulations are necessary.
3. Exemptions requested: No exemptions from provisions of subsection (j) or (k) of the Privacy Act are required.
4. Computer Matching Report: This new system notice will not involve any computer matching program; therefore, no public notice of computer matching has been prepared.

ADA Policies

Licensure

Single State Board of Dentistry (1985:597)

Resolved, that the American Dental Association, in the interest of the dental health of the public, support a single state board of dentistry in each state, as the sole licensing and regulating authority for the delivery of all dental care.

Policy on Licensure of Graduates of Non-accredited Dental Schools (1984:539)

The United States has a long and proud tradition of affording opportunities to immigrants. The American Dental Association fully supports application of this principle in dentistry; but not at the expense of the standards of dental practice in this country. State licensure is a critical element in preserving that standard of practice and for the protection of the citizens of the state.

Although licensing provisions vary among U.S. licensing jurisdictions, all jurisdictions have the same three types of requirements: an educational requirement, a written examination requirement and a clinical examination requirement. The traditional educational requirement is graduation from an accredited dental school. Only dental schools in the United States and Canada are recognized as accredited. Extending accreditation in schools in other countries is not feasible.

In the absence of accreditation, an educational requirement for dental licensure has limited significance. The Association questions whether written and clinical examinations alone provide sufficient verification of competence to serve the purpose of licensure. Thus, the Association urges jurisdictions to require any graduate of a non-accredited school to obtain supplementary education in an accredited school prior to licensure. The amount of additional training needed by graduates of non-accredited schools may vary. While some flexibility is needed, the licensure process requires well-defined minimum standards. Recommended minimum educational standards for licensure of a graduate of a non-accredited school are:

1. Completion of a supplementary predoctoral education program in an accredited dental school. A supplementary education program of at least two academic years is required.
2. Certification by the dean of the accredited dental school that the candidate has achieved the same level of didactic and clinical competence as expected of a graduate of the school.

Dental Hygiene Requirements (1977:926)

Resolved, that graduation from a dental hygiene program or the successful completion by dental students of an equivalent component of a dental school curriculum, accredited by the Commission on Accreditation of Dental

and Dental Auxiliary Educational Programs, is the essential educational eligibility requirements for dental hygiene licensure examination, and practice, and be it further Resolved, that the American Dental Association supports only those efforts to qualify individuals to perform dental hygiene functions who have completed an accredited dental hygiene program or an equivalent component of the dental curriculum.

Licensure of Specialists by Credentials (1976:921)

Resolved, that each constituent society, in consultation with its state board of dentistry, be urged to develop mechanisms of licensure by credentials for dental specialist.

} applies to Special Bill 126

Active and Inactive Licenses (1976:921)

Resolved, that each constituent society, in consultation with its state board of dentistry, be urged to develop a mechanism for issuing active and inactive licenses to enhance public protection.

Enforcement of State Dental Practice Acts (1976:921)

Resolved, that each constituent society, in consultation with its state board of dentistry, be urged to study the need for greater state support for enforcement of the state dental practice act, and be it further Resolved, that, if need is established, the constituent society, in consultation with its state board of dentistry, consider developing mechanisms to obtain additional state support for enforcement of the state dental practice act in the public interest.

Relicensure by Credentials (1976:921)

Resolved, that each constituent society, in consultation with its state board of dentistry, study mechanisms of licensure by credentials that have the potential for use as relicensure standards.

Guidelines for Licensure (1976:919; 1977:923)

Dental licensure is intended to insure that only qualified individuals provide dental treatment to the public. Among qualifications deemed essential are satisfactory theoretical knowledge of basic biomedical and dental sciences and satisfactory clinical skill. It is essential that each candidate for an initial license be required to demonstrate these attributes on examination, a written examination for

theoretical knowledge and a clinical examination for clinical skill. These guidelines suggest alternate mechanisms for evaluating the theoretical knowledge and clinical skill of an applicant for licensure who holds a dental license in another jurisdiction. Requiring a candidate who is seeking licensure in several jurisdictions to demonstrate his theoretical knowledge and clinical skill on separate examinations for each jurisdiction seems unnecessary duplication.

Licensure by Examination: Written examination programs conducted by the Council of National Board of Dental Examiners have achieved broad recognition by state boards of dentistry. National Board dental examinations are conducted in two parts. Part I covers basic biomedical sciences; Part II covers dental sciences. It is recommended that satisfactory performance on Part II of National Board dental examinations within five years prior to applying for a state dental license be considered adequate testing of theoretical knowledge. National Board regulations require a candidate to pass Part I before participating in Part II. Consequently, this recommendation excludes Part I only from the time limit.

No clinical examination has achieved as broad recognition as have National Board written examinations. Clinical examinations used for dental licensure are conducted by individual state boards of dentistry and by regional clinical testing services. It is recommended that satisfactory performance within the last five years on any state or regional clinical examination at least equivalent in quality and difficulty to the state's own clinical examination be considered adequate testing for clinical skill provided that the candidate for licensure:

- a. Is currently licensed in another jurisdiction.
- b. Has been in practice since being examined.
- c. Is endorsed by the state board of dentistry in the state of his current practice.
- d. Has not been the subject of final or pending disciplinary action in any state in which he is or has been licensed.
- e. Has not failed the clinical examination of the state to which he is applying within the last three years.

Licensure by Credentials: The American Dental Association believes that an evaluation of a practicing dentist's theoretical knowledge and clinical skill based on his performance record can provide as much protection to the public as would an evaluation based on examination. Issuing a license using a performance record in place of examinations is termed licensure by credentials.

All candidates for licensure by credentials might be required to fulfill basic education and practice requirements. It is recommended that graduation from a dental school accredited by the Commission on Accreditation of Dental and Dental Auxiliary Educational Programs be considered minimum satisfactory education for licensure by credentials. Further, it is recommended that licensure by credentials be available only to a candidate who:

- a. Is currently licensed in another jurisdiction.
- b. Has been in practice or full-time dental education for a minimum of five years immediately prior to applying.

- c. Is endorsed by the state board of dentistry in the state of current practice.
- d. Has not been the subject of final or pending disciplinary action in any state in which he is or has been licensed.
- e. Has not failed the clinical examination of the state to which he is applying within the last three years.

Alternate ways that current theoretical knowledge might be documented follow. It is recommended that for a candidate who meets eligibility requirements for licensure by credentials, these methods be considered as possible alternatives to the written examination requirement.

- 1. Successful completion of an accredited advanced dental education program in the last ten years.
- 2. A total of at least 180 hours of acceptable, formal, scientific continuing education in the last ten years, with a maximum credit of 60 hours for each two-year period.
- 3. Successful completion of a recognized specialty board examination in the last ten years.
- 4. Teaching experience of at least one day per week or its equivalent in an accredited dental education program for at least six of the last ten years.

Possible documentation for current clinical skill appears in the following list. Provided that eligibility requirements for licensure by credentials are met, it is recommended that these methods be considered as possible alternatives to satisfactory performance on a clinical examination.

- 1. Successful completion of an accredited general practice residency or dental internship within the last ten years.
- 2. Successful completion of an accredited dental specialty education program in a clinical discipline within the last ten years.
- 3. A total of at least 180 hours of acceptable clinically oriented continuing education in the last ten years, with a maximum credit of 60 hours for each two-year period.
- 4. Clinical teaching of at least one day per week or its equivalent in an accredited dental education program, including a hospital-based advanced dental education program for at least six of the last ten years.
- 5. Presenting case histories of patients treated by the candidate in the last five years, with preoperative and postoperative radiographs, covering procedures required on the state clinical examination, for discussion with the state board.

Content of State Licensure Applications (1976:916)

Resolved, that the American Dental Association requests each state board of dentistry to review its application for licensure to insure that only data related to the individual's qualifications to provide dental treatment are required. However, this is not intended to exclude customary inquiries into the applicant's moral character, being found guilty of a felony, or having violated the dental practice act of another jurisdiction.

Applies to Senate Bill 126

Applies to Senate Bill 126



Purpose of Licensure (1976:915)

Resolved, that the American Dental Association believes licensure to be solely for the protection of the public.

Position Statement on Federal Intervention in Licensure (1975:187, 718)

The American Dental Association has repeatedly recorded its support for the principle of dental licensure at the individual state level and its opposition for placing this important function under federal control. The purpose of this statement is to identify the reasons underlying the Association's position.

A basic premise of the Association's position is that American dentistry has reached a level of quality and availability not matched elsewhere in the world. The system of state licensure has been an important factor in dentistry's development. Therefore, the Association would oppose replacement of the state licensure system. In the opinion of the Association, federal control of dental licensure would not only fail to solve existing problems involving delivery of dental care to the public, but also could be expected to create new problems.

Maldistribution: One of the most widely recognized and most complex problems facing dentistry involves the distribution of dentists throughout the country. Typically, inner city and rural areas have difficulty attracting dentists. Some proponents of abandoning the state licensure system believe that federal licensure would help alleviate the distribution problem. Presumably, federal licensure would eliminate red tape for dentists moving from one state to another. Then, underserved areas might be able to attract dentists from other states.

Although the Association recognizes the maldistribution problem, it does not believe federal licensure to be a potential solution. A review of dentist-population ratios by county and state indicates greater variance within states than among states. Currently, nothing impedes a dentist licensed in a state from moving to an underserved area in the same state. Since this has not occurred, it is doubtful that dentists from other states would flock to these underserved areas.

Mobility of Dentists: Even though not important as a solution to maldistribution of dentists, the Association is committed to seeking a mechanism that would allow competent practitioners to relocate in a different state with a minimum of inconvenience. This goal is not incompatible with the system of state licensure. Licensing a dentist licensed in another state on the basis of his credentials meeting specific professional criteria is one mechanism currently being vigorously pursued. In considering various alternatives, however, the Association has maintained the position that each state should retain sufficient safeguards to ensure that any dentist granted a license in the state is competent to serve the people of the state. Any lesser condition would fail to provide adequate public protection.

Experimentation: The current state-based licensure system is composed of 53 jurisdictions, each attempting to develop

the most effective system possible for regulating the practice of dentistry. When new systems or regulations are proposed, initial evaluation must, of necessity, be based on supposition. Because hard evidence about new proposals is seldom available, new proposals usually evoke mixed reactions. Although few new ideas gain majority approval quickly on a national level, many are approved by one or more states. Experience of these states forms a basis for other states to make a higher quality decision about the proposal within a relatively short time. In a sense, a few states provide a controlled experiment for the majority. Examples of this process can be found in acceptance of National Board scores, development of the concept of licensure by credentials, growth of regional clinical testing services and assignment of duties to dental auxiliary personnel.

Influence on the Dental Curriculum: Dental schools have a responsibility to graduate individuals capable of practicing dentistry. Since meeting licensure requirements is a prerequisite to practice, dental schools also prepare students to pass licensure examinations. Consequently, the agency that establishes licensure standards can have an influence over dental curriculums. Under the state licensure system this influence is shared among 53 jurisdictions, and thus moderated. With a single federal agency setting standards, the influence of licensure examinations might become excessive and virtually dictate the content and emphasis for all dental curriculums. This centralization would tend to make a static situation which would inhibit evolution and change. Also, the cooperation that has developed among educators, examiners and the practicing profession at the state level has been effective in dealing with the relationship between licensure requirements and the dental curriculum. The same degree of cooperation could not be expected at the federal level.

Enforcement: Licensure involves more than issuing licenses to candidates who qualify. Regulatory agencies also must ensure that licensed dentists maintain competence and practice in accordance with the law. It is in this policing function that federal licensure seems most inadequate. To be most effective, regulatory responsibility should be placed at the lowest level of government capable of performing the functions—in this instance, the state, through its board of dentistry.

Summary: For the reasons cited, the American Dental Association strongly opposes federal licensure and federal intervention in the state licensing system.

Licensure by Credentials (1975:715)

Resolved, that the American Dental Association, through its constituent societies, strongly encourages state boards of dentistry to establish criteria by which dentists could be licensed by credentials to permit the freedom of interstate movement while retaining those controls necessary to fulfill the public responsibilities of the respective state boards.

Licensure of Dental Hygienists (1973:725)

Resolved, that state licensure of dental hygienists continue to be part of the dental profession's responsibility for insuring high quality dental care for the public, and be it further

Resolved, that legal provisions for the practice of dental hygiene continue to support the principle that the hygienist functions under the direction and supervision of a licensed dentist rather than independently, and be it further

Resolved, that state boards of dentistry are the appropriate agencies to issue licenses and regulate the practice of dental hygiene.

Licensure Recommendations of Special Committee (1973:712)

Resolved, that all recommendations of the Report of the Special Committee to Study Dental Licensing Procedures of the American Dental Association that are adopted by the House of Delegates of the American Dental Association be adopted with the knowledge, understanding and agreement that they be adopted as guidelines for each individual state and are to be implemented at the discretion of each constituent society and state board of dental examiners.

The following recommendations of the Special Committee of the Association to Study Dental Licensing Procedures were approved by the House of Delegates (1973:712):

Recommendation 1: That each state continue to require of all candidates for licensure satisfactory performance on a written examination, either state or National Board.

Recommendation 2: That each state accept satisfactory performance on National Board examinations as fulfilling or partially fulfilling its requirement of satisfactory performance on a written examination for licensure.

Recommendation 3: That states consider including in their practice acts provision for waiving the written examination requirement for candidates who are licensed in another state and who have passed a comparable written examination in that state.

Recommendation 4: That each state continue to require of all unlicensed candidates for licensure satisfactory performance on an individual state clinical examination or a clinical examination conducted by a regional testing service of the dental profession.

Recommendation 6: That states consider including in their practice acts provision for waiving the clinical examination requirement, or portion thereof, for candidates who are licensed in another state and who have passed a clinical examination in that state.

Recommendation 7: That each state consider active participation in the development of regional clinical examinations, if none now exist in the region.

Recommendation 8: That the American Association of Dental Examiners proceed promptly with activating its Dental Examiners National Testing Service (DENTS) to assist in the research, development, coordination and administrative management of state and regional clinical examinations.

Recommendation 9: That DENTS in cooperation with dental education and the practicing profession be urged to place high priority on developing suggested content and performance standards for clinical licensure examinations.

Recommendation 10: That the American Dental Association support the principle of regional clinical examinations and DENTS as mechanisms for achieving uniformly high standards in clinical evaluation.

Recommendation 11: That each state consider requiring dentists to show evidence of continuing education as a condition for re-registration of their licenses.

Recommendation 12: That states consider including in their practice acts provision to require for licensure maintenance proof of remedial study for those dentists identified through properly constituted peer review mechanisms as being severely deficient.

Recommendation 13: That state dental associations, state boards of dentistry and dental schools work in close cooperation to provide supplemental clinical education opportunities for those dentists who lack clinical proficiency but are otherwise eligible for dental license.

Recommendation 16: That the American Dental Association favors reciprocal agreements for licensed dentists who meet specific professional criteria which have been established by individual state boards of dentistry to insure the protection of the public.

Recommendation 18: That each state cooperate with the American Association of Dental Examiners in its project of developing model criteria for licensure by credentials.

Recommendation 19: That the American Dental Association continue to support the principle of dental licensure at the individual state level and to oppose any activity which would place this important function under federal regulation.

Recommendation 20: That a survey of attitudes on dental licensing procedures be repeated in three to five years to determine whether actual changes in attitudes on licensing procedures are occurring.

Recommendation 21: That a nine-member Special Committee of the Association to Study Dental Licensing Procedures be appointed by the Board of Trustees to continue for one year the study of licensing matters and the need for a Council on Dental Licensure, and that membership on the Special Committee be equally divided among representatives of the American Association of Dental Examiners, American Association of Dental Schools and American Dental Association.

Criteria Approval Provisions for Licensure (1971:531)

Resolved, that the American Association of Dental Examiners be urged to develop criteria approval provisions for licensure which could be adopted by individual state boards of dentistry.

Dental Society Consultation Regarding Licensure (1968:250)

Resolved, that constituent dental societies be urged to consult with state boards of dentistry to give continuing consideration to methods of determining the qualifications of candidates for licensure.

Regulation of Dental Licensure (1968:248)

Resolved, that the principle of dental licensure at the individual state level be affirmed and that any proposal

which would place this important state function under federal regulation be opposed.

Licensing of Dental Hygienists (1959:248)

Resolved, that the state boards of dental examiners and the American Association of Dental Examiners be requested to give consideration to the profession's need for dental hygienists and encouraged to develop mechanisms under which hygienists licensed in one state may be examined for practice by another state in which they may now reside, with previous education, licensure and experience used as a substitute for current requirements.

Government awards contract on national data bank

Washington—Unisys Corp, an experienced government contractor, outbid three competitors for a 5-year, \$15.9 million contract to operate the first national data bank on disciplinary and malpractice actions against physicians and dentists.

The data bank is expected to begin

operations this summer. It will collect and disseminate information on adverse actions involving at first only dentists and physicians. Eventually it will gather information on other health workers as well, including dental hygienists, laboratory technicians, and other dental-related workers licensed,

certified, or registered by states.

Officials of Unisys Corp, an information systems company headquartered in Blue Bell, PA, with offices in and around the District of Columbia, were taking a low profile on the Dec 30 government announcement, referring questions about the contract

to the Department of Health and Human Services (HHS), which awarded it. The other bidders were not identified.

The American Medical Association, which earlier had been interested in operating the data bank, also declined comment.

Continued on page nine

New TV spot offers message on gum disease

Chicago—A public service announcement (PSA) urging TV viewers to "start fighting gum disease now" and see their dentist regularly will begin airing on network television later this month as part of a major public education campaign sponsored by Crest in cooperation with the

ADA



dental health brochure, available only through Association

Scenes from the

Court OKs ADA appearance in amalgam case

Hartford, CT—A federal district court here has granted permission for the ADA to appear as a friend of the court (*amicus curiae*) in a case now pending against a metals recycler and four dental supply houses charged with wrongful disposal of scrap amalgam.

W E A S H I N G T O N

Data bank

Continued from page one

The AMA did not bid on the contract awarded to Unisys.

When the data bank is up and running it will collect information on the following:

- all payments made on behalf of any licensed health care provider as a result of a malpractice claim or settlement;
- licensure disciplinary actions taken by state medical and dental boards;
- professional review actions by health care entities (such as hospitals and health maintenance organizations) with peer review procedures that adversely affect clinical privileges of dentists or physicians for more than 30 days and are based on professional competence or conduct;
- adverse actions taken by professional societies against the membership of a physician or dentist following formal peer review of professional competence or conduct.

These actions must be reported to the data bank after it becomes operational. Malpractice liability insurance companies also will be required to report any payments made on behalf of physicians and dentists to settle legal claims. No retroactive reporting will be required, HHS officials said.

Hospitals will be required to consult the data bank when a dentist or physician seeks staff privileges. Hospitals also must check with the data bank every 2 years concerning physicians and dentists with staff or clinical privileges.

Plaintiff's attorneys may obtain information from the bank under certain conditions. Strict confidentiality requirements will be spelled out in government regulations yet to be issued.

The data bank was authorized in the 1986 Health Care Quality Improvement Act under Public Law 99-660 and was supposed to be operating by Nov 14, 1987. Political and financial difficulties blocked the project until the fiscal year 1989 HHS appropriation included nearly \$3 million in startup funds.

"The data bank will be operated as a partnership between the public and private sectors," said HHS Secretary Otis Bowen, MD. "Its success will require the continuing good will and best efforts of all of us interested in the well-being of our nation's health care system."

The government's work plan for the data bank requires the contractor to operate it in consultation with dentistry and other health professions through an executive committee whose members include representatives of the ADA and American Association of Dental Examiners. Both organizations have agreed to serve on the committee, which will hold its first meeting in February, according to an HHS official.

Dr. William E. Allen, associate executive director, will represent the ADA for a term from Dec 1, 1988, to Nov 30, 1992. The AADE representative will serve a 2-year term. Initial committee members will serve staggered terms of 1 to 4 years.

"As a private practitioner for over 35 years," said Dr. Allen, "I am especially pleased to assist in the development of a national program intended to benefit both the public and the dental profession."

"I wish to emphasize," he continued, "that every effort will be made to assure the integrity of the program and to protect the rights of those health professionals subject to the reporting requirements of the data bank."

The committee will review and comment

on design and operation of the data bank and advise the contractor on such issues as data confidentiality, security, and fees.

Dr. Bowen and sponsors of the 1986 legislation creating the data bank said it would be important in assuring that information on adverse actions against health professionals follows them when they relocate practices to other states and jurisdictions.

He said other federal agencies were taking steps to comply with the bank's reporting requirements including the US Public Health Service, Department of Defense and Drug Enforcement Administration, which are committed to participating, and the Veterans Administration, which "is considering how it may participate."

—Craig Palmer

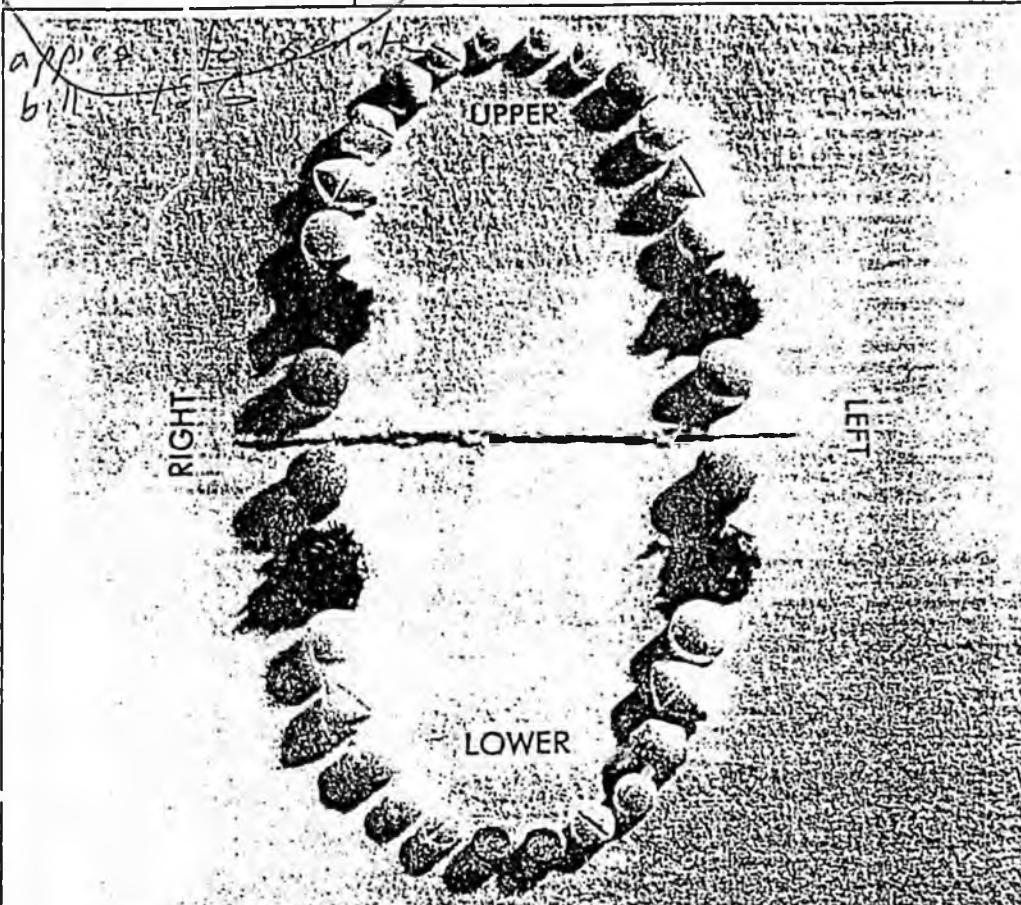
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Partnership for a Drug-Free America

This public service message is approved by the Advisory Commission on Children and Drug Abuse, Commission on Drug Abuse, American Dental Association.

HHS NEWS

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOR IMMEDIATE RELEASE

Friday, December 30, 1988

Public Health Service

Frank Sis (301) 443-3377

HHS Secretary Otis R. Bowen, M.D., today announced the award of a \$15.9 million ⁵⁴ contract to establish and operate a National Practitioner Data Bank intended to lessen the possibility that incompetent physicians and dentists may move their practices from state to state without detection.

The five-year contract was awarded to UNISYS, an information systems company with corporate headquarters in Blue Bell, Pa. Fiscal year 1989 funding amounts to \$3 million. The data bank is expected to become operational in the summer of 1989.

"The data bank will be operated as a partnership between the public and private sectors," Secretary Bowen said. "Its success will require the continuing good will and best efforts of all of us interested in the well-being of our nation's health care system."

The data bank was authorized by the Health Care Quality Improvement Act of 1986 to restrict the ability of physicians and dentists to move their practices from one state to another with little likelihood of discovery of previous substandard professional performance. The act also encourages peer review by providing immunity from private antitrust suits to health care entities that conduct professional peer review with due process and in good faith in the furtherance of quality patient care.

(MORE)

The data bank will collect information concerning:

- All payments made on behalf of any licensed health care provider as a result of a malpractice claim or settlement;
- Licensure disciplinary actions taken by state medical and dental boards;
- Professional review actions by health care entities with peer review processes, such as hospitals or health maintenance organizations, which adversely affect the clinical privileges of a physician or dentist for more than 30 days and which are based on a review of the practitioner's professional competence or conduct; and
- Adverse actions taken by professional societies against the membership of a physician or dentist following formal peer review of the practitioner's professional competence or conduct.

Reports will be required only after the data bank becomes operational next summer. There will be no retroactive reporting.

Hospitals will be required to consult the data bank when a physician or dentist seeks to join the staff or receive clinical privileges. Hospitals also must consult the data bank every two years concerning physicians and dentists who are on their medical staff or have clinical privileges.

Health care entities, such as group medical and dental practices, may consult the data bank when a physician or dentist applies for clinical privileges or appointment to the staff. State licensing boards may consult the data bank. Individual physicians or dentists may consult the data bank about their own records. A plaintiff's attorney may access the data bank under certain conditions.

*applies
to senate
bill 126*

(MORE)

In operating the data bank, the contractor will be guided by an executive committee composed of representatives of the federal health care system and various professional organizations.

Proposed rules for the operation of the data bank were published in the Federal Register on March 21, 1988. Final rules are expected to be published in the near future.

The data bank also will include, at future date, the additional functions mandated by section 5 of the Medicare and Medicaid Patient and Program Protection Act of 1987. That section will require states to report adverse licensing actions taken against a broad range of health care practitioners.

The federal government ^{military & public health} is taking steps to comply fully with the reporting requirements of the data bank," Secretary Bowen noted. "The Public Health Service, the Department of Defense and the Drug Enforcement Administration are formally committed to participating, and the Veterans Administration is considering how it may participate."

} applies to Senate Bill 126

In addition to establishing the data bank, Secretary Bowen earlier established a special Task Force on Medical Liability and Malpractice, which studied the full range of malpractice-related issues and released its report and recommendations last year. As recommended by the task force, HHS and the Department of Justice also developed model legislation to help states in reforming malpractice laws, and HHS specialists have assisted individual states in their reform efforts.

The contract announced today will be monitored by the Office of Quality Assurance in the Bureau of Health Professions. The bureau is part of the Health Resources and Services Administration, an agency of the Public Health Service.



Washington—On a scale of one to ten, you'd have to give it an eleven.

The ADA/FDI (Federation Dentaire Internationale) Joint 1988 World Dental Congress was the largest dental exhibition ever held in North America. The "super-meeting" was attended by more than 30,000 dentists, dental assistants, dental hygienists, dental laboratory technicians, students, spouses, guests, exhibitors, dealers, and buyers from around the globe.

The Oct 8-14 meeting, the first joint convocation held by the ADA and the FDI

International exhibit billed 'biggest ever' on continent

More than 30,000 go to Washington

Exhibit photos, page five

since 1975, also can boast to have been the largest convention ever held in the nation's capital. The ADA, however, is no stranger to Washington, DC—it held annual sessions here five other times—in 1912 (National Dental Association), 1929, 1951, 1967, and 1974.

A total of 9,904 ADA member dentists attended the joint congress, and welcomed foreign dental personnel, spouses, and guests to the United States. Some 1,875 FDI

supporting members, 176 ADA affiliate members, and 251 ADA affiliate-FDI supporting members participated in joint congress programs, including scientific sessions, technical exhibits, general interest programs, and business meetings.

Those attending the joint congress were able to browse through the latest dental product and equipment wares displayed by 578 companies, gathered in 1,072 commercial exhibit booths at the Washington, DC convention center—the largest technical exhibit ever collected on the continent. ■

Who attended?

ADA member dentists	9,904
ADA spouses	4,172
Guests	3,651
Dental students	654
Dental assistants	1,837
Dental hygienists	954
Dental lab technicians	236
Dental dealers/buyers	392
Nonmember dentists	902
Exhibitors	5,422
ADA affiliate and FDI supporting members	251
ADA affiliate only FDI supporting member only	176
ADA affiliate only	176
FDI supporting member only	176
Total attendance	30,641

Unofficial figures from the Council on ADA Sessions and International Relations

House tightens AIDS policy

Association opposes denying care

Washington—The ADA House of Delegates adopted a revised policy statement on the treatment of AIDS patients that effectively toughens the Association's opposition to denying dental care to those infected with the deadly disease.

After a lengthy debate, the House decided to alter the policy statement it adopted last

Policy in full, page four

year on the obligations of dentists to treat patients infected with AIDS or the AIDS virus (human immunodeficiency virus or HIV), and to remove from the statement all references to the right of referral.

Long-established policy, the House noted, allows dentists to make referrals to other practitioners as appropriate, taking into account both dentists' experience, equipment, and skills.

Language in the original statement, which permitted "informed and sensitive referrals to individuals who have special skills, knowledge, and experience" was dropped from the statement because it was redundant, the House said.

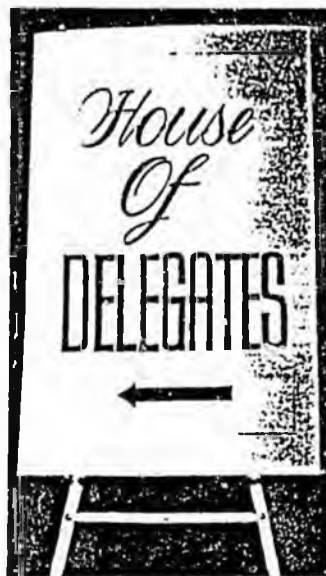
The right of referral, spelled out in the ADA *Principles of Ethics and Code of Professional Conduct*, remains intact for all dentists, and doesn't require special mention in the AIDS, HIV policy statement.

The revised policy, the House noted, does not preclude the right of any dentist to refer to another practitioner a patient with a condition beyond his or her "skills, knowledge, equipment, or experience," as described in the *Code*.

There was no need to restate that fact in the AIDS, HIV policy statement, the House decided.



ADA Executive Director Thomas J. Ginley, PhD, addresses the House of Delegates.



Beyond AIDS, the revised policy statement includes also a new section on ethical considerations. Following the statement on this subject by the Council on Ethics, Bylaws, and Judicial Affairs, the revised policy statement quotes from Section I of the ADA *Principles of Ethics*, which defines the dentist's "primary professional obligation" as service to the public.

The new section states, "The competent and timely delivery of quality care within the bounds of clinical circumstances presented by the patient, with due consideration being given to the needs and desires of the patient, shall be the most important aspect of that obligation."

Another approved revision in the original statement, adopted by last year's House, calls for "all dentists involved in the treatment" of patients suspected of HIV infection to be notified of test results, while protecting the confidentiality of such information.

The House also adopted a resolution declaring that the ADA "opposes discrimination on any basis, including discrimination against persons with infectious diseases," while opposing any move to declare such diseases handicapping conditions.

The House resolved that "as a highest priority, the Association work aggressively toward persuading state legislatures, Congress, and all appropriate governmental agencies that communicable, infectious diseases are not a handicap within the meaning of applicable discrimination laws." ■

ADA to examine licensure issue, report to House

Washington—The ADA House of Delegates, meeting here during the joint world congress, adopted two resolutions calling on the Association to take a closer look at one of organized dentistry's most controversial issues: dental licensure.

In a close vote (218 to 196), the House adopted a measure requiring the ADA appoint a committee to study "freedom of movement and licensure issues" and report back to the House in 1989.

More House actions, page four

Also adopted was a resolution calling on "appropriate agencies of the ADA, cooperation with the American Association of Dental Examiners [to] study the comparability of clinical examinations in use for dental licensure and the feasibility of identifying reliable standards for evaluating clinical competency." A preliminary report on the study is expected to go to the House next year, with a final report to follow in 1990.

By its action, the House acknowledged that licensure and freedom of movement are issues of major concern to many ADA members.

A 1986 membership survey showed that 76.9% of ADA members either "strongly agree" or "agree" that the Association should encourage states to adopt licensure by credentials. Existing Association policy adopted in 1975, encourages state boards to "establish criteria by which dentists could be licensed by credentials to permit freedom of interstate movement while retaining those controls necessary to fulfill public responsibilities of the respective state boards."

Though it encourages credentialing, the ADA has long held that licensure is a state rights issue, a view that reflects years of continuous study of licensure-related concerns.

Some dentists—particularly the young ones—believe the Association should exert greater pressure on the states to adopt a licensure policy, an approach the ADA has always resisted in deference to the states.

Early in the House discussion, it appeared the resolutions later adopted were headed for the scrap pile. Impassioned pleas from

Continued on page four



After 3 years as speaker of the ADA House, Dr. Joseph G. DiStasio presides over his last meeting.

Licensure

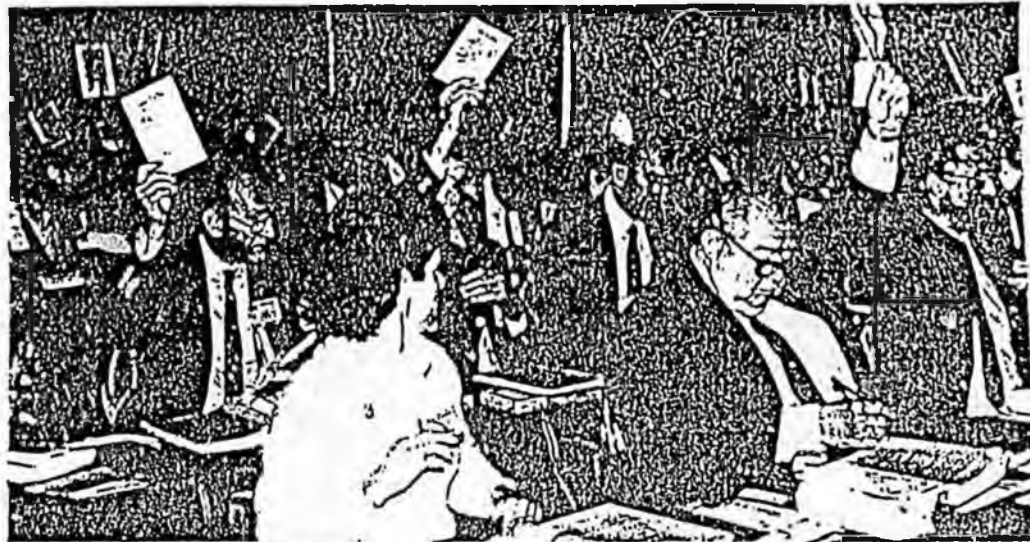
Continued from page two

Nelson of the American Student Dental Association and Dr. Patsy Fujimoto, who chairs the ADA Commission on the Young Professional, caused the House to take notice.

But it was a statement from then president-elect, now President Arthur J. Dugoni that swayed the House to favor the licensure resolutions—particularly 1411, which calls for the study of clinical examinations.

Stating flatly that he supported the resolution, Dr. Dugoni reminded the House that the measure "says only that we will study the issue. It does not take away states' rights or powers of licensure."

An ADA staff committee that will include representatives of the American Association of Dental Examiners has been formed at the direction of Thomas J. Ginley, PhD, executive director. The committee held a planning meeting Oct. 27. ■



D. Delegates raise their voting cards during the 1988 House session.

House adopts policy on auxiliary issues

Updated statement defines responsibilities, terms

Washington—A detailed policy statement defining the Association's position on dental auxiliary education, credentialing, and utilization was adopted here by the 1988 House of Delegates.

The *Comprehensive Policy Statement on Dental Auxiliaries* replaces interim policy the House adopted last year when a number of suggested amendments to the original document were referred for study and recommendation to the Council on Dental Education.

The new House-approved statement is a basic reference on auxiliary issues. Its provisions center on the dentist's "ultimate responsibility for patient care" and define

More on House, Nov 21 ADA NEWS

Association policy on such matters as delegation of auxiliary functions, supervision, employment settings, education, and licensure. The document also provides a glossary of terms related to dental auxiliary utilization and supervision.

Development of the statement began in 1985 when the council initiated a review of existing ADA policy on dental auxiliaries. The council found that the Association's policies on auxiliaries—dental hygienists, assistants, and laboratory technicians—had been adopted piecemeal over a period of

30 years, largely in response to changes in dental practice and the legislative climate.

Deciding that something more comprehensive and up to date was needed, the council went to work on a statement that would, as the council said in an early background report, "incorporate existing policies into a single, concise document without significantly changing or adding to current House-adopted policy." The document has been refined since then, and with its adoption all old policies on dental auxiliaries were rescinded.

The new House-approved policy statement will be distributed to all ADA constituent societies. ■



Members of the House listen to debate during their 3-day meeting.

ADA policy statement on AIDS, HIV and dental practice

Adopted by the ADA House of Delegates on Oct. 12 in Washington, DC.

The dental profession in the United States has a long tradition of providing appropriate and compassionate care to the public, including special groups with special needs. The American Dental Association believes that it has the responsibility to articulate a clear position on issues related to acquired immune deficiency syndrome (AIDS) and human immunodeficiency virus (HIV) infection and to formulate policy based on current scientific knowledge and accepted legal, moral, and ethical imperatives.

This policy statement will be reviewed on a regular basis and may be modified as new information and developments become available.

National Policy—The Association is supportive of initiatives to develop a national policy on HIV infection that can become the basis for coordinated efforts by the public and private sectors. The oral health aspects of HIV infection and issues related to the practice of dentistry should be included in national policies as they are developed.

Legal Issues—Antidiscrimination laws and regulations should be clarified or amended either legislatively or through the courts, in consideration of the rights of the patient to be free from acts of prejudice and the rights of others to be protected against an unreasonable risk of disease.

Public Information—The health care and communications communities should work together, in consultation with government agencies, to develop public service announcements and other educational messages regarding AIDS. Public education to increase awareness of how AIDS is transmitted should include information that will diminish irrational fears about transmission of the disease through dental treatment.

Ethical Considerations—The dental profession has long

Association statement

The dentist's primary professional obligation shall be service to the public. The competent and timely delivery of quality care within the bounds of the clinical circumstances presented by the patient, with due consideration being given to the needs and desires of the patient, shall be the most important aspect of that obligation.

Professional Considerations—The Association believes that HIV-infected individuals should be treated with compassion and dignity. Current scientific and epidemiologic evidence indicates that there is little risk of transmission of infectious diseases through dental treatment if recommended infection control procedures are routinely followed. Patients with HIV infection may be safely treated in private dental offices when appropriate infection control procedures are employed. Such infection control procedures provide protection both for patients and dental personnel.

A sound approach to the treatment of infectious patients requires an assessment of the patient's condition based on reasonable and informed medical judgments, given the state of medical knowledge at the time. A dentist should not refuse to treat a patient whose condition is within the dentist's current realm of competence solely because the patient is HIV infected.

Dentists should be alert to signs and symptoms of HIV infection that may be identified during the provision of dental care. Patients with histories or conditions possibly indicative of HIV infection should be referred to their physicians for diagnostic procedures, counseling and medical follow-up.

All dentists involved in the treatment of the patient should be notified of test results and should protect the confidentiality of such information.

The Association believes that individuals with HIV infection should have access to dental treatment. Treatment considerations should provide for a just balance between the well-being of

New committee acts on dues structure directive

Washington—The ADA's complicated membership dues structure, which includes 22 membership categories and may be hampering recruitment, has been hoisted up on the racks in preparation for an overhaul.

The House of Delegates, meeting here during the joint world congress, approved a resolution calling on the ADA Board of Trustees and other agencies to "study the entire issue of membership categories and dues structure" with an eye for developing a simplified, more equitable dues system. The Board is expected to report back to the House in 1989.

To allow for the larger study, the House deferred action on a series of resolutions that would have, in one way or another, altered the current dues system piecemeal. These resolutions were referred to the Board for review in the dues system study.

The House asked the Board to work "in consultation with appropriate Association agencies, the Commission on the Young Professional, the American Student Dental Association, and constituent and component societies" to study the dues structure and membership categories.

Within a week after the House action, ADA Executive Director Thomas J. Ginley, PhD, had appointed a 10-member committee to conduct the dues study. The group, led by Executive Director Ginley, will hold its first meeting Nov. 26 and is expected



Senate Finance Committee

Rick Halford, Senator

These are copies of
typical of officer
effectiveness reports. These
reports are available
to document the dental
background on all federally
employed dentists.

I. RATEE IDENTIFICATION DATA (Read AFR 36-10 carefully before filling in any item)						
1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSN 529-78-1042FV	3. GRADE MAJ	4. DAFSC 9826			
5. ORGANIZATION, COMMAND, LOCATION USAF Regional Hospital Elmendorf (AAC), Elmendorf AFB, Alaska			6. PAS CODE ELOAFBBV			
7. PERIOD OF REPORT FROM: 2 Jun 87 THRU: 1 Jun 88		8. NO. DAYS OF SUPER-VISION 366	9. REASON FOR REPORT Annual			
II. JOB DESCRIPTION 1. DUTY TITLE: Dental Officer, General 2. KEY DUTIES, TASKS, AND RESPONSIBILITIES: Examines dental patients, interprets roentgenograms and diagnostic tests, restores health and function of the oral cavity through the treatment of carious lesions by endodontic therapy, restorations, extractions and replacements of missing teeth with bridges or removable prosthetic appliances. Diagnoses and treats diseases and destructive processes of the oral cavity and investing tissues of the teeth. Additional Duties: Member, Quality Assurance/Risk Management (QA/RM); Member, Preventive Dentistry Committee.						
III. PERFORMANCE FACTORS <i>Specific example of performance required</i>						
	NOT OBSERVED	FAR BELOW STANDARD	BELOW STANDARD	MEETS STANDARD	ABOVE STANDARD	WELL ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth) Highly skilled general dentist. Skillfully completed complex, pediatric, multidiscipline cases involving space maintenance and minor orthodontic movement.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective) While performing duties in sick call, diagnoses are precise, timely and accurate. Treatment plans reflect sound judgment.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. PLAN AND ORGANIZE WORK (Timely, creative) Coordinated dental examination and dental prophylaxis schedules for three elementary schools at Elmendorf Air Force Base, which afforded access to all eligible children.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. MANAGEMENT OF RESOURCES (Manpower, materiel, fiscal) By customizing his treatment time to the specific needs of a number of apprehensive pediatric patients, he has completed their treatment thus eliminating referrals and expediting their care.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. LEADERSHIP (Initiative, accept responsibility) Leads by example. Willingly accepts additional patients when sick call is heavy. Willingly assists other doctors when patient scheduling problems arise. Volunteered to train participants of the Red Cross Training Program in restorative and pediatric dentistry.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable) Upon the occurrence of a medical emergency, took charge, initiated and directed proper procedures and maintained the patient until the emergency medical response team arrived.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. ORAL COMMUNICATION (Clear, concise, confident) His presentation on preventive dentistry to numerous assemblies at the base elementary schools during National Childrens Dental Health Month was well received by both the students and teaching staff.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. WRITTEN COMMUNICATION (Clear, concise, organized) Complete and accurate reports covering the Childrens Preventive Dentistry Program kept the Base Dental Surgeon completely informed of the program's progress and completion.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing) He is totally devoted to his dental responsibilities and the Air Force family. Fully supports all squadron, base, and community functions. Sets an exemplary example of an Air Force officer to the community.	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity) Has a compassionate humane regard for all people no matter what their situation or beliefs. Is an active leader in his local church and scouting troop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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USAF Regional Hospital Elmendorf (AAC), Elmendorf AFB, Alaska			ELOAFBBV
7. PERIOD OF REPORT		8. NO. DAYS OF SUPERVISION	9. REASON FOR REPORT
FROM: 2 Jun 86 THRU: 1 Jun 87		299	Annual
II. JOB DESCRIPTION 1. DUTY TITLE: Dental Officer General			
2. KEY DUTIES, TASKS, AND RESPONSIBILITIES: Examines patients, makes diagnoses, formulates treatment plans and treats patients. Restores teeth by operative, prosthetic and endodontic procedures. Replaces missing teeth by removable partial dentures and fixed partial dentures. Responsible for supervision and continuous training of his assigned technician. Additional Duties: Pediatric Dental Officer for dental service; Infection Control Monitor for Dental Clinic #1.			
III. PERFORMANCE FACTORS			
Specific example of performance required	NOT OBSERVED	FAR BELOW STANDARD	BELOW STANDARD
			MEETS STANDARD
			ABOVE STANDARD
			WELL ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is knowledgeable and well read in all fields of dentistry. Was selected from eleven other officers to attend a command sponsored preceptorship for pediatric dentistry. Has become the focal point for all pediatric dentistry patients for the base.			<input checked="" type="checkbox"/>
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extremely reliable. Quick and accurate diagnoses enable him to treat sick call patients without overlapping into scheduled patient treatment time. His thorough treatment plans have consistently reflected sound judgment.			<input checked="" type="checkbox"/>
3. PLAN AND ORGANIZE WORK (Timely, creative)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Through excellent patient management skills and consistent monitoring of his appointment schedule, he has been able to accommodate a large volume of apprehensive pediatric patients thereby eliminating referral and expediting patient care.			<input checked="" type="checkbox"/>
4. MANAGEMENT OF RESOURCES (Manpower, materiel, fiscal)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
By routinely performing multiple operative procedures at one appointment, he has been able to keep his pediatric appointment book under ten work days, greatly enhancing patient accessibility to care.			<input checked="" type="checkbox"/>
5. LEADERSHIP (Initiative, accept responsibility)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strong, goal oriented leader. Recognized as one of the hardest working members of our staff. Chosen by his peers to act as spokesman for the group when presenting a new Dental Officer of the Day Program to the Base Dental Surgeon.			<input checked="" type="checkbox"/>
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Possesses quiet, well founded self assurance. Successfully completed treatment on numerous apprehensive pediatric patients where other officers had failed.			<input checked="" type="checkbox"/>
7. ORAL COMMUNICATION (Clear, concise, confident)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
He has established an excellent rapport with his patients by informing them of their treatment needs in a language which is clear and easily understood.			<input checked="" type="checkbox"/>
8. WRITTEN COMMUNICATION (Clear, concise, organized)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
His patient records are concise and accurate. Procedures performed are well documented and easily understood. Written consultation requests are clear and complete, highlighting pertinent information.			<input checked="" type="checkbox"/>
9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
His enthusiasm and confident "can-do" attitude, integrity and willingness to help others, set an impeccable example of an Air Force Officer.			<input checked="" type="checkbox"/>
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity)	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
He is totally open minded and empathetic in dealing with all his patients and co-workers. An active leader in his local church. He is totally unbiased.			<input checked="" type="checkbox"/>

CORRECTION

**THIS DOCUMENT
HAS BEEN REPHOTOGRAPHED
TO ASSURE LEGIBILITY**

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				

IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION: Technical Skills
 2. SUGGESTED JOB (Include AFSC): General Dentist, 9826
 3. ORGANIZATION LEVEL: Hospital 4. TIMING: 1989

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.

[]			[]			[]			[]			Highest ↑
[]			[]			[]			[]			
[]			[]			[]			[]			
RATER	ADDN RATER	INDORS- ER	RATER	ADDN RATER	INDORS- ER	RATER	ADDN RATER	INDORS- ER	RATER	ADDN RATER	INDORS- ER	

lowest ←

VI. RATER COMMENTS An outstanding dental officer who demonstrates a wide scope of knowledge in general dentistry, continues to provide the best possible patient care, and uses every opportunity through continuing dental education courses and literature to upgrade treatment given at this facility. Selected to attend a Medical Aspects of Child Abuse and Neglect Course to aid in patient identification. His involvement in the community phase of the Preventive Dentistry Program has included assisting in a children's tooth brush swap booth during Dental Health Month, manning a dental health booth at a local mall during a city-wide health fair and also at the Base Open House, all of which have contributed to an outstanding and successful program. He is always willing to help the clinic by accepting additional patients from either sick call or another doctor who may be running behind. When assigned a task, he considers all avenues and arrives at sound workable solutions. Chairmen of both the QA/RM and Preventive Dentistry Committees have commented on his keen insights to solutions of problems facing these committees. Eagerly accepts ever increasing responsibilities. Promote.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
JOHN A. SAMUELSON, Colonel, USAF, DC USAF Regional Hospital Elmendorf (AAC) Elmendorf Air Force Base, Alaska	OIC, Dental Clinic 1	1 Jun 88
SSAN	SIGNATURE	
522-54-6029FR	<i>John A. Samuelson</i>	

VII. ADDITIONAL RATER COMMENTS CONCUR NONCONCUR

Steady performer; superb clinician. Major Rampton, as a member of the Preventive Dentistry Committee, coordinated examinations and dental prophylaxis at the three Elmendorf AFB elementary schools offering all eligible children access to this program. It was a total success! Continues to handle many of our apprehensive pediatric patients affording in-house treatment which has greatly enhanced our patient care. Was a vital contributor to our outstanding Childrens Dental Health Month by providing presentations at assemblies at base school during this period. He continues to demonstrate his ability to accept and complete additional responsibility. Promote.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
HAROLD H. BIDDLE, Colonel, USAF, DC USAF Regional Hospital Elmendorf (AAC) Elmendorf Air Force Base, Alaska	Base Dental Surgeon	1 Jun 88
SSAN	SIGNATURE	
295-38-5474FR	<i>Harold H. Biddle</i>	

VIII. INDORSER COMMENTS CONCUR NONCONCUR

Major Rampton continues to demonstrate professionalism and sensitive approach to patient care. He served on the publicity committee for a recent hospital dining-in which was noted as the best dining-in in the hospital's history. His participation during our annual continuing medical readiness training exercise is noteworthy. He is ready for increased responsibility.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
WILLIAM E. PALMA, Colonel, USAF, NC USAF Regional Hospital Elmendorf (AAC) Elmendorf Air Force Base, Alaska	Commander	1 Jun 88
SSAN	SIGNATURE	
050-30-7669	<i>William E. Palma</i>	

I. RATEE IDENTIFICATION DATA (Read AFR 36-10 carefully before filling in any item)						
1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSN 529-78-1042FV	3. GRADE Captain	4. DAFSC 9826			
5. ORGANIZATION, COMMAND, LOCATION USAF Regional Hospital Elmendorf (AAC), Elmendorf AFB, Alaska			6. PAB CODE ELOAFBBV			
7. PERIOD OF REPORT FROM: 2 Jun 86 THRU: 1 Jun 87		8. NO. DAYS OF SUPERVISION 299	9. REASON FOR REPORT Annual			
II. JOB DESCRIPTION 1. DUTY TITLE: Dental Officer General 2. KEY DUTIES, TASKS, AND RESPONSIBILITIES: Examines patients, makes diagnoses, formulates treatment plans and treats patients. Restores teeth by operative, prosthetic and endodontic procedures. Replaces missing teeth by removable partial dentures and fixed partial dentures. Responsible for supervision and continuous training of his assigned technician. Additional Duties: Pediatric Dental Officer for dental service; Infection Control Monitor for Dental Clinic, #1.						
III. PERFORMANCE FACTORS <i>Specific example of performance required</i>						
	NOT OBSERVED	FAR BELOW STANDARD	BELOW STANDARD	MEETS STANDARD	ABOVE STANDARD	WELL ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is knowledgeable and well read in all fields of dentistry. Was selected from eleven other officers to attend a command sponsored preceptorship for pediatric dentistry. Has become the focal point for all pediatric dentistry patients for the base.						
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Extremely reliable. Quick and accurate diagnoses enable him to treat sick call patients, without overlapping into scheduled patient treatment time. His thorough treatment plans have consistently reflected sound judgment.						
3. PLAN AND ORGANIZE WORK (Timely, creative)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Through excellent patient management skills and consistent monitoring of his appointment schedule, he has been able to accommodate a large volume of apprehensive pediatric patients thereby eliminating referral and expediting patient care.						
4. MANAGEMENT OF RESOURCES (Manpower, materiel, fiscal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
By routinely performing multiple operative procedures at one appointment, he has been able to keep his pediatric appointment book under ten work days, greatly enhancing patient accessibility to care.						
5. LEADERSHIP (Initiative, accept responsibility)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Strong, goal oriented leader. Recognized as one of the hardest working members of our staff. Chosen by his peers to act as spokesman for the group when presenting a new Dental Officer of the Day Program to the Base Dental Surgeon.						
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Possesses quiet, well founded self assurance. Successfully completed treatment on numerous apprehensive pediatric patients where other officers had failed.						
7. ORAL COMMUNICATION (Clear, concise, confident)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He has established an excellent rapport with his patients by informing them of their treatment needs in a language which is clear and easily understood.						
8. WRITTEN COMMUNICATION (Clear, concise, organized)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
His patient records are concise and accurate. Procedures performed are well documented and easily understood. Written consultation requests are clear and complete, highlighting pertinent information.						
9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
His enthusiasm and confident "can-do" attitude, integrity and willingness to help others, set an impeccable example of an Air Force Officer.						
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He is totally open minded and empathetic in dealing with all his patients and co-workers. An active leader in his local church. He is totally unbiased.						

IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION: Technical Skills
 2. SUGGESTED JOB (Include AFSC): General Dental Officer
 3. ORGANIZATION LEVEL: Hospital 4. TIMING: 1989

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.

[X]			[X]			[X]		
[]			[]			[]		

↑ Highest

RATER	ADDN RATER	INDORS-ER	RATER	ADDN RATER	INDORS-ER	RATER	ADDN RATER	INDORS-ER	RATER	ADDN RATER	INDORS-ER
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← Lowest

VI. RATER COMMENTS Captain Rampton is a hard working, dedicated, and conscientious dental officer. He is truly professional in his attitude and the way he deals with his patients and all the clinic staff. He is continually expanding his knowledge in dentistry by regularly attending study groups and post graduation education courses. He has assembled and organized well documented references detailing the latest techniques and theories in pediatric dentistry for his own, as well as other staff members' reference. He is always willing to help the clinic in regard to sick call, or accepting an additional responsibility. This is exemplified by his untiring efforts as Infection Control Officer, and Pediatric dental officer for Dental Clinic #1. He has the professional characteristics and administrative potential that are sought by the Air Force Dental Service. He was selected for promotion to major effective June 1987, and is ready for increased responsibility.

NAME, GRADE, BR OF SVC, ORGN, COMO, LOCATION	DUTY TITLE	DATE
JOHN A. SAMUELSON, LtC, USAF, DC USAF Regional Hospital Elmendorf (AAC) Elmendorf AFB, Alaska	OIC, Dental Clinic 1	1 Jun 87
SSAN	SIGNATURE	
522-54-6029FR	<i>John A. Samuelson</i>	

VII. ADDITIONAL RATER COMMENTS CONCUR NONCONCUR

Steady and outstanding mission oriented career officer. Selected for and attended a two-week, innovative pediatric dentistry, preceptorship course which led to his assignment as our primary pediatric dentist. He was also selected to attend a one-week preventive dentistry course and has contributed significantly to our preventive dentistry program. This program received an "outstanding" rating during our last Health Services Management Inspection and very positive comments from a recent PACAF Medical Staff Assistance Visit team. He is ready for the increased responsibility of major.

NAME, GRADE, BR OF SVC, ORGN, COMO, LOCATION	DUTY TITLE	DATE
HAROLD H. BIDDLE, Col, USAF, DC USAF Regional Hospital Elmendorf (AAC) Elmendorf AFB, Alaska	Base Dental Surgeon	1 Jun 87
SSAN	SIGNATURE	
295-38-5474FR	<i>Harold H. Biddle</i>	

VIII. INDORSER COMMENTS CONCUR NONCONCUR

Captain Rampton is a thoroughly professional and articulate dental officer. He possesses an outstanding clinical work ethic and is most productive. He has served well in any area where a need existed. He has been able to treat our very young patients, three-to-five-year-olds and very apprehensive pediatric dental patients, thereby eliminating referrals and expediting these treatments. He is ready for increased responsibility.

NAME, GRADE, BR OF SVC, ORGN, COMO, LOCATION	DUTY TITLE	DATE
WILLIAM E. PALMA, Colonel, USAF, MC USAF Regional Hospital Elmendorf (AAC) Elmendorf AFB, Alaska	Commander	4 Jun 87
SSAN	SIGNATURE	
050-30-7669-10N5EA	<i>William E. Palma</i>	

I. RATEE IDENTIFICATION DATA (Read AFR 36-10 carefully before filling in any item)						
1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSN 529-78-1042FV	3. GRADE Capt	4. DAFSC 9826			
5. ORGANIZATION, COMMAND, LOCATION George USAF Hospital (TAC), George AFB, California			6. PAS CODE GBOTFVPS			
7. PERIOD OF REPORT FROM: 02 Jun 85 THRU: 01 Jun 86		8. NO. DAYS OF SUPERVISION 311	9. REASON FOR REPORT Annual			
II. JOB DESCRIPTION 1. DUTY TITLE: General Dental Officer 2. KEY DUTIES, TASKS, AND RESPONSIBILITIES: Responsible for diagnosis of dental diseases and abnormalities from radiographic and clinical exams. Restores oral structures to proper health and function by utilizing accepted techniques. Additional Duties: Infection Control Officer, Continuing Education Officer, War Readiness Officer, Dental Mobility Officer assigned to the Air Transportable Clinic, Permanent member of the Dental Quality Assurance and Risk Management Committee.						
III. PERFORMANCE FACTORS <i>Specific example of performance required</i>						
	NOT OBSERVED	FAIR BELOW STANDARD	BELOW STANDARD	MEETS STANDARD	ABOVE STANDARD	WELL ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Demonstrates outstanding knowledge in all phases of dentistry. He has a special interest and technical skill in endodontics which has been of great value in our attempt to provide completed dental care to our patients.						
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He easily diagnoses and plans treatment for patients suffering the most severe dental defects. Actively participates in the decision making process during the Quality Assurance and Risk Management Committee meetings.						
3. PLAN AND ORGANIZE WORK (Timely, creative)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Meticulously maintains and updates Continuing Education and Training Folders and ensures that each provider fulfills Air Force requirement of Continuing Medical Education and training hours. Responsible for scheduling all in-house and consultant CME lectures.						
4. MANAGEMENT OF RESOURCES (Manpower, material, fiscal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Effectively utilizes material and ancillary personnel resources. He skillfully schedules appointment time for maximum efficiency in the treatment of endodontic case loads, cutting down the waiting time for root canal treatment appointments to less than one week.						
5. LEADERSHIP (Initiative, except responsibility)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
As the Infection Control Officer his high standard and strict criterias has enabled the clinic to provide quality dental care in an utmost clean and sterile environment.						
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
While consistently treating a much heavier load than normally expected of his peers, Capt Rampton carries out his additional responsibilities with exceptional enthusiasm and competence.						
7. ORAL COMMUNICATION (Clear, concise, confident)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Extremely capable speaker, delivers succinct infection control briefings to entire dental staff. Capt Rampton's in-house continuing education lectures have been exeptional in both clarity and content.						
8. WRITTEN COMMUNICATION (Clear, concise, organized)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Formulated outstanding operational guidelines for operating room training for all dental officers, which is a integral part of our war readiness mission.						
9. PROFESSIONAL QUALITIES (Attitude, civis, cooperation, bearing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Captain Rampton's attitude and cooperation have been commendable. His outstanding professional competence and military bearing allowed him to be selected as the Company Grade Officer of the Quarter for the hospital.						
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Acutely aware of individual worth, he actively promotes equal treatment for everyone. His concern and sensitivity to the needs of his subordinates has won their respect.						

IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION: Professional Excellence
 2. SUGGESTED JOB (Include AFSC): 9826 General Dental Officer
 3. ORGANIZATION LEVEL: Wing 4. TIME: Immediate

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.

<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			Highest
<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>			
<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>			

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RATER	ADJUTANT	INDORSER	RATER	ADJUTANT	INDORSER	RATER	ADJUTANT	INDORSER
Lowest								

VI. RATER COMMENTS: Capt Rampton is a superbly talented dental officer whose efforts have been invaluable in this clinic. His relentless effort in constantly upgrading the infection control standard in this clinic is commendable. His astute diagnostic ability and skillful application of clinical techniques are seldom equaled. As an active member of the Quality Assurance and Risk Management Committee, Dr Rampton has been instrumental in developing workable guidelines covering every facet of clinical operation. He, as our endodontic consultant, consistently treats the most difficult endodontic cases with an ease and confidence expected of trained specialists in the field. He is especially adept at generating an early patient rapport and is uniformly assigned the most difficult patients. A trusted advisor, his counsel is actively sought by the Junior Dental Officers. He is an excellent practitioner of modern dentistry whose services are in constant demand by a multitude of patients. He is extremely active in community, church and school activities. This truly outstanding officer deserves immediate promotion as soon as he is eligible.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
RONALD W. ENG, MAJ, USAF, DC George USAF Hospital (TAC) GEORGE AFB, California	General Dental Officer SSAN 410-96-4886	01 Jun 86
	SIGNATURE: <i>Ronald W. Eng</i>	

VII. ADDITIONAL RATER COMMENTS

CONCUR NONCONCUR

Captain Rampton's excellence in both dentistry and its administration are legion within this Air Division. His interest in dental infection control has literally eliminated post operative infective complications within this dental service. He is singularly responsible for the excellence of our dental officer readiness training program which has provided fully trained dental officers while causing minimal disruption to the clinical treatment schedule. Dr Rampton should be retained and promoted at the first opportunity.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
GARY G. GRAY, COL, USAF, DC George USAF Hospital (TAC) George AFB, California	Base Dental Surgeon SSAN 505-46-6041	01 Jun 86
	SIGNATURE: <i>Gary G. Gray</i>	

VIII. INDORSER COMMENTS

CONCUR NONCONCUR

There is no doubt that Captain Rampton will assume a position of leadership within the Air Force Dental Service. He is a strong, intelligent and hard working individual whose successes in the practice and administration of modern dentistry have had a definite and positive impact on the combat readiness of this Air Division. Obvious strong potential for assumption of greater responsibility. Promote at the earliest opportunity.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
CHARLES M. HERNDON, Colonel, USAF, MC George USAF Hospital (TAC) George AFB, CA	Director, Base Medical Services SSAN 585-18-5322FR	4 Jun 86
	SIGNATURE: <i>Charles M. Herndon</i>	

RATEE IDENTIFICATION DATA (Read AFR 35-10 carefully before using in any item)

1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSAN (Include Suffix) 529-78-1042FV	3. GRADE Capt	4. DAFSC 9826
5. ORGANIZATION, COMMAND, LOCATION George USAF HP (TAC), George Air Force Base, California			6. PAS CODE GBOTFVPS
7. PERIOD OF REPORT FROM: 02 June 1984 THRU: 01 June 1985		8. NO. DAYS OF SUPERVISION 324	9. REASON FOR REPORT ANNUAL

II. JOB DESCRIPTION 1. DUTY TITLE: **General Dental Officer**
 2. KEY DUTIES, TASKS AND RESPONSIBILITIES: **Responsible for diagnosis of dental diseases and abnormalities from radiographic and clinical examinations. Restores oral structures to proper health and function by utilizing accepted techniques. ADDITIONAL DUTIES: Infection Control Officer, War Readiness Officer, OIC Endodontics, Dental Mobility Officer.**

III. PERFORMANCE FACTORS	NOT OBSERVED	FAR/BELOW STANDARD	BELOW STANDARD	MEETS STANDARD	ABOVE STANDARD	WELL/ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth) Demonstrated outstanding knowledge in the practice of general dentistry. Recently passed the very difficult Western Regional Dental Board.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective) Accurately diagnoses and treatment plans difficult multi-disciplinary treatment cases. Has recently been selected as Officer in Charge of the Endodontic Section.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. PLAN AND ORGANIZE WORK (Timely, complete) Personally responsible for a self-maintained and highly efficient patient scheduling system. Organized treatment schedule for patients with communicable diseases.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. MANAGEMENT OF RESOURCES (Efficient, proper assignment) Reorganized and directed Dental Clinic War Readiness training schedule. Responsible for ordering and maintaining all supplies needed for infection control.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. LEADERSHIP (Initiative, acceptance, responsibility) Director of Infection Control for Dental Clinic. Is presently undertaking a six-month infection control in-depth study for the Air Force Dental Investigative Service.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable) Is very self confident. Has handled numerous after-hours dental emergencies that have resulted in several letters of appreciation being sent to the Commander USAF Hospital, George.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. ORAL COMMUNICATION (Clear, concise, complete) Presented an outstanding series of lectures to dental, medical, and TDY reserve units on infection control. Active in off-duty preventive dentistry. Lectures to local school system.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. WRITTEN COMMUNICATION (Clear, concise, complete) Formulated the dental operating instructions for infection control which received an excellent on the last Health Services Management Inspection.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. PROFESSIONAL QUALITIES (Sound, consistent, sound) Presents outstanding military competence in dealing with patients and fellow professionals. Military bearing and dress are exemplary.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. HUMAN RELATIONS (Equal opportunity, appropriate concern) He continually strives to upgrade the Dental Clinic's sensitivity to patients regardless of the patient's race, color, creed, sex, or position. This rater has received numerous favorable comments concerning his genuine compassion and concern.	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION:

2. SUGGESTED JOB (The Air AFSC):

3. ORGANIZATION LEVEL: 4. TIMING:

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.

[X] [X] [X]			[] [] []			[] [] []			[] [] []					
[] [] []			[] [] []			[] [] []			[] [] []					
[] [] []			[] [] []			[] [] []			[] [] []					
RATER	ADDN RATER	INDORSER	RATER	ADDN RATER	INDORSER	RATER	ADDN RATER	INDORSER	RATER	ADDN RATER	INDORSER			
← Lowest												Highest ↑		

VI. RATER COMMENTS Captain Jason M. Rampton is an outstanding Air Force Dental Officer. He is intelligent, creative, and highly motivated to our overall mission. He possesses excellent and comprehensive knowledge of all phases of general dentistry. He is an energetic team worker, often providing additional unscheduled time to the patient to assure the highest quality of care available. His work as Infection Control Officer has truly been outstanding. He completely upgraded the Infection Control Program to one of the best in the Air Force. His Dental Operating Instructions and procedures for treating infectious patients received an excellent in the last Health Services Management Inspection. Dr Rampton's work in our dental quality control program has insured a technical and professional excellence rivaling any other program in the profession. The many hours he has spent teaching our younger enlisted personnel have measurably increased the productivity of this clinic. He is extremely active in community, church, and school activities. I strongly recommend Capt Rampton be promoted as soon as possible.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
STEVEN A. STRAUSS, Major, USAF, DC George USAF Hospital (TAC) George Air Force Base, California	General Dental Officer	2 June 1985
	SSAN	SIGNATURE
	119-38-9239FB	Steven A. Strauss

VII. ADDITIONAL RATER COMMENTS CONCUR NONCONCUR

Captain Rampton is a truly superior dental officer. His untiring efforts in developing, teaching, and enforcing stringent and workable infection control guidelines have literally eliminated cross-contamination of dental patients. He has guaranteed a safe dental environment for both our patients and providers. He is a hard working dental officer dedicated to the highest ideals of modern quality dental care. He should be retained and promoted as soon as eligible.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
GARY G. GRAY, Colonel, USAF, DC George USAF Hospital (TAC) George Air Force Base, California	Base Dental Surgeon	2 June 1985
	SSAN	SIGNATURE
	505-46-6041	Gary Gray

VIII. INDORSER COMMENTS CONCUR NONCONCUR

Captain Rampton has daily demonstrated an excellence and drive seldom encountered among our younger dental officers. He has been the driving force in an infection control program praised for its excellence by the Air Force Dental Inspector General. This officer also serves as our Dental Mobility Officer. He is most deserving of immediate promotion.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
MARTIN I. VICTOR, Colonel, USAF, MC George USAF Hospital (TAC) George Air Force Base, California	Director, Base Medical Services	5 June 1985
	SSAN	SIGNATURE
	097-28-5161FR	[Signature]

I. RATEE IDENTIFICATION DATA (Read AFR 36-10 carefully before filling in any item)			
1. NAME (Last, First, Middle Initial)	2. SSAN (Include Suffix)	3. GRADE	4. OAFSC
RAMPTON, JASON H.	529-78-1042FV	CAPT	9826
5. ORGANIZATION, COMMAND, LOCATION			6. PAS CODE
USAF Clinic Ramstein (USAFE), Ramstein AB, Germany			RFODFV8D
7. PERIOD OF REPORT		8. NO. DAYS OF SUPERVISION	9. REASON FOR REPORT
FROM: 2 Jun 83 THRU: 1 Jun 84		366	ANNUAL
II. JOB DESCRIPTION 1. DUTY TITLE: Dental Officer General			
2. KEY DUTIES, TASKS AND RESPONSIBILITIES: Examines, diagnoses, and treats diseases, abnormalities, injuries, and defects of the teeth and investing tissues. Evaluates findings of roentgenograms and diagnostic tests. Evaluates findings of treatment required. Instructs patients in preventive measures for dental health. Is responsible for the supervision and continuous dental training of the technician assigned to him. Additional duties: Dental radiology officer; ATH dental officer; coordinator, dental Red Cross volunteer program.			
III. PERFORMANCE FACTORS			
<i>Specific example of performance required</i>	NOT OBSERVED	FAR/ BELOW STANDARD	BELOW STANDARD
		MEETS STANDARD	ABOVE STANDARD
			WELL/ ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stays ahead of his peers in many areas of dentistry, especially in the area of radiology. His vigilance over this area has assured a quality dental radiology section.			
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He demonstrates an excellent perception of complex matters in all areas of responsibility. His diagnoses are unquestioned by other dental officers and have led to superb treatment plans.			
3. PLAN AND ORGANIZE WORK (Timely, creative)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
His work in the dental treatment room runs smoothly, on time, and without problems. His organization of working times for radiology assistants has led to an efficient periodic dental examination program.			
4. MANAGEMENT OF RESOURCES (Manpower and material)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He has kept abreast of changes in the state of the art for radiology. His procurement of the step wedge for film development analysis has provided the clinic with a means for maintaining superior dental radiographs.			
5. LEADERSHIP (Initiative, accept responsibility)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
As ATH dental officer, he has provided superb supervision to ensure the dental function at the ATH operates efficiently.			
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has never been flustered by difficult patients or challenging tasks. Capt Rampton has been a dependable recall chain leader and has ensured quick responses to exercises.			
7. ORAL COMMUNICATION (Clear, concise, confident)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
During Children's National Dental Health Month he provided a meaningful presentation to young children on preventive dentistry.			
8. WRITTEN COMMUNICATION (Clear, concise, organized)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
His radiology notebook is well written and organized and provides the clinic with exacting documentation and guidelines.			
9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He has a very positive attitude that makes working with him an enjoyable experience. He maintains the highest standards of military professionalism and appearance.			
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
He is a warm, calm individual who deals fairly with everyone and participates willingly in the equal opportunity program.			

IV. ASSIGNMENT RECOMMENDATION: 1. SIBONEST QUALIFICATION: Cooperative, diligent worker
 2. SUGGESTED JOB (Include AFSC): General Dentist (9826)
 3. ORGANIZATION LEVEL: Wing/medium size clinic 4. TIMING: July 1985

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate box.

[X] [X] [X]			[] [] []			[] [] []			[] [] []		
[] [] []			[] [] []			[] [] []			[] [] []		
[] [] []			[] [] []			[] [] []			[] [] []		
RATER ADJN INDOERS- RATER ER			RATER ADJN INDOERS- RATER ER			RATER ADJN INDOERS- RATER ER			RATER ADJN INDOERS- RATER ER		

Lowest ← ↑ Highest

VI. RATER COMMENTS: Capt Rampton is a positive individual who readily accepts responsibility and performs at a superior level. His patient care is sensitive and outstanding. He is a versatile officer who performs admirably in the examination room, treating emergency patients or seeing unscheduled patients. He strives for excellence in his additional duty responsibilities. He has organized monthly meetings for the radiology section which has strengthened the effectiveness of the technicians' ability to produce high quality radiographs. Voluntarily, he has attended meetings and conferred with other highly knowledgeable individuals in dental radiography. He has established a program that utilizes only the best radiographic techniques. His activities as the ATH and as a recall chain leader have been extremely successful. He is the dental coordinator for the Boy Scout merit badge program and is involved in many community activities. His potential is excellent. Promote with peers.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION MELVIN J. SOKOLOWSKY, Maj, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE General Dental Officer	DATE 4 Jun 84
SSAN 935-52-8195FV	SIGNATURE <i>Melvin J. Sokolowsky</i>	

VII. ADDITIONAL RATER COMMENTS: CONCUR NONCONCUR
 Capt Rampton successfully completed rotations in oral surgery and pedodontics, rounding out his ability to perform general dentistry. He has continued to support wing training activities and has participated as a team member at the casualty collection point. He voluntarily participates in additional continuing education during lunch hour and has presented information from meetings he attended to the literature review group at the dental clinic.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION EDDIE A. KUBINSKI, Lt Col, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE Chief, General Dentistry	DATE 4 Jun 84
SSAN 381-46-7878FR	SIGNATURE <i>Eddie A. Kubinski</i>	

VIII. INDORSER COMMENTS: CONCUR NONCONCUR
 Capt Rampton has excelled as a dental clinician. He has accomplished his additional duties with dedication and vigor. He was recognized by the Health Services Management Inspection team and by the USAFE Dental Surgeon for having a very effective and productive radiology section. He is a team player who is always ready to do a little extra for the good of the mission. Capt Rampton is ready to be challenged with greater responsibilities to broaden his overall knowledge in the operation of a dental service.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION GEORGE I. DAUGHERTY II, Col, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE Base Dental Surgeon	DATE Jun 84
SSAN 055-26-2729FR	SIGNATURE <i>George I. Daugherty II</i>	

I. RATEE IDENTIFICATION DATA (Read AFH 36-10 carefully before filling in any item)																																																																																
1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSAN (Include Suffix) 529-78-1042 BV	3. GRADE CAPT	4. DAFSC 9826																																																																													
5. ORGANIZATION, COMMAND, LOCATION USAF Clinic Ramstein (USAFE), Ramstein AB, Germany			6. PAS CODE RFOJFV8D																																																																													
7. PERIOD OF REPORT FROM: 2 Jun 82 THRU: 1 Jun 83		8. NO. DAYS OF SUPERVISION 330	9. REASON FOR REPORT ANNUAL																																																																													
II. JOB DESCRIPTION 1. DUTY TITLE: CLINIC General Dental Officer 2. KEY DUTIES, TASKS AND RESPONSIBILITIES: Examines, diagnoses, and treats diseases, abnormalities, injuries and defects of the teeth and investing tissues. Evaluates findings of roentgenograms and diagnostic tests. Evaluates findings of treatment required. Instructs patients in preventive measures for dental health. Is responsible for the supervision and continuous dental training of the technician assigned to . . . Additional duties: Dental Radiology Officer; ATH Dental Officer; Red Cross Volunteer. Dental Officer.																																																																																
III. PERFORMANCE FACTORS <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:40%;"></th> <th style="width:10%; text-align:center;">NOT OBSERVED</th> <th style="width:10%; text-align:center;">FAIR/BELOW STANDARD</th> <th style="width:10%; text-align:center;">BELOW STANDARD</th> <th style="width:10%; text-align:center;">MEETS STANDARD</th> <th style="width:10%; text-align:center;">ABOVE/STANDARD</th> <th style="width:10%; text-align:center;">WELL/ABOVE STANDARD</th> </tr> </thead> <tbody> <tr> <td> 1. SPECIFIC EXAMPLE OF PERFORMANCE REQUIRED 1. JOB KNOWLEDGE (Depth, currency, breadth) He has demonstrated his excellent job knowledge consistently through superb handling of consultation and has sought to stay current by his participation in literature review, dental study club and Western Germany Armed Forces Dental Society meetings. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> 2. JUDGMENT AND DECISIONS (Consistent, accurate, effective) In his performance as sick call officer, dental officer of the day and examination officer, he has continually made accurate diagnoses on a vast range of dental emergencies. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> 3. PLAN AND ORGANIZE WORK (Timely, creative) He is able to treat patients in an efficient manner allowing maximum numbers of patients to be seen. 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MANAGEMENT OF RESOURCES (Manpower and material) As radiology officer he has maintained a high quality of radiographic support by monitoring levels of chemicals and other procedures ensuring that the functions of the x-ray section continued without interruption. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> </tr> <tr> <td> 5. 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ADAPTABILITY TO STRESS (Stable, flexible, dependable) During his training at the combat casualty care course, Capt Rampton demonstrated his perseverance in the face of difficulty by coping with discomfort, long working hours, unusual working conditions and having to digest volumes of new material. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> 7. 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WRITTEN COMMUNICATION (Clear, concise, organized) Has written an article for publication in the Kaiserlauter American on fluoride which was clearly written with concise, informative, and motivating information. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> 9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing) He maintains high standards of decorum, dress, and appearance and is a willing participant in military activities. He participated in the wing retreat ceremonies showing his dedication to high military professional ideals. </td> <td style="text-align:center;">0</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> 10. HUMAN RELATIONS (Eq. of opportunity, participation, sensitivity) He participates in the equal opportunity program and displays a courteous professional attitude towards all. 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LEADERSHIP (Initiative, accept responsibility) Capt Rampton has demonstrated his potential for leadership in his duties at the casualty collection point during wing readiness exercises and was appointed one of the chain leaders in the recall system because of his dependable leadership qualities.	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. ADAPTABILITY TO STRESS (Stable, flexible, dependable) During his training at the combat casualty care course, Capt Rampton demonstrated his perseverance in the face of difficulty by coping with discomfort, long working hours, unusual working conditions and having to digest volumes of new material.	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. 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IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION: Concern for patients

2. SUGGESTED JOB (Include AFSC): General Dentist (9826)

3. ORGANIZATION LEVEL: Wing/Medium size clinic

4. TIMING: June 1984

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.

RATER			ADDN RATER			INDORS-ER			RATER			ADDN RATER			INDORS-ER			RATER			ADDN RATER			INDORS-ER								

Lowest ←

→ Highest

VI. RATER COMMENTS Capt Rampton has continually excelled in all his varied activities in the clinic and in the community. He donates many hours to the Boy Scout Program and is a merit badge counselor for the dental merit badge. He also is an active member in his church performing countless hours of clerical assistance. A devoted family person, Capt Rampton exemplifies to all a positive image of a caring helpful person. He sponsored the first female dentist at this clinic and was very unselfish with his time and resources to provide her with a good image of the military and the clinic. He has always provided excellent care to his patients with an attitude of dedication to the job and to the people he serves. He is always willing to help other dentists when he has free time and looks out for the welfare of others. His willingness to perform outside of the clinic in challenging tasks prompted him to be selected to the air transportable hospital. He is an outstanding young man and Air Force officer and should be accepted for indefinite reserve status. Promote with peers.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION MELVIN J. SOKOLOWSKY, Maj, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE General Dental Officer	DATE 2 Jun 83
SSAN 535-52-8195FV	SIGNATURE <i>Melvin J. Sokolowsky</i>	

VII. ADDITIONAL RATER COMMENTS CONCUR NONCONCUR
 Capt Rampton has performed admirably for the clinic in the Casualty Collection Point during wing readiness exercises. His ability to triage, treat casualties, and perform life saving techniques was also recognized during his Combat Casualty Care Course and Advanced Life Support Course. During this course he passed both the didactic and practical sections for certification by the American College of Surgeons. His pursuit of difficult challenges has also been demonstrated this year by his participation and completion of prosthodontic and periodontic rotations.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION GEORGE I. DAUGHERTY II, Col, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE Base Dental Surgeon	DATE 2 Jun 83
SSAN 055-26-2729FR	SIGNATURE <i>George I. Daugherty II</i>	

VIII. INDORSER COMMENTS CONCUR NONCONCUR
 Capt Rampton's performance as the dental radiology officer was verified by the excellent rating for the radiology section in the May 1983 HSMI. He formulated guidelines for quality assurance and developed an operating manual for the clinic's radiology section. His survey of other USAFE dental clinic radiology sections has enhanced the quality of radiologic efforts and built a solid framework for future improvements. He will be an asset to any organization he works for in the future.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION JAMES G. CALENE, Col, USAF, MC, FS USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	DUTY TITLE Commander	DATE 2 Jun 83
SSAN 504-26-3124FR	SIGNATURE <i>James G. Calene</i>	

I. RATEE IDENTIFICATION DATA (Read AFR 36-10 carefully before filling in items)			
1. NAME (Last, First, Middle Initial)	2. SSAN (Include Suffix)	3. GRADE	4. DAFC
RAMPTON JASON M.	529-78-1042FV	CPT	9826
5. ORGANIZATION, COMMAND, LOCATION			6. PAS CODE
USAF Clinic Ramstein (USAF), Ramstein Air Base, Germany			RFODFV8D
7. PERIOD OF REPORT		8. NO. DAYS OF SUPERVISION	9. REASON FOR REPORT
FROM: 2 Jun 81 THRU: 1 Jun 82		346	ANNUAL
II. JOB DESCRIPTION 1. DUTY TITLE: CLINIC DENTAL OFFICER GENERAL			
2. KEY DUTIES, TASKS AND RESPONSIBILITIES: Examines, diagnoses and treats disease, abnormalities, injuries and defects of the teeth and investing tissues. Evaluates findings of roentgenograms and diagnostic tests. Evaluates findings of treatment required. Instructs patients in preventive measures for dental health. Is responsible for the supervision and continuous dental training of the technician assigned to him. ADDITIONAL DUTIES: Assistant Preventive Dentistry Officer and Assistant Radiology Officer.			
III. PERFORMANCE FACTORS			
<i>Specific example of performance required</i>	NOT OBSERVED OR NOT RELEVANT	FAIR/BELOW STANDARD	BELOW/STANDARD
			MEETS STANDARD
			ABOVE/STANDARD
			WELL/ABOVE STANDARD
1. JOB KNOWLEDGE (Depth, currency, breadth)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Captain Rampton consistently displays knowledge above that expected of a recent dental graduate. He actively uses this knowledge in the pursuit of new ideas and methods improving both the quality and quantity of dental care rendered.			
2. JUDGMENT AND DECISIONS (Consistent, accurate, effective)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
During his rotations in Endodontics, Oral Surgery, Pedodontics, and the Examination Room, he has repeatedly assessed diverse patient symptoms to arrive at the correct diagnosis and treatment.			
3. PLAN AND ORGANIZE WORK (Timely, creative)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
He devises the most efficient and frugal means to accomplish his procedures on each person treated.			
4. MANAGEMENT OF RESOURCES (Manpower and material)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
By efficiently using auxiliary personnel and training them in material conservation he has increased his output at a lower cost per procedure.			
5. LEADERSHIP (Initiative, accept responsibility)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Captain Rampton continuously seeks additional responsibility. He has complete confidence that he can perform any task assigned.			
6. ADAPTABILITY TO STRESS (Stable, flexible, dependable)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Captain Rampton can handle even the most apprehensive patient with relative ease. He also comports himself in admirable professional aplomb in the inevitable crises of difficult clinical situations.			
7. ORAL COMMUNICATION (Clear, concise, confident)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
His clear, concise presentations in in-house presentations have greatly contributed to the development of improved dental standards within this facility.			
8. WRITTEN COMMUNICATION (Clear, concise, organized)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is able to explain technical data in a way that readers of all levels can easily understand.			
9. PROFESSIONAL QUALITIES (Attitude, dress, cooperation, bearing)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has consistently discussed with me the need to maintain and continue professional attitudes and qualities at all levels of the clinic.			
10. HUMAN RELATIONS (Equal opportunity participation, sensitivity)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Actively supports equal opportunity showing a genuine concern that all people receive fair and just treatment.			

IV. ASSIGNMENT RECOMMENDATION: 1. STRONGEST QUALIFICATION **Conscientious**

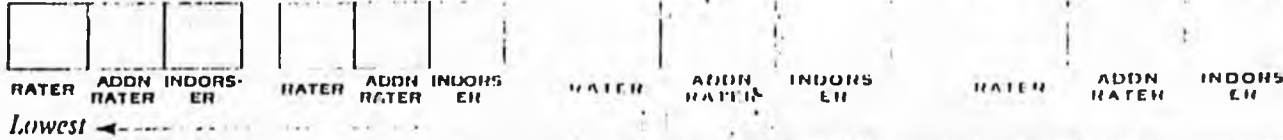
2. SUGGESTED JOB (Include AFSC) **General Dentist (9826)**

3. ORGANIZATION LEVEL **Hospital or Clinic**

4. DATE **June 1984**

V. EVALUATION OF POTENTIAL:

Compare the ratee's capability to assume increased responsibility with that of other officers whom you know in the same grade. Indicate your rating by placing an "X" in the designated portion of the most appropriate block.



VI. RATER COMMENTS Captain Rampton is a dedicated, energetic young dental officer. Although possessing knowledge above that normally expected of a recent dental graduate, he has shown a constant drive to increase his professional knowledge even further. This was quite evident especially during his rotations through the dental specialty departments. His work in the Ramstein Elementary School as Assistant Preventive Dental Health Officer during National Dental Health Week is noteworthy. He has attended the United States Army General Dentistry Conference and is a member of the Western Germany Armed Forces Dental Society. Captain Rampton is a very efficient and effective health care provider who needs very minimal supervision. He is considering a career in the Air Force Dental Corps and I feel he should be granted indefinite reserve status as soon as possible.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
THOMAS P. LANIEWICZ, Major, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein Air Base, Germany	Ofc Dental Clinic Two	2 Jun 1982
SSAN	SIGNATURE	
172-32-9436FV	<i>[Signature]</i>	

VII. ADDITIONAL RATER COMMENTS CONCUR NONCONCUR
 Captain Rampton has been cooperative in every sense both as a health care team member and as a military officer. He has supported the needs of his organization and his patients to the very best of his abilities. Throughout this rating period, Captain Rampton has given his full attention to the improvement of his clinical skills and has achieved noticeable gains in that behalf. A straightforward and dependable dental officer, Captain Rampton has been repeatedly praised by his patients for the courtesy and consideration with which he has administered his treatments.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
DONALD P. MORSE, Colonel, USAF, DC USAF Clinic Ramstein (USAFE) Ramstein Air Base, Germany	Base Dental Surgeon	3 Jun 1982
SSAN	SIGNATURE	
154 5-0825FR	<i>[Signature]</i>	

VIII. INDORSER COMMENTS NONCONCUR
 Captain Rampton has enthusiastically met the rigorous tasks and erratic working hours associated with exercising the second echelon of mass casualty care. His participation in the Medical Red Flag war readiness course, the animal model training program, and a hospital operating room cross training rotation was enhanced by his sincerity and professionalism. The efficacy of his judgments has been demonstrated by the conservative and durable nature of the dental restorations and counselings he has provided. Captain Rampton's genuine concern about the welfare of others has been an obvious influence on his performance. His attitudes toward supporting the military mission, broadening his expertise in dentistry, and complying with supervisory leadership have been most credible.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	DUTY TITLE	DATE
WILLIAM E. PALMA, Col, USAF, MC, CFS USAF Clinic Ramstein (USAFE) Ramstein AB, Germany	Commander	4 Jun 1982
SSAN	SIGNATURE	
050-30-7669FR	<i>[Signature]</i>	



Senate Finance Committee

Rick Halford, Senator

This is a typical
record of professional
continuing education. This
is available on any
federally employed dentist.

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

AUTHORITY: 10 U.S.C. 8112 and EO 9397

PURPOSE: To provide a record of an individual's participation in continuing health education activities.

ROUTINE USE: Used by individual practitioners to report personal continuing education accomplishments. SSAN is used for positive identification of individual and records.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may preclude awarding clinical privileges.

INSTRUCTIONS

Use continuously until form is completely filled out. Begin a new form and attach to old form. All forms must remain with the credentials file until it is destroyed.

I. IDENTIFICATION			
NAME (Last, First, Middle Initial) <i>RAMPTON, JASON M.</i>	GRADE <i>MAJ</i>	SSAN <i>529-78-1042</i>	CORPS <i>Dental</i>
DUTY ADDRESS (PENCIL ONLY) <i>USAF Hosp, Hensley Eldorado AFB, TX</i>	SPECIALTY	PAFSC <i>9826</i>	2AFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

Category 1 - CME activities with accredited sponsorship or cosponsorship
 Category 2 - CME activities with non-medical sponsorship
 Category 3 - Medical teaching
 Category 4 - Papers published, exhibits, etc.
 Category 5 - Nonsupervised CME (self-instruction, consultation, self-assessment, etc.)

Refer to the American Medical Association Information Booklet for Physician Recognition Award for more detailed definitions.

DESCRIPTION OF ACTIVITY (Title of course, meeting, lecture, paper, self-instruction, etc.)	NAME OF SPONSOR	LOCATION	INCLUSIVE DATES	NUMBER OF CREDIT HOURS	CREDIT CATEGORY (1-5)
<i>Area in the OR</i>	<i>Maj Landers</i>	<i>EAFB, AK</i>	<i>13 Oct 88</i>	<i>1</i>	<i>1</i>
<i>Bleaching of teeth</i>	<i>Lt Col Tripp</i>	<i>EAFB, AK</i>	<i>27 Oct 88</i>	<i>1/2</i>	<i>1</i>
<i>Tooth isolation & control</i>	<i>Lt Col McKenzie</i>	<i>EAFB, AK</i>	<i>10 Nov 88</i>	<i>1</i>	<i>1</i>
			<i>Reviewed 28 Nov 88</i>		
			<i>THEODORE C. ALMQUIST, COL, USAF, DC BASE DENTAL SURGEON</i>		
<i>CPR Recertification</i>	<i>USAF Hospital</i>	<i>EAFB, AK</i>	<i>16 Nov 88</i>	<i>4</i>	<i>1</i>
<i>Lypho Hypothermia injuries</i>	<i>Capt Carpenter</i>	<i>EAFB, AK</i>	<i>12 Jan 88</i>	<i>.5</i>	<i>1</i>
<i>Neurological Injuries</i>	<i>Maj Frelch</i>	<i>EAFB, AK</i>	<i>12 Jan 88</i>	<i>.5</i>	<i>1</i>
<i>Pain Control Techniques</i>	<i>Col Schutte</i>	<i>EAFB, AK</i>	<i>20 Jan 88</i>	<i>1</i>	<i>1</i>
<i>Pediatric Dentistry</i>	<i>Lt Col Rominger</i>	<i>EAFB, AK</i>	<i>9 Feb 89</i>	<i>1</i>	<i>1</i>
<i>Endo Therapy</i>	<i>Col Bill Rome</i>	<i>EAFB, AK</i>	<i>23 Feb 89</i>	<i>1</i>	<i>1</i>
<i>CPR Instructor Course</i>	<i>Major Harpel</i>	<i>EAFB, Hosp</i>	<i>8-10 Mar 89</i>	<i>21</i>	<i>1</i>

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

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I. IDENTIFICATION			
NAME (Last, First, Middle Initial)	GRADE	SSAN	CORPS
Rampton, Jason M.	Major	529-78-1042	Dental
DUTY ADDRESS (PENCIL ONLY)	SPECIALTY	PAFBC	2AFSC
USAF Reg Hosp Elmendorf AFB, AK		9826	

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

Category 1 - CME activities with accredited sponsorship or cosponsorship
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(Tit) CME FY 88 RS
 RAMPTON, JASON MAJ CREDIT CATEGORY (1-6)

DESCRIPTION	SPONSOR	LOCATION	DATE	HOURS	CAT	TOTAL
Endodontic Diagnosis (1)	Col Rome	Elmendorf, AK	22Oct87	1.0	1	1.0
Pedodontic Management	LtCol Rominger	Elmendorf, AK	12Nov87	1.0	1	2.0
Porcelain Veneers	LtCol Cameron	Elmendorf, AK	10Dec87	1.0	1	3.0
TMJ Radiology	Col Schutte	Elmendorf, AK	17Dec87	.5	1	3.5
Endodontic Diagnosis (2)	Col Rome	Elmendorf, AK	14Jan88	1.0	1	4.5
Initial Perio Therapy	Col DeNucci	Elmendorf, AK	28Jan88	1.0	1	5.5
Maxillofacial Trauma	Maj Gaus	Elmendorf, AK	11Feb88	1.0	1	6.5
Temporary Restorations	LtCol Golden	Elmendorf, AK	25Feb88	.5	1	7.0
Oral Surg Emergencies	Col Schutte	Elmendorf, AK	10Mar88	1.0	1	8.0
Maxillofacial Prosthetics	Col Saunders	Elmendorf, AK	24Mar88	1.0	1	9.0
Suturing Technique	Maj Gaus	Elmendorf, AK	31Mar88	1.5	1	10.5
Patient Sensitivity	Maj Garcia	Elmendorf, AK	14Apr88	1.0	1	11.5
Orthopedic Injuries and Shock and IV Fluid Therapy--						
	Videotapes	Elmendorf, AK	28Apr88	1.0	1	12.5
Flight Dentistry (DNIF)	Col Jaeger	Elmendorf, AK	16May88	.5	1	13.0
Medical Malpractice, Informed Consent and Third Party Liability-----						
	Capt Halbert	Elmendorf, AK	19May88	.5	1	13.5
Intraoral Photography	Col Denucci	Elmendorf, AK	25Aug88	.5	1	14.0
Remote Site Dentistry	Maj Wyman	Elmendorf, AK	22Sep88	1.0	1	15.0
ACLS	USAF Hospital	Elmendorf, AK	29,30Sep88	16.0	1	31.0

=====
 FY 1988 Total 31.0 hours *John D. New 88*

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

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INSTRUCTIONS

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I. IDENTIFICATION

NAME (Last, First, Middle Initial) Rampton, Jason M.	GRADE Maj	SSAN 529-78-1042	CORPS Dental
DUTY ADDRESS (PENCIL ONLY) USAF Reg Hosp Elmendorf AK	SPECIALTY Dentistry	PAFSC 9826	2AFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

- Category 1 - CME activities with accredited sponsorship or cosponsorship
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DESCRIPTION	SPONSOR	LOCATION	DATE	HOURS	CAT	TOTAL
Anes & Airway Mgt	Dr Fronefield	Elmendorf, AK	9Oct86	1	1	1.0
Endo Restorations	Dr Rome	"	27Oct86	2	1	3.0
TMJ Study Club	Dr Saunders	"	Oct86	9	1	12.0
Endo Emerg	Dr Rome	"	13Nov86	1	1	13.0
Prev Dent Course	LtCol Malsey	Brooks, TX	1-5Dec86	40	1	53.0
Pedo Short Course	LtCol Barrus	Elelson, AK	Jan87	8	1	61.0
Perlo Emerg	Dr Marttala	Elmendorf, AK	29Jan87	1	1	62.0
General Dent	Dr Giles	"	15Jan87	3.5	1	65.5
Forensic Dent	Dr Burke	"	12Feb87	1	1	66.5
Oral Surg Emerg	Dr Schutte	"	26Feb87	1	1	67.5
Maxillofacial Inj	Dr Van Asma	"	12Mar87	1	1	68.5
Oral Pathology	Dr Slater	"	26Mar87	4	1	72.5
Suturing	Dr Schutte	"	9Apr87	1	1	73.5
Pros Emergencies	Dr Saunders	"	23Apr87	1	1	74.5
Itinerant Dent	Dr Rome	"	14May87	1	1	75.5
Flight Dentistry	Dr Jaeger	"	28May87	1	1	76.5
Restorative Dent	Dr Bowers	"	11Jun87	1	1	77.5
TMJ Dysfunction	Dr DeNucci	"	23Jul87	1	1	78.5
Laboratory Relations	LtCol Rudd	"	23Sep87	1	1	79.5
Anes & Airway Mgt	Col Fronefield	"	24Sep87	.5	1	80.0
OR Protocol	Capt Gardiner	"	24Sep87	1	1	81.0
Child Abuse Prev Sem	Dr Krugman	Ft Richardson, AK	24Sep87	7	1	87.0
CPR	USAF Reg Hosp	Elmendorf, AK	Sep87	4	1	91.0

FY 1987 Total 91.0 hours *JA 2870058*

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

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I. IDENTIFICATION

NAME (Last, First, Middle Initial) Rampton, Jason M.	GRADE Capt	SSAN 529-78-1042	CORPS Dental
DUTY ADDRESS (PENCIL ONLY)	SPECIALTY General Dentistry	PAFSC 9826	ZAFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

- Category 1 - CME activities with accredited sponsorship or cosponsorship
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DESCRIPTION OF ACTIVITY (Title of course, meeting, lecture, paper, self-instruction, etc.)	NAME OF SPONSOR	LOCATION	INCLUSIVE DATES	NUMBER OF CREDIT HOURS	CREDIT CATEGORY (1-5)
Surgical Endodontics/ Endodontics Update	Maj Williams	GAFB	23 Apr 85	3.0	1
Potpourri of Dentistry	Maj Strauss	GAFB	16 May 85	1.0	1
ACLS	Maj Reugemer	GAFB	Feb 85	16	1
OR Training	Lt Misco	GAFB	17 Apr 85	4	2
OR Training	Lt Misco	GAFB	5 Jun 85	4	2
Ultra fining Technique	Star Dental Dorothy Griswald	GAFB	6 Jun 85	2	2
3rd Molar Surgery	Dr. Karl Kounec	Las Vegas	25-26 Jul 85	14	1
CPR	SSgt Medaugh	GAFB	3 Sep 85	4	1
Forensic Dentistry	Col Gray	GAFB	5 Sep 85	1	2
Endo Emergencies	Maj Eng	GAFB	5 Sep 85	1	2
Fractures/Trauma	Maj Rethman	GAFB	5 Sep 85	1	2
Intro To Anesthesia	Capt Miller	GAFB	3 Oct 85	4	2
Dental Legal Briefing	Maj Johnson	GAFB	9 Oct 85	1	2
Dental Materials Briefing	Premier Dental Lee Westfall	GAFB	17 Oct 85	2	2
ADA Scientific Session	ADA	San Francisco	2-5 Nov 85	24	2
Dental Products Demonstration	Brasler Dental Patrick Flanagan	GAFB	21 Nov 85	2	3
Infection Control Briefing	Dr Ranpton	GAFB	9 Jan 86	.5	3

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

AUTHORITY: 38 CFR 171.101-101
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I. IDENTIFICATION			
NAME (Last, First, Middle Initial) Rampton, Jason M.	GRADE Captain	SSAN 529-78-1042	CORPS Dental
DUTY ADDRESS (PENCIL ONLY) <i>Hospital / General Dent</i>	SPECIALTY General Dentistry	PAFSC 9826	2AFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

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Wartime Mission/Dependent Dental Care/Continuation Pa	Brig. General Sachsel	GAFB	13 July 84	1.0	2
Protocol for I.V. Sedations and Biopsy	Capt. J. Law	GAFB	19 Sept 84	.50	2
Protocol for Hospital Admit	Capt. J. Law	GAFB	24 Sept 84	.25	2
Pit & Fissure Sealants	Capt. L. Masuoka	GAFB	24 Sept 84	.50	2
Update on Local Anesthetics Marcaine	Maj. W. Raines	GAFB	24 Sept 84	.50	2
SCI/FSO/3rd Party Liability	Col. G. Gray	GAFB	1 Nov 84	.25	2
Code Blue Brief	Capt. M. Crooks	GAFB	1 Nov 84	.25	2
Radiology QA	Maj. R. Eng	GAFB	1 Nov 84	.25	2
Infection Control	Capt. J. Rampton	GAFB	1 Nov 84	.25	2
Environmental Safety	Capt. J. Powers	GAFB	1 Nov 84	.25	2
Waste, Fraud, Abuse	SSgt. Powell	GAFB	1 Nov 84	.25	2
Preventive Dentistry	Capt. D. Crooks	GAFB	1 Nov 84	.25	2
Child Abuse & The Dentist	Capt. D. Crooks	GAFB	15 Nov 84	.25	2
Code Blue Excerise	Capt. M. Crooks	GAFB	15 Nov 84	.50	2
Infection Control	TSgt. Shafer	Commander's Call GAFB	15 Nov 84	.25	2
TMJ Dysfunction Surgical Aspects	Dr Jack Hankle	GAFB	13 Dec 84	2.0	1
Orthodontic Diagnosis and Minor Tooth Movement	Capt. S. Brizendine	GAFB	28 Feb 85	3.0	1

DESCRIPTION OF ACTIVITY (Title of course, meeting, lecture, paper, self-instruction, etc.)	NAME OF SPONSOR	LOCATION	INCLUSIVE DATES	NUMBER OF CREDIT HOURS	CREDIT CATEGORY (1-5)
X-ray Safety Briefing	TSgt Armstrong	GAFB	9 Jan 86	.25	2
Nitrous & IV Sedation	Maj Rethman	GAFB	3 Mar 6 Feb 86	4	2
Forensic Odontology	Dr Gordon Freeman	Norton AFB	27 Feb 86	1	1
Forensic Exercise	Col Gray	GAFB	28 Feb 86	1	2
MPD/TMJ Lecture	Maj Schnieder	GAFB	5 Mar 86	2	1
Pros Considerations	Lt Col Tebrock	GAFB	17 Mar 86	4	1
Hepatitis & Aids Review	Col Gray, Maj Eng	GAFB	3 Apr 86	15 min	3
Intro to Hosp Anesthesia	Capt Miller	GAFB	3 Oct 85	4	2
Maxillofacial Injuries	Maj Rethman	GAFB	17 Dec 85	2	2
Intro to OR Part I.	Maj Rethman	GAFB	5 Jun 86	2	2
Precision Attachments/Aids & Dental Infection Control	Maj Kenneth Hsu	GAFB	19 Jun 86	2	2
Dental Forensic Presentation	Maj K. Hsu	GAFB	25 Jun 86	1	2
Dental Emergencies/Suturing	Maj Bradford	GAFB	3 Jul 86	2	2
Patient Sensitivity	USAF Film	Elmendorf, AK	14 Aug 86	1	1
Forensic Dentistry	Dr Kalal	Elmendorf, AK	28 Aug 86	1	1
Infectious Control	Sue Crow	Elmendorf, AK	29 Aug 86	1	1

III. CARDIOPULMONARY RESUSCITATION TRAINING (DATES)

BASIC LIFE SUPPORT	REFRESHER TRAINING	ADVANCED CARDIAC LIFE SUPPORT	ADVANCED TRAUMA LIFE SUPPORT	INITIALS OF VERIFYING OFFICIAL
FEB. 85		FEB. 85		Dr. PEILGENDER
SEPT 86				(S.S.)

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

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I. IDENTIFICATION			
NAME (Last, First, Middle & Initial) Rampton JASON R.	GRADE Capt.	SSAN 529-78-1042	CORPS ZAFSC
DUTY ADDRESS (PENCIL ONLY)	SPECIALTY	PAFSC	ZAFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

- Category 1 - CME activities with accredited sponsorship or cosponsorship
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DESCRIPTION OF ACTIVITY (Title of course, meeting, lecture, paper, self-instruction, etc.)	NAME OF SPONSOR	LOCATION	INCLUSIVE DATES	NUMBER OF CREDIT HOURS	CREDIT CATEGOR (1-5)
Review of Dent Lit	Robbins	Rampton	6 Oct 83	1	1 JMR
Oral Path + Ding	Robbins	1	12 Oct 83	1	1 JMR
Oral Surg I	Jarwood	1	20 Oct 83	1	1 JMR
West Vir. Dent Society		Gardner	15 Nov 83	1	1 JMR
Lit Review 3 hrs	Jarwood	(Rampton)	17 Nov 83	1	1 JMR
Lit Review 3 hrs	Jarwood	1	1 Dec 83	1	1 JMR
Lit Review 3 hrs	Jarwood	1	1 Nov 83	1	1 JMR
Oral Path.	Jarwood	1	22 Nov 83	1	1 JMR
Lit Review	1		15 Dec 83	1	1
Lit Review	1		4 Jan 84	1	1
TMJ & Jaws Disease	Jarwood		19 Mar 84	1	1
Operative Dentistry	Robbins		19 Mar 84	1	1
Cleft Management	Jarwood		6 Apr 84	1	1
Oral Surg Gen Dent	Jarwood		13 June 84	1	1
IV Sedation	Jarwood		13 June 84	1	1
How to Use	Rampton		30 Apr 84	1	1

SPECIAL TASK CERTIFICATION AND RECURRING TRAINING

TASK OR RECURRING TRAINING AND STUDY REFERENCES	EVALUATION OR TRAINING				EVALUATOR OR INSTRUCTOR	TRAINEE INITIAL	SUPERVISOR OR CERTIFYING OFFICIAL
	TYPE	DATE COMPLETED	SCORE OR HOURS	DUE DATE			
A	B	C	D	E	F	G	H
CONT. EDUC. 200 S/C VS GEN DENT		9 Mar 83	1		Dr. Lewis	JMR	[Signature]
W. GERMAN D. SOC. RE-PROTH. SURG		17 Mar 83	1		Dr. Hobden	JMR	[Signature]
Cont. EDUC Electrosurgery		3 MAR 83	1		Dr. Robbins	JMR	[Signature]
Cont. EDUC ORAL Pathology		13 Apr 83	1		Dr. Hobden	JMR	[Signature]
W. GERMAN D. SOC. FIXED PROS.		21 Apr 83	1		Dr. Lewis	JMR	[Signature]
Cont. EDUC Lit Rev TMJ Pathology		5 MAY 83	1		Dr. Richter	JMR	[Signature]
AMERICAN Dent. Assoc. LTS Jc 45	PT STY	5-9 Nov 83	20			JMR	[Signature]
Cont. ED Pros/Therapeutics		11 May 83	1		Dr. Seikowicz Dr. Robbins	JMR	[Signature]
Prosthetics Rotation	CLINIC	10 Oct 82 - 31 Jan 83	100		Dr. Brandt	JMR	[Signature]
Periodontics Rotation	CLINIC	1 Feb 83 - 27 May 83	100		Dr. Wasserman	JMR	[Signature]
Endosseous EAO		4 June 83	1		Dr. Schiller	JMR	[Signature]
Cleaning and Shaping		8 June 83	1		Dr. Leppan	JMR	[Signature]
Hypnosis		17 July 83	1		Dr. Dowd	JMR	[Signature]
Med History from Med Review		13 July 83	1		J. Kramer	JMR	[Signature]
Pregnancy and Dentistry		21 July 83	1		M. Seikowicz	JMR	[Signature]
Pedo cases Removal of 3rd Molars		4 Aug 83	1		L. Corry V. Farheed	JMR	[Signature]
Med History from Dental View		10 Aug 83	1		V. Farheed	JMR	[Signature]
Review of APOS		1 Sept 83	1		N. Andrew	JMR	[Signature]
FU Copy Sent to 45 SBIT SMSgt R. H. T. C. 55/77.5		5 Sept 83				JMR	[Signature]

NAME OF TRAINEE (Last, First, Middle Initial)	SSAN	GRADE	AFSC
RAMPTON, JASON R.	529-78-1042	CAPT	9826

SPECIAL TASK CERTIFICATION AND RECURRING TRAINING

TASK OR RECURRING TRAINING AND STUDY REFERENCES A	EVALUATION OR TRAINING				EVALUATOR OR INSTRUCTOR F	TRAINEE INITIAL G	SUPERVISOR OR CERTIFYING OFFICIAL H
	TYPE B	DATE COMPLETED C	SCORE OR HOURS D	DUE DATE E			
* CPR REFRESHER		18 MAY 82	4	TSGT RUSSI / SSET CURTIS	BY CTF	JMR	CTF AWARDED BY ANKUSO CLASS
DENT. LIT. REV. GP. - CENTRIC RELATION		20 MAY 82	1	DR. ROBBINS		JMR	
REMOVABLE PROSTHODONTICS		21 JUL 82	1	DR. ROBBINS		JMR	W/C
DENTAL LIT REVIEW GROUP		1 JUL 82	1			JMR	
DENTAL LIT REVIEW GROUP - ORAL SURGERY		5 AUG 82	1	DR. HESTER		JMR	
DENTAL LIT REVIEW GROUP - PERI-PRES		3 JUN 82	1			JMR	W/C
FY COPY send to		SGT/TSGT R. RUSSI - 2.5					
ENDO REVIEW		11 AUG	1		DR. CRAWFORD	JMR	W/C
GUTTA PERCUA FILLS		13 OCT	1		DR. LEGAN	JMR	
WESTERN GERMAN DENTAL SOC CLINICAL PHOTOGRAPHY		16 SEP	1		DR. GOETZ	JMR	
LIT REVIEW - PERIO CONT		14 OCT	1		DR. RICHTER / DR. ROBBINS	JMR	
OVERDENTURES		21 OCT	1		DR. ROBBINS	JMR	
LIT REVIEW - PEDI EMERGENCIES		4 NOV	1		DR. SWANSON	JMR	
LIT REVIEW - SPACE CONTROL		18 NOV	1		DR. LOHEN	JMR	
WESTERN GERMAN DENTAL SOC FORENSIC DENTISTRY		18 NOV	2		DR. MORLANC	JMR	
LIT REVIEW - PEDI MOLAR EVAL		2 DEC	1		DR. HILL	JMR	
STRESS MANAGEMENT		8 DEC	1		MSGT MILLER	JMR	W/C
SURGICAL EXPOSURE OF UNERUPTED TEETH		16 DEC	1		DR. ANDREN	JMR	
* COMBAT CASUALTY CARE COURSE		15 JAN 83	52		-	JMR	
Perio Potpourri		29 JAN 83	1		DR. WASSERMAN	JMR	
Pin Amalgam		3 Feb 83	1		DR. ROBBINS	JMR	
LIT. REV. TX REC HEARD LABIALS		17 Feb 83	1		R. Lee	JMR	
WG DEN SOC TRAUMA / SPLINT		17 Feb 83	1		R. Lee	JMR	W/C
* FORMAL DENTAL EDUCATION							
NAME OF TRAINEE (Last, First, Middle Initial)			SSAN	GRADE	AFSC		
RAMPTON, JASON M.			529-78-1042	CAPT	9826		

SPECIAL TASK CERTIFICATION AND RECURRING TRAINING

TASK OR RECURRING TRAINING AND STUDY REFERENCES A	EVALUATION OR TRAINING				EVALUATOR OR INSTRUCTOR F	TRAINEE INITIAL G	SUPERVISOR OR CERTIFYING OFFICIAL H
	TYPE B	DATE COMPLETED C	SCORE OR HOURS (AGD hrs) D	DUE DATE E			
Member arrived on station 20 JUN 81							
REMOVABLE PARTIAL DENTURE DESIGN		12 AUG 81	1	DR. STRAUHNER	<i>RM Strauhner</i>	JMR	
BATTLEFIELD MEDICINE (ANIMAL MODELS 2)		26 AUG 81	3 1/2	DRS PEPPERD & HUMMEL	BY CTF	JMR	CTF AWARDED
MEDICAL MED FLAG EXERCISE - MUNICH		31 AUG - 2 SEPT 81	28	AFMPC SURG OFF.	BY CTF	JMR	CTF AWARDED BY AFMPC SURG. OFF.
CEMENTS & CEMENTATION		9 SEP 81	1	DR. BRAUDT	<i>R. B. Braudt</i>	JMR	
FREE GINGIVAL GRAFTS		25 SEP 81	1	DR. BRENNAN	DR. BRENNAN	JMR	
BLEACHING OF ENDODONTIC TEETH		1 OCT 81	1	DR. LEGAN	<i>O. Y. Legan</i>	JMR	
25TH ANNUAL OF THE ARMY & USAREUR DENTAL TRAINING CONFERENCE		14 - 17 OCT 81	25	USAREUR & 7F ARMY	USAREUR & 7F ARMY	JMR	CTF AWARDED
ORAL PATHOLOGY CONFERENCE @ LANDSTUHL HOSPITAL		27 NOV 81	1	DR. LARSEN	DR. LARSEN	JMR	
ORAL SURGERY ROTATION		1 - 30 NOV 81	(20) 80	DR. HEDDA	<i>H. Hedda</i>	JMR	<i>Col. B.D.S.</i>
CONFERENCE ON ORAL PATHOLOGY		3 DEC 81	2	DR. BRANNON	DR. BRANNON	JMR	
SPLINTING OF FRACTURES		10 DEC 81	2	DR. BURNER	DR. BURNER	JMR	
ORAL SURGERY ROTATION		1 - 31 DEC 81	(20) 80	DR. HEDDA	<i>H. Hedda</i>	JMR	<i>Col. B.D.S.</i>
MAXILLOFACIAL TRAUMA I		20 JAN 82	1	DR. HEDDA	<i>H. Hedda</i>	JMR	
ENDODONTICS ROTATION		1 - 31 JAN 82	(20) 80	DR. LEGAN		JMR	
LANDSTUHL O.R. ROTATION - ORTHOPEDICS		8 - 12 FEB 82	32	LANDSTUHL O.R. STAFF		JMR	
BATTLEFIELD MEDICINE - ANIMAL MODELS (AFM 160-37)		19 MAR 82 EXPIRES: 26 FEB 83	3	DR. PEPPERD	BY CTF	JMR	CTF AWARDED BY 8L TFW CLINIC
PERIAPICAL SURGERY		18 MAR 82	1	DR. LEGAN		JMR	
ORAL HABITS		14 APR 82	1	DR. SACHSEL	DR. SACHSEL	JMR	
ORAL DIAGNOSIS ROTATION		1 - 30 APR 82	(20) 80			JMR	
ENDODONTICS ROTATION		1 - 25 FEB 82	(20) 80	DR. LEGAN		JMR	
INTRASRAL PHOTOGRAHY		12 MAY 82	1	DR. STRAUHNER	DR. STRAUHNER	JMR	
DENT. LIT. REV. GP. - OCCLUSION		6 MAY 82	1	DR. RUBRINS		JMR	
FORMAL DENTAL EDUCATION							
NAME OF TRAINEE (Last, First, Middle Initial)		SSAN		GRADE		AFSC	
RAMPTON JASON M.		529-78-1042		Capt		9826	



Senate Finance Committee

Rick Halford, Senator

This is a typical
credentials folder used
for Federally employed
dentists

APPLICATION FOR CLINICAL PRIVILEGES

AUTHORITY: Title 10, U.S.C. Chapter 55 and Sections 8067 and 8012.

PRINCIPAL PURPOSE(S): To evaluate each practitioner's formal education, training, clinical experience, and evidence of physical, moral, and ethical capacities and to assist the Credentials Committee in making recommendations with regard to the practitioner's competence to treat certain conditions and perform certain medical procedures.

ROUTINE USE(S): Information may be released to government boards or agencies or professional societies or organizations if needed to license or monitor professional standards of health care practitioners. It may also be released to civilian medical institutions or organizations where the practitioner is applying for staff privileges during or after separating from the service.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges.

APPLICANT COMPLETES SECTION I THROUGH IX

I. IDENTIFICATION

NAME (Last, First, Middle Initial)		GRADE	SSN	DATE
RAMPTON JASON M		Capt	529-78-1042	12 Jul 81
HOME ADDRESS (City, State and ZIP Code)		DUTY PHONE NO.	HOME PHONE NO.	
9711 TAKLI Cir		99577		
MEDICAL FACILITY/UNIT OF ASSIGNMENT	DUTY SECTION	PRIMARY/SECONDARY AFSC	SPECIALTY	CORPS
Elmendorf AFB Hosp	SGD	9826	General Dentist	Dentist

II. PROFESSIONAL EDUCATION

NAME OF PROFESSIONAL SCHOOL	LOCATION	DATES ATTENDED		DEGREE
		FROM	TO	
University of Louisville	Louisville, Ky	Aug 77	May 81	DMD

III. POST GRADUATE TRAINING (Internship, Residency, Fellowships)

NAME OF HOSPITAL OR INSTITUTION	LOCATION	TYPE PROGRAM (Residency, etc.)	DATES ATTENDED	
			FROM	TO

IV. PRESENT AND PREVIOUS MILITARY AND CIVILIAN ASSIGNMENTS (Continue on Reverse)

NAME OF HOSPITAL OR ORGANIZATION	LOCATION	SERVICE OR SPECIALTY TO WHICH ASSIGNED	DATES ATTENDED	
			FROM	TO
Ramstein AFB Clinic	Ramstein, Germany	Dental	Jun 81	Jun 84
George AFB Hosp	George AFB, Ca	Dental	Jul 84	Jul 86

IV. PRESENT & PREVIOUS MILITARY & CIVILIAN ASSIGNMENTS (Continued) (If additional space is needed continue on separate sheet of paper.)

NAME OF HOSPITAL OR ORGANIZATION	LOCATION	SERVICE OR SPECIALTY TO WHICH ASSIGNED	DATES ATTENDED	
			FROM	TO

V. CERTIFICATION/LICENSURE

FULLY QUALIFIED IN (Specialty)		BOARD ELIGIBLE IN	
BOARD CERTIFICATION BY (Specialty Board)	CERTIFICATE NUMBER	DATE ISSUED	EXPIRATION DATE
Western Regional Mental Board	03006-0701-7		
STATE LICENSURE (Name of State)	LICENSE NUMBER	DATE ISSUED	EXPIRATION DATE
Utah	03006-0701-7	26 FEB 86	31 DEC 88
Arizona	3523	8 Aug 86	Aug 89

VI. MEMBERSHIP IN PROFESSIONAL SOCIETIES (If additional space is needed continue on separate sheet of paper.)

NAME OF SOCIETY	STATUS (Member, Fellow, etc.)
ADA	member

VII. REFERENCES (Every practitioner MUST list three references. Two must be the former Chief of Professional Services and service chief at your previous facility, if you had them.)

NAME	ADDRESS (City/Base, State, Zip Code)	TELEPHONE NUMBER
Col. Gary Gray	HOSP George AFB, Ca 92394	269-3960
Maj Ron Eng	"	269-3960
Col. J. K. Plumber	"	

VIII. CREDENTIALS ACTION HISTORY (If answer to any of the following questions is "YES," give full details in "Remarks" or on separate sheet of paper.)

A. HAS YOUR LICENSE TO PRACTICE MEDICINE IN ANY JURISDICTION EVER BEEN LIMITED, SUSPENDED OR REVOKED?	YES	NO	G. HAVE YOU EVER BEEN ARRESTED OR TREATED FOR DRUG OR ALCOHOL ABUSE?	YES	NO
				✓	
B. HAVE YOU EVER BEEN REFUSED MEMBERSHIP IN A HOSPITAL MEDICAL STAFF?					
		✓	H. HAVE YOU EVER BEEN A DEFENDANT IN A FELONY CASE?		
C. HAS YOUR REQUEST FOR ANY SPECIFIC CLINICAL PRIVILEGES EVER BEEN DENIED OR GRANTED WITH STATED LIMITATIONS?					
		✓	I. HAVE YOU EVER BEEN A DEFENDANT OR THE SUBJECT OF A MALPRACTICE ACTION?		
D. HAVE YOUR PRIVILEGES AT ANY INSTITUTION EVER BEEN LIMITED, RESTRICTED, OR REVOKED?					
		✓	IF "YES" WAS THE MATTER:		
E. HAS YOUR NARCOTICS REGISTRATION EVER BEEN SUSPENDED OR REVOKED?			(1) SETTLED PRIOR TO FINAL COURT ACTION?		
		✓	(2) JUDGMENT RENDERED BY COURT?		
			(3) DEFENDANT FOUND LIABLE?		
			(4) MATTER STILL PENDING?		
F. HAVE YOU EVER BEEN DENIED MEMBERSHIP OR RENEWAL THEREOF, OR BEEN SUBJECT TO DISCIPLINARY ACTION IN ANY MEDICAL ORGANIZATION?			J. HAVE YOU EVER HAD OR PRESENTLY HAVE A SIGNIFICANT MEDICAL (Including mental health) PROBLEM?		

IX.

STATEMENT OF APPLICANT
(PLEASE READ CAREFULLY BEFORE SIGNING)

All information submitted by me in this application is true to the best of my knowledge and belief. In making this application for clinical privileges at this hospital, I acknowledge my obligation to provide continuous care and supervision of my patients, to accept committee assignments, to accept consultation assignments, and to participate in staffing the emergency area and other specialty care units.

I hereby authorize the hospital, its medical staff, and their representatives to consult with administrators and members of the medical staff of other hospitals or institutions with which I have been associated and with others who have information bearing on my professional competence, character, and ethical qualifications. I hereby further consent to the inspection by the hospital, its medical staff, and its representative of all documents, including medical records at other hospitals, that may be material to an evaluation of my professional qualifications and competence to carry out the clinical privileges requested as well as my moral and ethical qualifications for staff membership.

I hereby release from liability any and all individuals and organizations who provide information to the hospital, or its staff, in good faith and without malice concerning my professional competence, ethics, character, and other qualifications for clinical privileges, and hereby

consent to the release of such information. I further agree to release and hold harmless from any liability the United States and any and all persons who participate within the scope of their duties in good faith and without malice in the review of or any action or recommendations relating to my professional competence, ethics, character, and other qualifications. I hereby further authorize the hospital to communicate to other hospitals and to other persons or organizations with a legitimate interest therein any information concerning my professional competence, character, and ethics that the hospital may have or acquire, and, where such communication is made in good faith and without malice, I consent thereto and agree to hold the hospital and its authorized representatives free from liability, therefor. I understand and agree that I, as an applicant for clinical privileges, have the burden of producing adequate information for proper evaluation of my professional competence, character, ethics, and other qualifications and for resolving any doubts about such qualifications. I further acknowledge that I am familiar with the principles and standards of the Joint Commission on Accreditation (JCAH) and will cooperate with the hospital in maintaining JCAH standards for the hospital. I also agree to conduct any practice according to high ethical traditions. I particularly agree to subject my clinical performance to, and faithfully participate in, the hospital's quality assurance programs as the same shall from time to time be in effect.

SIGNATURE OF APPLICANT

DATE

Jason Lampton

12 Aug 86

FOR CREDENTIAL COMMITTEE USE ONLY

X. REVIEW

RECOMMEND APPROVAL DISAPPROVAL¹
 APPROVAL WITH MODIFICATION¹

RECOMMEND APPROVAL DISAPPROVAL¹
 APPROVAL WITH MODIFICATION¹

SIGNATURE OF SERVICE CHIEF

DATE

SIGNATURE OF DEPARTMENT CHAIRPERSON

DATE

.H

Harold W. Biddle

25 Aug 86

XI. PROVISIONAL, COURTESY, OR CONSULTING PRIVILEGES

APPROVAL DISAPPROVAL¹ APPROVAL WITH MODIFICATION¹

DATE

FROM 25 AUG 86 TO 21 FEB 87

SIGNATURE OF MEDICAL FACILITY COMMANDER OR DESIGNATED REPRESENTATIVE

DATE

[Signature]

25 AUG 86

XII. CREDENTIALS COMMITTEE RECOMMENDATION

DEFINED PRIVILEGES

APPROVED DISAPPROVED¹ APPROVED WITH MODIFICATION¹

SIGNATURE OF CREDENTIALS COMMITTEE CHAIRPERSON

DATE

[Signature]

23 JAN 87

XIII. MEDICAL FACILITY COMMANDER APPROVAL

CLINICAL PRIVILEGES

APPROVED DISAPPROVED¹ APPROVED WITH MODIFICATION¹

SIGNATURE OF MEDICAL FACILITY COMMANDER (MAJCOM Surgeon if MFC is not a physician)

DATE

Mr. Palmer

30 Jan 87

REMARKS

¹ Explain in "Remarks".

CREDENTIALS PRIVILEGE LIST - DENTAL

AUTHORITY: Title 10, U.S.C. Chapter 55 Sections 8067 and 8012.

PRINCIPLE PURPOSE: To assist the Credentials Committee in making recommendations with regard to the applicant's competence to treat certain conditions and perform certain dental/medical procedures.

ROUTINE USES: Information on this form may be released to government boards or agencies or professional societies or organizations if needed to license or monitor professional standards of health care applicants. It may also be released to civilian institutions or organizations where the applicant is applying for staff privileges during or after separating from the service.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges.

NAME (Print or type Last, First, Middle Initial) <i>Rampton Jason M</i>	RANK (Pencil) <i>Major</i>	ORG/DUTY SECTION <i>Hogel/SGD</i>	PRIMARY AFSC <i>9826</i>
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GENERAL INSTRUCTIONS

- A. Purpose: To allow the dental care provider to request specific professional privileges and to provide documentation of action taken on requested privileges.
 - B. Professional privileges are, for the purposes of credentialing, divided into "CORE" and "NON-CORE" privileges. "CORE" privileges are those procedures a dental officer, as a graduate of a dental school accredited by the American Dental Association, may request without justification. "NON-CORE" privileges require additional justification. See Section II for documentation of additional training and justification codes.
 - C. Applicant: Enter one of the following four code numbers in each "REQUEST" block.
Supervisor: Enter one of the following four code numbers in each "VERIFIED" block in answer to each requested privilege.

1. Perform without supervision.	3. Not requested/not verified because of duty position or facility support.
2. Perform with supervision.	4. Not requested/not verified due to lack of expertise.
- NOTE: Place an "X" after the code number to alert the reader to any exception(s). Applicant: Use Section III to explain. Supervisor: Use Section IV to explain.
- D. Any changes to privileges must be made in accordance with AFR 168-13.
 - E. Numbers found after procedure names are Department of Defense dental procedure codes provided for definition purposes only.
 - F. PRIVILEGES ARE NOT LIMITED DURING AN EMERGENCY SITUATION WHERE A TREATMENT DELAY COULD RESULT IN HARM TO THE PATIENT OR TO THE AIR FORCE.

I. CORE PRIVILEGES

APPLICANT: Enter code number (1 - 4) in "Request" block. List exceptions in Section III, "Remarks" block.
SUPERVISOR: Enter code number (1 - 4) in "Verified" block. List exceptions in Sec IV, "Recommendations" block.

PRIVILEGE (Enter Code No.)		PROCEDURES AND SERVICES	PRIVILEGE (Enter Code No.)		PROCEDURES AND SERVICES
REQUEST	VERIFIED		REQUEST	VERIFIED	
1	<i>1/26/87</i>	DIAGNOSTIC/ADJUNCTIVE			EMERGENCY DENTISTRY (CONTINUED)
		Clinical Oral Examinations (0120-0140)			Incision and Drainage (7511)
		Written Consultation (0150)			Reduction of Dislocation (7811)
		Intraoral Radiographs (0210, 0220)			Osteitis Treatment (7902)
		Extraoral Radiographs (0250, 0330)			Pericoronitis Treatment (7903)
		Local Anesthesia (9211)	1	<i>1/26/87</i>	PREVENTIVE
		Oral Sedation or Analgesia (9234)			Prophylaxis (1110, 1120)
		Other Therapeutic Medication (9630)			Topical Fluoride Application (1240, 1245)
		Prescriptions (9631)			Oral Health Counseling (1310-1331)
		Hospital Admissions without Physical Exam	1	<i>1/26/87</i>	RESTORATIVE
		Postoperative Treatment (9918)			Amalgams (2140-2161)
		Impression for Dental Cast (9923)			Glass Ionomer (2205, 2215)
		Jaw Relation Records (9924)			Resins (1350, 2320-2343)
		Mouth Protectors/Fluoride Carriers (9940)			Inlays/Onlay (2511-2541)
1	<i>1/26/87</i>	EMERGENCY DENTISTRY			Post Retention (Prefabricated) (2955)
		Recent Inlay, Crown, or Fixed Partial Denture (2910)	1	<i>1/26/87</i>	Enameloplasty or Odontoplasty (2970)
		Sedative/Temporary Restoration (2940)			ENDODONTICS
		Pulpotomy/Pulpectomy (3210-3231)			Pulp Treatments (3110-3231)
		Endodontic Interim Treatment (3360)			Root Canal Therapy (3311-3340)
		Gingival Flap (4240)	1	<i>1/26/87</i>	Bleaching of Discolored Teeth (3960)
		Reimplantation of Traumatologically Avulsed Teeth			PERIODONTICS
		Provisional Splint, Extracoronary (4321)			Gingivectomy or Gingivoplasty (4210)
		Periodontal Scaling (4342)			Gingival Curettage (4220)
		Tooth Removal (7110)			Removal of Provisional Splint, Extracoronary (4322)
		Repair Traumatic Wounds, Simple (7210, 7211)			Occlusal Adjustment, Limited (4330)
					Periodontal Scaling and Root Planing (4343)
					Root Desensitization (4351)

CORE PRIVILEGES (Continued)

PRIVILEGE (Enter Code No.)		PROCEDURES AND SERVICES	PRIVILEGE (Enter Code No.)		PROCEDURES AND SERVICES
REQUEST	VERIFIED		REQUEST	VERIFIED	
		PERIODONTICS (CONTINUED)			PROSTHODONTICS, FIXED (CONTO)
		Occlusal Splint (4361)			Crown: Stainless Steel, Aluminum, Tin (6719)
1	1/2/86	PROSTHODONTICS, REMOVABLE			Post Core, Metal (Casting) (6720)
		Complete Dentures (5110, 5130)	1	1/2/86	Composite Resin Fixed Partial Denture (6730)
		Partial Dentures (5201-5205)			ORAL AND MAXILLOFACIAL SURGERY
		Partial Denture, Corrected Cast (5330)			Alveoloplasty With Extraction (7310)
		Denture Repair (5611, 5621)			Alveoloplasty (7320)
		Denture Reline/Rebase (5731-5765)			Stomatoplasty, Uncomplicated (7340)
		Remount, Chairside (5820)			Sequestrectomy (7481)
		Amalgam Occlusals (5873)	1	1/2/86	Biopsy (7520)
1	1/2/86	PROSTHODONTICS, FIXED			ORTHODONTICS
		Crown/Retainer (6110-6160)			Space Maintainer, Removable (8110)
		Pontics (6201-6240)			Space Maintainer, Simple, Fixed (8120)
		Replace Broken Facing (6610)			Habit Breaker, Removable (8210)
		Stain And Glaze (6611)			Simple Hawley Device (8310)
		Broken Connector Repair (6612)			Removable Device Adjustment (8511)
		Crown, Resin, Interim (6710, 6711)			Separators (8521)
		Fixed Partial Denture, Interim (6714)			Band and Bonded Attachment Removal (8530)
					Repair Removable Appliance

II. NON-CORE PRIVILEGES
APPLICANT: Enter code number (1 - 4) in "Request" block. Enter a code letter in the "JUST. CODE" block. List and discuss exceptions and additions in Sec III, "REMARKS" block. **SUPERVISOR:** Enter code number (1 - 4) in "Verified" block. Discuss exceptions in Sec IV, "Recommendations" block.
ADDITIONAL TRAINING: The letters (a, b, c, etc.) corresponding to Title of Training, when filled in, are your Justification Code Letters.

Title of Training	Completion Date	Title of Training	Completion Date
a. Forensic Odontology Program	Feb 86	f.	
b. Periodontic Rotation	Feb 10, 83	g.	
c. Oral Surgery Rotation	Jun-Aug 81	h.	
d. T.M.J. Study Club	Oct 86	i.	
e. Pediatric Dentistry Preceptorship	Jan 76	j.	

NOTE: Use REMARKS section of this form to list further ADDITIONAL TRAINING and mark this box:

RE-QUEST	JUST. CODE	VERI-FIED	PROCEDURES AND SERVICES	RE-QUEST	JUST. CODE	VERI-FIED	PROCEDURES AND SERVICES
			DIAGNOSTIC/ADJUNCTIVE				ENDODONTICS (CONTINUED)
1	A	1/2/86	Post Mortem Examination (0141)				Marsupialization (3480)
4		4	Sialography (0310)	4		4	Perforation Repair (3970)
4		4	Cephalometric Film (0340)	4		4	Endodontic Endosseous Implant (3980)
4		4	Macroscopic Tissue Examination (0450)				PERIODONTICS
4		4	Microscopic Tissue Examination (0451)	1	B	1/2/86	Mesial/Distal Wedge (4230)
			RESTORATIVE THERAPY	1	19	1/2/86	Mucogingival Flap (4250)
4		4	Gold Foil Restorations (2410-2160)	4		4	Osseous Resective Surgery (4260)
4		4	Pinledge Restoration (2542)	4		4	Osseous Graft (4261)
4		4	Porcelain/Ceramic Inlay (2619)	1	19	1/2/86	Soft Tissue Graft (4270)
			ENDODONTICS	4		4	Vestibuloplasty (4272)
4		4	Apexification/Apexogenesis Treatment (3350)	4		4	Provisional Splint, Intracoronal (4320)
4		4	Apicoectomy (3410)	4		4	Occlusal Adjustment, Complete (4331)
4		4	Retrograde Filling (3420)	4		4	Hemisection (4370)
4		4	Surgical Fenestration (Trephination) (3470)	4		4	Root Amputation (4371)
				4		4	Bicuspidization (4372)
				4		4	Implant Surgery

NON-CORE PRIVILEGES (Continued)

RE-QUEST	JUST. CODE	VERI-FIED	PROCEDURES AND SERVICES	RE-QUEST	JUST. CODE	VERI-FIED	PROCEDURES AND SERVICES
			PROSTHODONTICS, REMOVABLE				ORAL AND MAXILLOFACIAL SURGERY (CONTINUED)
4		4/1	Precision Attachments (5207, 5208)			4/1	Intermaxillary Fixation (7685)
4		4/1	Overdentures (5860-5866)	4		4/1	Maxillofacial Devices (7690)
4		4/1	Metal Base (5871)	4		4/1	Arch Bar Removal (7695)
4		4/1	Cast Metal Occlusals (5872)	4		4/1	Osteotomy, Max/Man (7711-7722)
			MAXILLOFACIAL PROSTHETICS				
4		4	Maxillofacial Prosthesis Repair (5631)	4		4/1	Augmentation, Contour, Reduction (7755)
4		4/1	Prosthetic Impression (5905)	1	D	1/1/82	Myofacial Pain Dysfunction Tx. (7815)
4		4/1	Maxillofacial Prosthesis (5910)	1	D	1/1/82	Mandibular Manipulation (7835)
4		4/1	Other Prosthesis (5925)	4		4/1	TMJ Surgery (7845)
4 5/3		4 5/3	Face Mask, Custom (5930)				Arthrocentesis, Arthrography, TMJ Injection (7880)
4		4/1	Implants (5940)	4		4/1	Frenectomy (7960)
4		4/1	Maxillary Inclined Plane and/or Maxillary Occlusal Table (5950)	3	C	3/2/82	ORTHODONTICS
4		4/1	Mandibular Guide Flange (5955)	1	E	1/1/82	Space Maintainer, Complex, Fixd. (8121)
4		4/1	Palatal Lift/Drop Prosthesis (5960)	1	E	1/1/82	Habit Breakers (8212, 8220)
			PROSTHODONTICS, FIXED				
4 5/3		4 5/3	Full Mouth Reconstruction	3	E	3/2/82	Complex Hawley Device (8311)
4		4/1	Implant Prosthesis	3	E	3/2/82	Rem Expansion Device, Simple (8320)
4		4/1	Retainer, Cast Metal for Acid-Etch Bridge (6705)	2	E	2/1/82	Rem Exp Device with Bite Plane (8321)
			ORAL AND MAXILLOFACIAL SURGERY				
1	C	1/1/82	Tooth Removal, Complicated (7120)	4 5/3	E	4/2/82	Fixed Expansion Device (8322)
1	C	1/1/82	Tooth Removal, Impacted (7130)	3	E	3/2/82	Bite Plane, Ant. or Post. (8330)
3	C	3/2/82	Tooth Implantation, Replantation and Transplantation (7140)	4 5/3	E	4/2/82	Functional Orthopedic Devices (8332)
1	C	1/1/82	Tooth Exposure, Surgical (7150)	4		4/1	Banding & Bonding (8410, 8420)
4		4/1	Repair Traumatic Wounds, Complex (7212, 7213)	4		4/1	Section Wire (8440)
4		4/1	Cleft Palate Repair (7260)	4		4/1	Round Archwire (8441, 8442)
4		4/1	Cleft Lip Repair (7265)	4		4/1	Rectangular Archwire (8443, 8444)
4		4/1	Oral-Antral Fistula Repair (7270)	1	E	1/1/82	Passive Lingual or Palatal wire (8445)
4		4/1	Oral-Nasal Fistula Repair (7275)	4		4/1	Extraoral Traction Device (8446)
4		4/1	Skin or Mucosal Grafts (7280)	4 5/3		4/2	Fixed Device Adjustment (8510, 8512-8514)
4		4/1	Bone Graft or Osseous Implant (7285)	4		4/1	Addition of Auxiliaries (8520)
4		4/1	Stomatoplasty, Complicated (7350)	4		4/1	Positioner Insertion (8540)
4		4/1	Major Salivary Gland Surgery (7405)	1	E	1/1/82	Device Repair (8552)
1	C	1/1/82	Excision, Soft Tissue (7412)	4		4/1	Craniofacial Analysis (8553)
1	C	1/1/82	Excision, Benign Tumor (7432)	4		4/1	Orthodontic/Orthognathic Diagnostic Setup (8554)
4		4/1	Excision, Malignant Tumor (7442)				ANESTHESIA
4		4/1	Removal of Cyst or Tumor (7452, 7462)	4		4/1	General Anesthesia (9220)
4		4/1	Destruction of Lesions (7465)	4		4/1	I, V. Sedation or Analgesia (9231)
4		4/1	Removal of Exostoses (7470)	4		4/1	I, M. Sedation or Analgesia (9232)
4		4/1	Resection, Max or Man (7480, 7485)	4		4/1	Inhalation Sedation or Analgesia (9233)
4		4/1	Removal of Foreign Body (7530)	4		4/1	Pediatric Sedation
4		4/1	Maxillary Sinusotomy (7560)	4		4/1	Hypnosis (9235)
4		4/1	Cricothyrotomy (7570)	4		4/1	Therapeutic Med by Injection (9610)
4		4/1	Tracheostomy (7580)				MISCELLANEOUS
4		4/1	Open Reduction, Max or Man (7610)	4		4/1	Hosp Admissions with Physical Exam (9720)
4		4/1	Closed Reduction, Max or Man (7620)	4		4/1	Mandibular Recording (Three Dimensional) (9925)
4		4/1	Zygomatic Complex Fracture (7651)	4		4/1	Radiation Shield (9943)
4		4/1	Facial Bone Fractures (7680)	4		4/1	Radiation Needle Carrier (9944)
4		4/1	Other Fracture Reduction (7681)	4		4/1	Hyperbaric Monitoring (9971)
4		4/1		4		4/1	Operating Room Privileges

III.

APPLICANT'S REMARKS

SIGNATURE OF APPLICANT

Jason M. Sampson

DATE

3 Mar 88

IV.

SUPERVISOR'S RECOMMENDATION

Recommend Approval

Recommend Approval With Modifications As Specified Below:

Recommend Disapproval As Specified Below:

SUPERVISOR'S TYPED, PRINTED, OR STAMPED SIGNATURE BLOCK

JOHN A. SAMUELSON, COL, USAF, DC

SIGNATURE

John A. Samuelson

DATE

3 March 88

V.

SGD APPROVAL/ADDITIONAL COMMENTS

7 Dec 88 Reviewed J. Biddle

SGD TYPED, PRINTED, OR STAMPED SIGNATURE BLOCK

HAROLD H. BIDDLE, COL, USAF, DC
BASE DENTAL SURGEON

SIGNATURE

Harold H Biddle

DATE

4 Mar 88

VI.

BIENNIAL REVIEW

APPLICANT'S TYPED, PRINTED, OR STAMPED SIGNATURE BLOCK

SIGNATURE

DATE

SUPERVISOR'S TYPED, PRINTED, OR STAMPED SIGNATURE BLOCK

SIGNATURE

DATE

SGD'S TYPED, PRINTED, OR STAMPED SIGNATURE BLOCK

SIGNATURE

DATE



DEPARTMENT OF THE AIR FORCE
USAF REGIONAL HOSPITAL ELMENDORF (AAC)
ELMENDORF AIR FORCE BASE, ALASKA 99506-5300

REPLY TO
ATTN OF: Chairperson, Credentials Committee

23 Jan 87
(Date)

SUBJECT: Review of Medical Credentials

TO: SG

After reviewing the medical credentials of Capt Jason M. Rampton,
the Credentials Committee has (approved) (~~approved with exceptions~~) (~~disapproved~~)
the requested clinical privileges.

Exceptions:

Ø

[Signature]
PAUL B. COFOID, Colonel, USAF, MC
Chairperson, Credentials Committee

1st Ind, SG

30 Jan 87
(Date)

TO: _____

Recommendation of the Credentials Committee is (approved) (~~disapproved~~).

[Signature]
WILLIAM E. PALMA, Colonel, USAF, MC
Commander

2d Ind

5 Feb 87
(Date)

TO: SG

I acknowledge receipt of the medical privileges awarded to me by the Credentials
Committee and approved by the Hospital Commander.

[Signature]
Signature of Applicant



DEPARTMENT OF THE AIR FORCE
USAF REGIONAL HOSPITAL ELMENDORF (AAC)
ELMENDORF AIR FORCE BASE, ALASKA 99506-5300

REPLY TO
ATTN OF

Chairperson, Credentials Committee

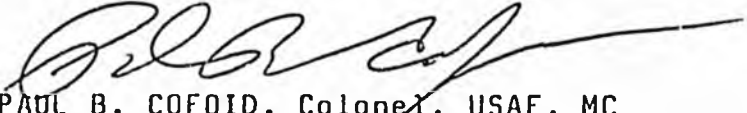
25 Aug 1986

UNCLASSIFIED

Provisional Awarding of Provider Medical Credentials

TO: Capt Jason M. Rampton

You are hereby granted provisional privileges in the practice of General Dentistry. There are no limitations or restrictions set to the normal practice of General Dentistry in an inpatient and/or outpatient setting.

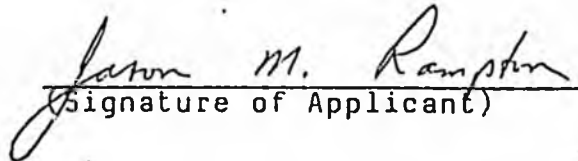

PAUL B. COFOID, Colonel, USAF, MC
Chairperson, Credentials Committee

1st Ind

10 Sep 86
Date

TO: SGH

I acknowledge receipt of medical privileges awarded to me by the Credentials Committee.


(Signature of Applicant)

PROVIDER ACTIVITY PROFILE

QA PROVIDER ACTIVITY PROFILE

DATE 14 NOV 1988 TIME 0815

PERSONAL DATA - PRIVACY ACT OF 1974

PROVIDER ID RAMPTJ NAME RAMPTON, JASON M. DEPT SGD1

QA ID CODE 805227491 CONT ED (YY/HHH) 88/0 87/0 86/0

ASSIGNMENT DATE 07 AUG 1986 REAPPOINTMENT DATE 19 APR 1990

RENEWAL DATE UF: BLS 30 DEC 1988 ACLS 30 SEP 1990 ATLS

LICENSE: TYPE DENTISTRY STATE UT RENEWAL DATE 31 DEC 1988

1 - PERFORMANCE ASSESSMENT/OUTCOME INDICATORS

ENTER SELECTION:

CREDENTIALS EVALUATION OF HEALTH CARE PRACTITIONERS

AUTHORITY: Title 10, U. S. C. Section 8012, Title 44, U. S. C. Section 3101

PRINCIPAL PURPOSE(S): For requesting personal information from each practitioner relating to his or her formal education training, clinical experience, and evidence of physical, moral, and ethical capacities to assist the Credentials Committee in making recommendations with regard to the practitioner's competence to treat certain conditions and perform certain medical procedures.

ROUTINE USE(S): To award inpatient and ambulatory clinical privileges to health care practitioners. Information may be released to government boards or agencies or professional societies or organizations if needed to license or monitor professional standards of health care practitioners. It may also be released to civilian medical institutions or organizations where the practitioner is applying for staff privileges during or after separating from the service.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges.

I. TO BE COMPLETED BY PRACTITIONER

1. NAME (Last, First, Middle Initial) RAMPON, JASON M. 2. SSAN 529-78-1042

3. FACILITY George AFB, Hosp 4. SERVICE(S) REQUESTING PRIVILEGES IN (Privilege list attached) Dental

RELEASE OF LIABILITY

I hereby release from liability all officials of the United States Air Force including all representatives of the hospital and its medical staff for their acts performed in good faith and without malice in connection with evaluating or action concerning my application and my credentials and qualifications. I hereby release from liability any and all individuals and organizations who, in good faith and without malice, provide any and all information to officials of the United States Air Force, including medical facility officers, or to the authorized medical staff representatives, concerning my professional practice, competence, ethics, character and other qualifications for staff appointment and clinical privileges, and I hereby consent to the release of any and all such information.

5. SIGNATURE Jason M. Rampton 6. DATE 14 Jul 86

II. TO BE COMPLETED BY EVALUATOR

7. NAME OF INSTITUTION WHERE ABOVE PRACTITIONER PRACTICED USAF HOSPITAL GEORGE 8. DATES AT INSTITUTION
FROM JULY '84 TO JULY '86

9. STATUS OF PRACTITIONER (Staff, resident, etc.) STAFF 10. SPECIALTY OR SPECIALTIES PRACTITIONER HAD PRIVILEGES IN AT THIS FACILITY GENERAL DENTIST

The following evaluation is based on demonstrated performance compared to that reasonably expected of a practitioner at his or her level of training, experience and background:

PERFORMANCE (Mark "X" in appropriate block for each item listed)	POOR	FAIR	GOOD	SUPERIOR	NOT OBSERVED
A. BASIC MEDICAL KNOWLEDGE				/	
B. PROFESSIONAL JUDGEMENT				/	
C. SENSE OF RESPONSIBILITY				/	
D. ETHICAL CONDUCT				/	
E. COMPETENCE AND SKILL				/	
F. COOPERATIVENESS, ABILITY TO WORK WITH OTHERS				/	
G. APPEARANCE				/	
H. HISTORY AND PHYSICAL EXAM				/	
I. RECORD KEEPING				/	
J. CASE PRESENTATIONS				/	
K. PATIENT MANAGEMENT				/	
L. PHYSICIAN-PATIENT RELATIONS				/	
M. ABILITY TO WRITE AND SPEAK ENGLISH				/	
N. PARTICIPATION IN MEDICAL STAFF AND COMMITTEE ACTIVITIES				/	

10. If the answer to any of the following questions is "YES" please give full details in the Remarks Section on reverse. If additional space is needed, continue on a separate sheet of paper and attach to this form. Be sure to identify item by number. To your knowledge has the applicant:

A. EVER HAD HIS OR HER LICENSE TO PRACTICE IN ANY JURISDICTION LIMITED, SUSPENDED OR REVOKED?	YES	NO	G. EVER BEEN A DEFENDANT IN A FELONY CASE?	YES	NO
B. EVER BEEN REFUSED MEMBERSHIP ON A MEDICAL STAFF?		X	H. HAD ANY SIGNIFICANT MEDICAL PROBLEMS?		X
C. EVER HAD A REQUEST FOR SPECIFIC PRIVILEGES DENIED OR GRANTED WITH STATED LIMITATIONS?		X	I. EVER BEEN A DEFENDANT OR THE SUBJECT OF A MALPRACTICE ACTION?		X
D. EVER HAD PRIVILEGES AT ANY HOSPITAL SUSPENDED, LIMITED, OR REVOKED?		X	If "YES" was the matter:		
E. EVER HAD NARCOTICS REGISTRATION SUSPENDED OR REVOKED?		X	(1) SETTLED PRIOR TO FINAL COURT ACTION?		
F. REGULARLY OBTAINED CONSULTATIONS WHEN NEEDED?	X		(A) JUDGEMENT RENDERED BY COURT?		
			(B) MATTER STILL PENDING?		
			(2) DEFENDANT FOUND LIABLE?		

11. (Complete if applicable) UPON REVIEW OF THE ATTACHED LIST OF PRIVILEGES SUBMITTED BY THE PRACTITIONER, DO YOU HAVE ANY RESERVATIONS ABOUT HIM OR HER EXERCISING ALL PRIVILEGES REQUESTED? YES NO

12. NUMBER OF YEARS YOU HAVE KNOWN THE APPLICANT

2 1/2

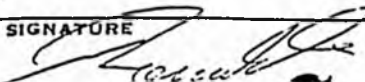
13. BEST TELEPHONE NUMBER TO CONTACT YOU

ATLANTA 353-3961

14. REMARKS (Please add any other information you think appropriate in evaluating this applicant.)

15. TITLE OF EVALUATOR

16. SIGNATURE



17. DATE

14 JULY 86

CREDENTIALS EVALUATION OF HEALTH CARE PRACTITIONERS

AUTHORITY: Title 10, U. S. C. Section 8012, Title 44, U. S. C. Section 3101

PRINCIPAL PURPOSE(S): For requesting personal information from each practitioner relating to his or her formal education training, clinical experience, and evidence of physical, moral, and ethical capacities to assist the Credentials Committee in making recommendations with regard to the practitioner's competence to treat certain conditions and perform certain medical procedures.

ROUTINE USE(S): To award inpatient and ambulatory clinical privileges to health care practitioners. Information may be released to government boards or agencies or professional societies or organizations if needed to license or monitor professional standards of health care practitioners. It may also be released to civilian medical institutions or organizations where the practitioner is applying for staff privileges during or after separating from the service.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges.

I. TO BE COMPLETED BY PRACTITIONER

1. NAME (Last, First, Middle Initial) RAMPTON, JASON M.	2. SSAN 529-78-1042
3. FACILITY George AFB, Hosp	4. SERVICE(S) REQUESTING PRIVILEGES IN (Privilege list attached) Dental

RELEASE OF LIABILITY

I hereby release from liability all officials of the United States Air Force including all representatives of the hospital and its medical staff for their acts performed in good faith and without malice in connection with evaluating or action concerning my application and my credentials and qualifications. I hereby release from liability any and all individuals and organizations who, in good faith and without malice, provide any and all information to officials of the United States Air Force, including medical facility officers, or to the authorized medical staff representatives, concerning my professional practice, competence, ethics, character and other qualifications for staff appointment and clinical privileges, and I hereby consent to the release of any and all such information.

5. SIGNATURE <i>Jason Rampton</i>	6. DATE 14 Jul 86
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II. TO BE COMPLETED BY EVALUATOR

7. NAME OF INSTITUTION WHERE ABOVE PRACTITIONER PRACTICED USAF Hosp George AFB Ca	8. DATES AT INSTITUTION FROM July 85 TO July 86
9. STATUS OF PRACTITIONER (Staff, resident, etc.) -staff	10. SPECIALTY / OR SPECIALTIES PRACTITIONER HAD PRIVILEGES IN AT THIS FACILITY general dentistry

The following evaluation is based on demonstrated performance compared to that reasonably expected of a practitioner at his or her level of training, experience and background:

PERFORMANCE <small>(Mark "X" in appropriate block for each item listed)</small>	POOR	FAIR	GOOD	SUPERIOR	NOT OBSERVED
A. BASIC MEDICAL KNOWLEDGE				/	
B. PROFESSIONAL JUDGEMENT				/	
C. SENSE OF RESPONSIBILITY				/	
D. ETHICAL CONDUCT				/	
E. COMPETENCE AND SKILL				/	
F. COOPERATIVENESS, ABILITY TO WORK WITH OTHERS				/	
G. APPEARANCE				/	
H. HISTORY AND PHYSICAL EXAM				/	
I. RECORD KEEPING				/	
J. CASE PRESENTATIONS				/	
K. PATIENT MANAGEMENT				/	
L. PHYSICIAN-PATIENT RELATIONS				/	
M. ABILITY TO WRITE AND SPEAK ENGLISH				/	
N. PARTICIPATION IN MEDICAL STAFF AND COMMITTEE ACTIVITIES				/	

10. If the answer to any of the following questions is "YES" please give full details in the Remarks Section on reverse. If additional space is needed, continue on a separate sheet of paper and attach to this form. Be sure to identify item by number. To your knowledge has the applicant:

	YES	NO		YES	NO
A. EVER HAD HIS OR HER LICENSE TO PRACTICE IN ANY JURISDICTION LIMITED, SUSPENDED OR REVOKED?		/	G. EVER BEEN A DEFENDANT IN A FELONY CASE?		/
B. EVER BEEN REFUSED MEMBERSHIP ON A MEDICAL STAFF?		/	H. HAD ANY SIGNIFICANT MEDICAL PROBLEMS?		/
C. EVER HAD A REQUEST FOR SPECIFIC PRIVILEGES DENIED OR GRANTED WITH STATED LIMITATIONS?		/	I. EVER BEEN A DEFENDANT OR THE SUBJECT OF A MALPRACTICE ACTION?		/
D. EVER HAD PRIVILEGES AT ANY HOSPITAL SUSPENDED, LIMITED, OR REVOKED?		/	If "YES" was the matter:		
E. EVER HAD NARCOTICS REGISTRATION SUSPENDED OR REVOKED?		/	(1) SETTLED PRIOR TO FINAL COURT ACTION?		
F. REGULARLY OBTAINED CONSULTATIONS WHEN NEEDED?		/	(A) JUDGEMENT RENDERED BY COURT?		
			(B) MATTER STILL PENDING?		
			(2) DEFENDANT FOUND LIABLE?		

11. (Complete if applicable) UPON REVIEW OF THE ATTACHED LIST OF PRIVILEGES SUBMITTED BY THE PRACTITIONER, DO YOU HAVE ANY RESERVATIONS ABOUT HIM OR HER EXERCISING ALL PRIVILEGES REQUESTED? YES NO

12. NUMBER OF YEARS YOU HAVE KNOWN THE APPLICANT

2

13. BEST TELEPHONE NUMBER TO CONTACT YOU

353-3966

14. REMARKS (Please add any other information you think appropriate in evaluating this applicant.)

15. TITLE OF EVALUATOR
GARY C. GRAY
BASE DENTAL SURGEON

16. SIGNATURE

Gary C. Gray

17. DATE

14 July 84

CREDENTIALS EVALUATION OF HEALTH CARE PRACTITIONERS

AUTHORITY: Title 10, U. S. C. Section 8012, Title 44, U. S. C. Section 3101

PRINCIPAL PURPOSE(S): For requesting personal information from each practitioner relating to his or her formal education training, clinical experience, and evidence of physical, moral, and ethical capacities to assist the Credentials Committee in making recommendations with regard to the practitioner's competence to treat certain conditions and perform certain medical procedures.

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DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges.

I. TO BE COMPLETED BY PRACTITIONER

1. NAME (Last, First, Middle Initial) KAMPTON, JASON	2. SSAN 529-78-1042
3. FACILITY George AFB, HOSP SGO	4. SERVICE(S) REQUESTING PRIVILEGES IN (Privilege list attached) Dental

RELEASE OF LIABILITY

I hereby release from liability all officials of the United States Air Force including all representatives of the hospital and its medical staff for their acts performed in good faith and without malice in connection with evaluating or action concerning my application and my credentials and qualifications. I hereby release from liability any and all individuals and organizations who, in good faith and without malice, provide any and all information to officials of the United States Air Force, including medical facility officers, or to the authorized medical staff representatives, concerning my professional practice, competence, ethics, character and other qualifications for staff appointment and clinical privileges, and I hereby consent to the release of any and all such information.

5. SIGNATURE 	6. DATE 14 July 86
------------------	------------------------------

II. TO BE COMPLETED BY EVALUATOR

7. NAME OF INSTITUTION WHERE ABOVE PRACTITIONER PRACTICED GEORGE AFB HOSPITAL	8. DATES AT INSTITUTION	
	FROM	TO
9. STATUS OF PRACTITIONER (Staff, resident, etc.) STAFF	10. SPECIALTY OR SPECIALTIES PRACTITIONER HAD PRIVILEGES IN AT THIS FACILITY	

The following evaluation is based on demonstrated performance compared to that reasonably expected of a practitioner at his or her level of training, experience and background:

PERFORMANCE (Mark "X" in appropriate block for each item listed)	POOR	FAIR	GOOD	SUPERIOR	NOT OBSERVED
A. BASIC MEDICAL KNOWLEDGE					X
B. PROFESSIONAL JUDGEMENT					X
C. SENSE OF RESPONSIBILITY					X
D. ETHICAL CONDUCT					X
E. COMPETENCE AND SKILL					X
F. COOPERATIVENESS, ABILITY TO WORK WITH OTHERS				X	
G. APPEARANCE				X	
H. HISTORY AND PHYSICAL EXAM					X
I. RECORD KEEPING					X
J. CASE PRESENTATIONS					X
K. PATIENT MANAGEMENT					X
L. PHYSICIAN-PATIENT RELATIONS				X	
M. ABILITY TO WRITE AND SPEAK ENGLISH				X	
N. PARTICIPATION IN MEDICAL STAFF AND COMMITTEE ACTIVITIES				X	

10. If the answer to any of the following questions is "YES" please give full details in the Remarks Section on reverse. If additional space is needed, continue on a separate sheet of paper and attach to this form. Be sure to identify item by number. To your knowledge has the applicant:

	YES	NO		YES	NO
A. EVER HAD HIS OR HER LICENSE TO PRACTICE IN ANY JURISDICTION LIMITED, SUSPENDED OR REVOKED?			G. EVER BEEN A DEFENDANT IN A FELONY CASE?		✓
B. EVER BEEN REFUSED MEMBERSHIP ON A MEDICAL STAFF?		✓	H. HAD ANY SIGNIFICANT MEDICAL PROBLEMS?		✓
C. EVER HAD A REQUEST FOR SPECIFIC PRIVILEGES DENIED OR GRANTED WITH STATED LIMITATIONS?		✓	I. EVER BEEN A DEFENDANT OR THE SUBJECT OF A MALPRACTICE ACTION?		✓
D. EVER HAD PRIVILEGES AT ANY HOSPITAL SUSPENDED, LIMITED, OR REVOKED?		✓	If "YES" was the matter:		
E. EVER HAD NARCOTICS REGISTRATION SUSPENDED OR REVOKED?		✓	(1) SETTLED PRIOR TO FINAL COURT ACTION		
F. REGULARLY OBTAINED CONSULTATIONS WHEN NEEDED?	✓		(A) JUDGEMENT RENDERED BY COURT?		
			(B) MATTER STILL PENDING?		
			(2) DEFENDANT FOUND LIABLE?		

11. (Complete if applicable) UPON REVIEW OF THE ATTACHED LIST OF PRIVILEGES SUBMITTED BY THE PRACTITIONER, DO YOU HAVE ANY RESERVATIONS ABOUT HIM OR HER EXERCISING ALL PRIVILEGES REQUESTED? YES NO

12. NUMBER OF YEARS YOU HAVE KNOWN THE APPLICANT

152

13. BEST TELEPHONE NUMBER TO CONTACT YOU

3885

14. REMARKS (Please add any other information you think appropriate in evaluating this applicant.)

I arrived at George AFB 3 weeks ago and have not become well acquainted with Dr. Rempton. He enjoys a very good reputation and there is no uncomplimentary information regarding him.

15. TITLE OF EVALUATOR
JON K. PLUMMER, LT COL
CHIEF HOSPITAL SERVICES

16. SIGNATURE

Jon K. Plummer

17. DATE

14 July 86

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

AUTHORITY: 10 U.S.C. 8112 and EO 9397

PURPOSE: To provide a record of an individual's participation in continuing health education activities.

ROUTINE USE: Used by individual practitioners to report personal continuing education accomplishments. SSAN is used for positive identification of individual and records.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may preclude awarding clinical privileges.

INSTRUCTIONS

Use continuously until form is completely filled out. Begin a new form and attach to old form. All forms must remain with the credentials file until it is destroyed.

I. IDENTIFICATION			
NAME (Last, First, Middle Initial) Rampton, Jason M.	GRADE Major	SSAN 529-78-1042	CORPS Dental
DUTY ADDRESS (PENCIL ONLY) USAF Reg Hosp Elmendorf AFB, AK	SPECIALTY	PAFSC 9826	ZAFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

- Category 1 - CME activities with accredited sponsorship or cosponsorship
- Category 2 - CME activities with non-medical sponsorship
- Category 3 - Medical teaching
- Category 4 - Papers published, exhibits, etc.
- Category 5 - Nonsupervised CME (self-instruction, consultation, self-assessment, etc.)

Refer to the American Medical Association Information Booklet for Physician Recognition Award for more detailed definitions.

TIME	DESCRIPTION	SPONSOR	LOCATION	DATE	HOURS	CAT	TOTAL	CREDIT CATEGORY (1-5)
	CME FY 88							
	RAMPTON, JASON MAJ							
	Endodontic Diagnosis (1)	Col Rome	Elmendorf, AK	22Oct87	1.0	1	1.0	
	Pedodontic Management	LtCol Rominger	Elmendorf, AK	12Nov87	1.0	1	2.0	
	Porcelain Veneers	LtCol Cameron	Elmendorf, AK	10Dec87	1.0	1	3.0	
	TMJ Radiology	Col Schutte	Elmendorf, AK	17Dec87	.5	1	3.5	
	Endodontic Diagnosis (2)	Col Rome	Elmendorf, AK	14Jan88	1.0	1	4.5	
	Initial Perio Therapy	Col DeNucci	Elmendorf, AK	28Jan88	1.0	1	5.5	
	Maxillofacial Trauma	Maj Gaus	Elmendorf, AK	11Feb88	1.0	1	6.5	
	Temporary Restorations	LtCol Golden	Elmendorf, AK	25Feb88	.5	1	7.0	
	Oral Surg Emergencies	Col Schutte	Elmendorf, AK	10Mar88	1.0	1	8.0	
	Maxillofacial Prosthetics	Col Saunders	Elmendorf, AK	24Mar88	1.0	1	9.0	
	Suturing Technique	Maj Gaus	Elmendorf, AK	31Mar88	1.5	1	10.5	
	Patient Sensitivity	Maj Garcia	Elmendorf, AK	14Apr88	1.0	1	11.5	
	Orthopedic Injuries and Shock and IV Fluid Therapy--							
		Videotapes	Elmendorf, AK	28Apr88	1.0	1	12.5	
	Flight Dentistry (DNIF)	Col Jaeger	Elmendorf, AK	16May88	.5	1	13.0	
	Medical Malpractice, Informed Consent and Third Party Liability-----							
		Capt Halbert	Elmendorf, AK	19May88	.5	1	13.5	
	Intraoral Photography	Col Denucol	Elmendorf, AK	25Aug88	.5	1	14.0	
	Remote Site Dentistry	Maj Wyman	Elmendorf, AK	22Sep88	1.0	1	15.0	
	ACLS	USAF Hospital	Elmendorf, AK	29,30Sep88	16.0	1	31.0	
	=====							
	FY 1988 Total 31.0 hours							

CREDENTIALS CONTINUING HEALTH EDUCATION TRAINING RECORD

AUTHORITY: 10 U.S.C. 8112 and EO 9397

PURPOSE: To provide a record of an individual's participation in continuing health education activities.

ROUTINE USE: Used by individual practitioners to report personal continuing education accomplishments. SSAN is used for positive identification of individual and records.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may preclude awarding clinical privileges.

INSTRUCTIONS

Use continuously until form is completely filled out. Begin a new form and attach to old form. All forms must remain with the credentials file until it is destroyed.

I. IDENTIFICATION

NAME (Last, First, Middle Initial) Rampton, Jason M.	GRADE Maj	SSAN 529-78-1042	COIIPS Dental
DUTY ADDRESS (PENCIL ONLY) USAF Reg Hosp Elmendorf, AK	SPECIALTY Dentistry	PAFSC 9826	2AFSC

II. ACTIVITIES (Conferences, Seminars, Meetings, Lectures, Publications, etc.)

CATEGORY OF TRAINING

- Category 1 - CME activities with accredited sponsorship or cosponsorship
- Category 2 - CME activities with non-medical sponsorship
- Category 3 - Medical teaching
- Category 4 - Papers published, exhibits, etc.
- Category 5 - Nonsupervised CME (self-instruction, consultation, self-assessment, etc.)

Refer to the American Medical Association Information Booklet for Physician Recognition Award for more detailed definitions.

DESCRIPTION	SPONSOR	LOCATION	DATE	HOURS	CAT	TOTAL
Anes & Airway Mgt	Dr Fronefield	Elmendorf, AK	9Oct86	1	1	1.0
Endo Restorations	Dr Romo	"	27Oct86	2	1	3.0
TMJ Study Club	Dr Saunders	"	Oct86	9	1	12.0
Endo Emerg	Dr Rome	"	13Nov86	1	1	13.0
Prev Dent Course	LtCol Malsey	Brooks, TX	1-5Dec86	40	1	53.0
Pedo Short Course	LtCol Barrus	Eielson, AK	Jan87	8	1	61.0
Perlo Emerg	Dr Marttala	Elmendorf, AK	29Jan87	1	1	62.0
General Dent	Dr Giles	"	15Jan87	3.5	1	65.5
Forensic Dent	Dr Burke	"	12Feb87	1	1	66.5
Oral Surg Emerg	Dr Schulte	"	26Feb87	1	1	67.5
Maxillofacial Inj	Dr Van Asma	"	12Mar87	1	1	68.5
Oral Pathology	Dr Slater	"	26Mar87	4	1	72.5
Suturing	Dr Schulte	"	9Apr87	1	1	73.5
Pros Emergencios	Dr Saunders	"	23Apr87	1	1	74.5
Itinerant Dent	Dr Rome	"	14May87	1	1	75.5
Flight Dentistry	Dr Jaeger	"	28May87	1	1	76.5
Restorative Dent	Dr Bowers	"	11Jun87	1	1	77.5
TMJ Dysfunction	Dr DeNucci	"	23Jul87	1	1	78.5
Laboratory Relations	LtCol Rudd	"	23Sep87	1	1	79.5
Anes & Airway Mgt	Col Fronefield	"	24Sep87	.5	1	80.0
OR Protocol	Capt Gardiner	"	24Sep87	1	1	81.0
Child Abuse Prev Sem	Dr Krugman	Fl Richardson, AK	24Sep87	7	1	87.0
CPR	USAF Reg Hosp	Elmendorf, AK	Sep87	4	1	91.0

FY 1987 Total 91.0 hours



DEPARTMENT OF THE AIR FORCE
USAF REGIONAL HOSPITAL ELMENDORF (AAC)
ELMENDORF AIR FORCE BASE, ALASKA 99506-5300

RECEIVED

APR 15 1988

DIVISION OF OCCUPATIONAL
& PROFESSIONAL LICENSING

Utah State Board of Dentistry
Dir. of Reg.
160 W. 300 South - P.O. Box 45802
Salt Lake City, UT 84145

Dear Sir,

1. In accordance with Air Force Regulation 168-13, all health care providers must have in their credential file an authenticated statement from their Board of Licensure attesting to their current licensure to practice. Your assistance is solicited to verify the following information pertaining to one of your licensees. Your official seal and signature on this letter will constitute verification of the below information and will fulfill the requirements set forth under AFR 168-13.

"I JASON M. RAMPTON, license # 004028, am licensed to practice Dentistry in the state of UTAH."

Jason M. Rampton
(Signature of Licensee)

2. The provider's signature following his attestation will constitute his/her permission for your office to verify the above information. Your time and prompt response will be greatly appreciated. If you have any questions please contact Mrs. Wanda Ferris or SSgt Gail Hewitt, ext. (907)552-2328/4501. All responses should be forwarded to our Quality Assurance and Credentials Office.

W. Palmer

WILLIAM E. PALMER Col. USAF, MC
Commander

September 1, 1988

To Whom it May Concern:

Please be advised that Dr. Jason . Rampton's Utah State Dental License number is: 03006-0701-7, issued on February 26, 1986.

DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING

M. Eddy
(Signature of License Verification Official)

STATE SEAL

THIS LICENSE MUST BE CONSPICUOUSLY POSTED IN YOUR PLACE OF BUSINESS
THIS STUB CAN BE REMOVED IF NECESSARY

STATE OF UTAH

DEPARTMENT OF BUSINESS REGULATION DIV. OF OCCUP. & PROF. LICENSING
160 EAST 300 SOUTH, SALT LAKE CITY, UTAH 84111

LICENSE NUMBER 03006-0701-7 DATE OF ISSUE 86/12/31

RAMPTON JASON M
9711 TAKLI CIR
EAGLE RIVER AK

99577



RECEIPT NUMBER
004928
EXPIRATION DATE
88/12/31

IS DULY REGISTERED TO PRACTICE AS
A DENTIST

WALLET SIZE LICENSE

DETACH AND PLACE IN YOUR
WALLET FOR FUTURE REFERENCE

CUT OUT ALONG THIS LINE

DO NOT CUT OFF PROFESSION INFORMATION. CUT OUTSIDE OF THE DARK BLUE BORDER. LASER PRINTING HAS BEEN USED TO PREVENT ALTERATION OR FORGERY. IT MAY SMEAR WHEN PLACED IN PLASTIC CARD HOLDERS. LAMINATING THE WALLET COPY WILL PREVENT SMEARING.

STATE OF UTAH

DEPARTMENT OF BUSINESS REGULATION

DIV. OF OCCUP. & PROF. LICENSING

LICENSE NUMBER 03006-0701-7 EXPIRATION DATE 88/12/31

RAMPTON JASON M
9711 TAKLI CIR
EAGLE RIVER AK

93577



IS DULY REGISTERED TO PRACTICE AS
A DENTIST

This is a true and accurate copy of the original.

W. J. Rome Col USAF-DC

26 Jan 87



Jason M. Rampton, DDS

having complied with all the requirements of the State of Utah and the rules of this Department, is hereby registered and licensed to practice

Dentist

n/a

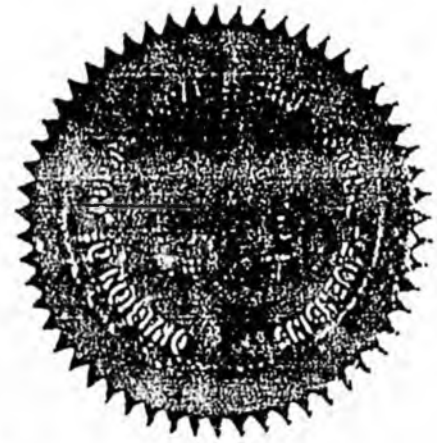
License No. 3006

In Witness Whereof, I have hereunto set my hand and affixed the official seal of the Division this

24th day of February A.D. 1956

Robert O. Bowen

Director, Division of Registration



*This is a true and accurate copy of the original 6 Nov 86
Robert O. Bowen 565 DEK1 010*

The American Dental Association
COUNCIL ON
NATIONAL BOARD EXAMINATIONS
presents this certificate to

Jason M. Rampton

as evidence of satisfactory attainment
in the
National Board Dental Examinations



William J. Lovett DMS

COUNCIL CHAIRMAN

Fred Casey

COUNCIL SECRETARY

Issued 1981

This is a true and
accurate copy of the
original, 6 Nov 84

John Samuelson SCD, DC
OIC



THE
ARIZONA STATE BOARD
OF DENTAL EXAMINERS

at an examination held

on March 25, 1986, has found

Jason Michael Rampton

qualified, and hereby granted a License to Practice

DENTISTRY

in the State of Arizona

No. 3523

President [Signature]

Secretary [Signature]

Member [Signature]

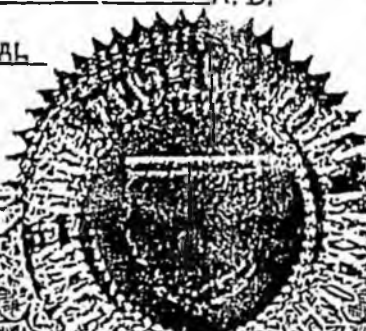
[Signature]
[Signature]
[Signature]
[Signature]

Signed and seal affixed

this ATH day of

AUGUST A. D.

19 AL



*certified correct
- Billie 210-886*



DEPARTMENT OF THE AIR FORCE
 USAF REGIONAL HOSPITAL ELMENDORF (AAC)
 ELMENDORF AIR FORCE BASE, ALASKA 99506-5300



PERIOD OF SGNQ (SSgt Hewitt, 552-2328)

15 Dec 87

SUBJECT: Dental Provider Profiles



TO: American Dental Association
 211 East Chicago Avenue
 Chicago, Ill 60611
 ATTN: Membership Records Department

In accordance with AF Regulation 168-13 we are responsible for verifying the education of our dental officers. Would you please supply us with a copy of your profile on the following dentists. Thank you for your assistance in this matter.

SC#	GRAD	SPEC. CODE
087	HAROLD H. BIDDLE - 69	295-38-5474
116	JOHN W. SHANNON - 68	264-56-3753
141	WARREN H. MARTTALA - 63	531-32-8507 PERIODONTICS
030	TIMOTHY R. SAUNDERS - 72	375-48-7717 PROSTHODONTICS
063	DENNIS P. GIESER - 70	357-34-9265
155	RICHARD A. CRITTENDEN - 71	555-64-5770
149	GARY J. GOLDEN - 76	511-46-6822 PROSTHODONTICS
063	KARL A. MAKI - 69	537-36-4962
098	WILLIAM J. ROME - 70	183-38-5130 ENDODONTICS
129	JOHN A. SAMUELSON - 69	522-54-6029
116	RONALD W. ENG - 77	410-96-4883
162	DALE A. SCHUTTE - 72	493-50-3037 ORAL SURGERY
197	PHILLIP C. GAUS - 79	549-80-9135 ORAL SURGERY
162	STEPHEN G. BURKE - 78	585-40-7251
109	CYNTHIA P. THIEL - 79	552-90-1231
147	DOYLE A. CHAMBERS, JR. - 82	422-78-8630
130	BARRY M. WYMAN - 76	516-94-3793
154	JESUS CORTES-MORALES - 82	583-80-8067
166	DAVID C. MATHERS - 78	175-44-9640
163	MICHAEL F. FULLER - 78	552-82-2538
053	JASON M. RAMPTON - 81	529-78-1042
16	ROBERT A. CRAIG - 80	513-48-9002
081	SCOTT E. SEMBA - 80	568-94-3659
073	STEPHEN BOESCH - 82	475-56-0872

Wanda L. Ferris

WANDA L. FERRIS
 Quality Assurance/Credentials Coordinator

POSTED
 1-19-88

*Verified by
 ADA profile to
 use for authentication
 education*

DENTAL SCHOOLS BY CODE NUMBER

The following coded list includes all active dental schools in the United States, Puerto Rico, Canada, and the Philippine Islands. Also included are all known dental schools which are no longer in existence or have merged with another dental school, but whose graduates are still listed in this directory. These schools are identified with an asterisk. More information on active dental schools is published in the following section.

- 002 UNIVERSITY OF ALBERTA FACULTY OF DENTISTRY
Edmonton, Alberta, Canada
- 004 ATLANTA DENTAL COLLEGE*
Atlanta, GA - See 140
- 006 ATLANTA SOUTHWEST DENTAL COLLEGE*
Atlanta, GA - See 140
- 008 BASTRONE COLLEGE OF DENTAL SURGERY
Dental School, University of Maryland
Baltimore, Md
- 007 UNIVERSITY OF MARYLAND
Dental Department
Baltimore, Md - See 008
- 008 BALTIMORE MEDICAL COLLEGE*
Dental Department
Baltimore, Md - See 008
- 008 BAYNES DENTAL COLLEGE*
St. Louis, Mo.
- 010 BAYLOR COLLEGE OF DENTISTRY
Dallas, Texas
- 011 BIRMINGHAM DENTAL COLLEGE*
Birmingham, Ala.
- 013 BOSTON DENTAL COLLEGE*
Boston, Mass. - See 131
- 013 UNIVERSITY OF BUFFALO
School of Dentistry
Buffalo, N.Y. - See 161
- 011 UNIVERSITY OF CALIFORNIA*
College of Dentistry
San Francisco, Calif. - See 153
- 016 CENTRAL COLLEGE OF DENTISTRY*
Indianapolis, Ind.
- 017 HOSPITAL COLLEGE OF MEDICINE*
Department of Dentistry of Central University
Richmond, Va. - See 058
- 018 COLLEGE OF DENTISTRY, CENTRO ESCOLAR DE SIEMOBIAS
Manila, Philippine Islands
- 018 CHICAGO COLLEGE OF DENTAL SURGERY*
Chicago, Ill. - See 143
- 020 CINCINNATI COLLEGE OF DENTAL SURGERY*
Cincinnati, Ohio
- 021 CINCINNATI COLLEGE OF MEDICINE AND SURGERY
Dental Department
Cincinnati, Ohio
- 023 CLEVELAND UNIVERSITY OF MEDICINE AND SURGERY*
Dental Department
Cincinnati, Ohio
- 022 COLLEGE OF DENTAL AND ORAL SURGERY*
New York, N.Y. - See 077
- 024 COLLEGE OF PHYSICIANS AND SURGEONS*
School of Dentistry
San Francisco, Calif. - See 183
- 025 COLLEGE OF PHYSICIANS AND SURGEONS*
Dental Department
Boston, Mass.
- 026 COLORADO COLLEGE OF DENTISTRY*
Denver, Colo.
- 027 COLUMBIA UNIVERSITY
School of Dental and Oral Surgery of the Faculty of Medicine
New York, N.Y.
- 028 COLUMBIAN DENTAL COLLEGE*
Chicago, Ill. - See 043
- 029 COLUMBIAN UNIVERSITY*
Dental Department
Washington, D.C.
- 030 CREighton UNIVERSITY
Reynolds School of Dental Science
Omaha, Neb.
- 031 DALHOUSIE UNIVERSITY FACULTY OF DENTISTRY
Halifax, Nova Scotia, Canada
- 032 DENVER COLLEGE OF DENTISTRY*
Denver, Colo.
- 033 UNIVERSITY OF DENVER*
School of Dentistry
Denver, Colo.
- 034 DES MOINES COLLEGE OF DENTAL SURGERY*
Des Moines, Iowa
- 036 DETROIT COLLEGE OF MEDICINE*
Department of Dental Surgery
Detroit, Mich.
- 038 UNIVERSITY OF DETROIT
School of Dentistry
Detroit, Mich.
- 037 DRAKE UNIVERSITY*
College of Dentistry
Des Moines, Iowa - See 050
- 038 GEORGETOWN UNIVERSITY
School of Dentistry
Washington, D.C.
- 038 GERMAN AMERICAN DENTAL COLLEGE*
Chicago, Ill.
- 040 HARVARD DENTAL SCHOOL*
Boston, Mass. - See 137
- 041 HOMEOPATHIC HOSPITAL COLLEGE*
Dental Department
Cleveland, Ohio
- 042 HOWARD UNIVERSITY
College of Dentistry
Washington, D.C.
- 044 ILLINOIS SCHOOL OF DENTISTRY*
Chicago, Ill. - See 043
- 043 UNIVERSITY OF ILLINOIS
College of Dentistry
Chicago, Ill.
- 048 INDIANA DENTAL COLLEGE*
Indianapolis, Ind. - See 037
- 047 INDIANA UNIVERSITY
School of Dentistry
Indianapolis, Ind.
- 048 INTERSTATE DENTAL COLLEGE*
Kansas City, Mo.
- 050 THE UNIVERSITY OF IOWA
College of Dentistry
Iowa City, Iowa
- 051 COLLEGE OF JERSEY CITY*
Department of Dentistry
Jersey City, N.J.
- 053 KANSAS CITY DENTAL COLLEGE*
Kansas City, Mo. - See 182
- 053 KANSAS CITY-WESTERN DENTAL COLLEGE*
Kansas City, Mo. - See 182
- 054 KENTON DENTAL COLLEGE*
Knoxville, Iowa - See 050
- 055 SCHOOL OF DENTAL SURGERY, LAVAL UNIVERSITY*
Montreal, Quebec, Canada - See 074
- 056 LINCOLN DENTAL COLLEGE OF COTNER UNIVERSITY*
Lincoln, Neb. - See 077
- 057 LOUISIANA COLLEGE OF DENTISTRY*
Lafayette, La. - See 057
- 056 UNIVERSITY OF LOUISVILLE
School of Dentistry
Louisville, Ky.
- 058 LOUISIANA UNIVERSITY*
School of Dentistry
New Orleans, La.
- 061 MARION SIMS DENTAL COLLEGE*
St. Louis, Mo. - See 103
- 062 MARION SIMS COLLEGE OF MEDICINE*
Dental Department
St. Louis, Mo. - See 103
- 061 MANOUEITE UNIVERSITY
School of Dentistry
Montreal, Que.
- 063 MCGILL UNIVERSITY
Faculty of Dentistry
Montreal, Quebec, Canada
- 064 MEDICO-DENTISTICAL COLLEGE OF PHILADELPHIA*
Philadelphia, Pa. - See 190
- 067 MERIDIAN MEDICAL COLLEGE
School of Dentistry
Nashville, Tenn.
- 078 THE UNIVERSITY OF MICHIGAN
School of Dentistry
Ann Arbor, Mich.
- 061 MILWAUKEE MEDICAL COLLEGE*
Dental Department
Milwaukee, Wis. - See 063
- 073 MINNESOTA COLLEGE HOSPITAL*
Dental Department
Minneapolis, Minn. - See 073
- 073 UNIVERSITY OF MINNESOTA
School of Dentistry
Minneapolis, Minn.
- 074 UNIVERSITY OF MONTREAL
Faculty of Dental Surgery
Montreal, Quebec, Canada
- 078 NATIONAL UNIVERSITY
College of Dentistry
Manila, Philippine Islands
- 078 NATIONAL UNIVERSITY*
Dental Department
Washington, D.C.
- 077 UNIVERSITY OF NEBRASKA MEDICAL CENTER
College of Dentistry
Lincoln, Neb.
- 078 NEW ORLEANS DENTAL COLLEGE*
New Orleans, La.
- 078 NORTH PACIFIC COLLEGE OF DENTON SCHOOL OF DENTISTRY*
Portland, Ore. - See 141
- 080 NORTHWESTERN COLLEGE OF DENTAL SURGERY*
Chicago, Ill. - See 061
- 081 NORTHWESTERN UNIVERSITY
Dental School
Chicago, Ill.
- 082 NEW YORK COLLEGE OF DENTISTRY*
New York, N.Y. - See 084
- 083 NEW YORK DENTAL SCHOOL*
New York, N.Y. - See 087
- 084 NEW YORK UNIVERSITY
College of Dentistry
New York, N.Y.
- 085 UNIVERSITY OF CINCINNATI*
Ohio College of Dental Surgery
Cincinnati, Ohio
- 086 OLD MICHIGAN UNIVERSITY*
College of Dentistry
Columbus, Ohio - See 087
- 087 THE OHIO STATE UNIVERSITY
College of Dentistry
Columbus, Ohio
- 088 OHIOA DENTAL COLLEGE*
Columbus, Ohio - See 030
- 089 OREGON COLLEGE OF DENTISTRY*
Portland, Ore. - See 141

VERIFICATION OF ADA MASTERFILES INFORMATION

GRADUATION FROM U.S. ACCREDITED PROGRAMS

The ADA verifies the school and year of graduation for all graduates of U.S. accredited dental schools. Graduation dates and program information is acquired directly from the deans of the dental schools as a requirement for school accreditation. No graduates of U.S. schools are entered onto our files without this verification.

GRADUATION FROM FOREIGN SCHOOLS

Dentists who graduated from dental schools outside of the U.S. are not verified for either school or graduation date. Foreign dentists may be placed on the ADA's masterfiles in three ways: 1) providing a copy of their diploma to the Department of Membership Records; 2) by enrolling in a accredited U.S. graduate or resident program and joining the ADA as a Graduate Student member; 3) by joining as an Active member after their U.S. licensure is verified by an ADA constituent (state) dental society.

Licensure

The ADA's constituent (state) dental societies verify licensure when dentists apply for membership. The ADA does not keep license information on its masterfiles. Practicing dentists must continue to be licensed to maintain their membership. Licensure of non-members is not verified.

Specialty

Specialty information is added both to the ADA member and to non-member records. Specialty information is obtained in two ways:

1. From the dentist, who verifies the information by submitting a copy of the diploma from an accredited U.S. advanced education program.
- 2) Upon graduation from an ADA accredited advanced education program. Graduation dates and program information is obtained directly from the deans and program directors. (This source of information has only been available since 1984. Graduates of specialty programs from prior years must request their specialty listing in writing and provide verification to the ADA).

NOTE: While all specialty information is verified, lack of information on character of practice does not assure that the dentist is not a specialist.

Verified specialty information includes both the subject and the level of specialization achieved:

E - Educationally qualified

L - Licensed in the specialty

D - Diplomate in one of the eight recognized specialty boards

G - Grandfathered (practicing in the specialty before January 1, 1965).

12/87 DM.

THE UNIVERSITY OF LOUISVILLE

To all to whom these Letters shall come, Greeting:

The trustees of the University on the recommendation of the University faculty and by virtue of the authority vested in them have conferred on

Jason Michael Rampton

who has satisfactorily pursued the studies and passed the examinations required therefor the degree of

Doctor of Dental Medicine

with all the rights, privileges and honors pertaining thereto.

Given at the University of Louisville in the Commonwealth of Kentucky on the Tenth day of May in the year of our Lord the One Thousand Nine Hundred Eighty-first, of the City of Louisville the Two Hundred Third, of the Commonwealth of Kentucky the One Hundred Eighty-ninth, and of the University of Louisville the One Hundred Eighty-third.



Woodford L. Peter, Jr.
Chairman of the Board of Trustees

Donald C. Swain
President of the University

(9) Copy of Drug Enforcement Administration license (DEA), if the physician or dentist has one. If a physician or dentist does not have one, it should be determined if the he or she never had a license or if it was withdrawn by the DEA.

b. Other Requirements:

(1) Physicians are to be screened through the Federation of State Medical Boards (FSMB) disciplinary data bank. Names of individuals to be screened through the FSMB are provided by telephone or message to HQ AFMPC/SGC. The following information must be provided on each individual: name, date of birth, social security number, ECFMG certificate number (if applicable), medical school and date of graduation. As an alternative, a current physician profile from the AMA Masterfile may be obtained and kept on file. This requirement does not apply if the applicant is a direct transfer from another Air Force MTF either as an active duty or civilian provider.²

(2) Applicants are to be interviewed by at least one individual of the same or a similar professional training. Contract groups may be delegated this authority for contract personnel. Appendix 1 is a screening checklist which may be used in interviewing and considering applicants. A summary or statement of the interview of is to be included in the credentials file.

c. Verifications. A reasonable effort must be made to verify with the primary issuing authority all documents noted above with (VERIFIED). Documents can be verified by one of several means.

(1) Written confirmation from the issuing authority. This confirmation should be included in section VI of the PCF. In the case of qualifying degrees, a certified copy of final college transcripts is acceptable.

(2) Telephonic confirmation from the issuing authority. This confirmation must be annotated in section VI of the PCF, either on the copy of the document being verified or on a separate listing of documents verified. The note should state:

(a) Who and what organization verified the document.

(b) The date it was verified.

(c) The signature of the person who did the verification.

(3) Prior to 1 Jan 88, documents on physicians can be verified against an American Medical Association Masterfile physician profile. After 1 Jan 88, physician profiles can only be used to identify discrepancies between the physician identified and what was obtained from the primary issuing authorities.

(4) Authentication that a document is a true and valid copy of the original does not constitute verification.

(5) Despite the best of efforts, there will be documents which cannot be verified. If written verification cannot be obtained after two tries and in all other cases where verification cannot be obtained, note in section VI of the PCF what documents cannot be verified and why.

(6) Following the initial verification, credentials do not need to be reverified with a few exceptions:

(a) Licenses for non-active duty providers must be reverified upon renewal of license or privileges, whichever is sooner.³

² 42 U.S.C. 11137 directs the Department of Health and Human Services to establish in 1989 a National Practitioner Data Bank to receive pertinent information on licensed providers. When this data bank is functioning, this requirement will change to require screening through the DHHS data bank.

³ The JCAHO has given the Air Force an equivalency waiver which negates the need to reverify the licenses of active duty providers.

(b) Some specialty board certifications are valid for only specified periods and are to be reverified upon renewal.

d. **Providers Entering Through Recruiting Channels.** Recruiting personnel compiles the documents specified above and provides it to HQ AFMPC/SG. HQ AFMPC/SG sends all precertifying documents to the provider's initial MTF assignment at least 15 days before the provider's reporting date. On request, the precertifying packages on nonselected applicants will be provided to the recruiting agencies of the other Military Departments.

e. **Providers Attending Residency, Fellowship, or Other Long-Term Graduate Education Programs Within the Air Force, to Include OB/GYN and Pediatric Nurse Practitioner Preceptorships:**

(1) The director of medical education at the MTF which provides the training for an individual will create and maintain a health education record and a PAF during the first year of training. It will contain verified copies of all appropriate documents. For nurse practitioners, the 3790th Medical Service Training Wing will prepare and maintain these records.

(2) The PAF will include AF Forms 494, Academic/Clinical Evaluation Report, which are to be completed at least every six months. Upon completion of training, a final AF Form 494 shall be prepared to reflect all material in the PAF. The final AF Form 494 will be placed in the health education record. The health education record becomes the basis for the PCF and will be sent to the gaining MTF by registered mail (no return receipt required) to arrive at least 15 days prior to the provider's reporting date.

(3) Also to be included in the health education record when it is sent to the gaining MTF is an AF Form 1562 completed by the training program director. The opinion in Item 11 of the form is based on the standardized privilege list for the specialty in which the provider has been trained. The training program director then enters the appropriate code in the Approved column of the privilege list to show his or her evaluation of the student's ability to do the procedures or treatments. Before awarding provisional privileges, the initial MTF must ensure it can support the procedures or treatments the training program director indicated the student can do and change the list as necessary.

f. **Deferred Providers Attending Residency, Fellowship, or Other Long-Term Graduate or Other Medical Education Programs in Residence at Civilian MTFs.** These individuals are in a nonsponsored status under the administrative control of HQ AFMPC/SG. HQ AFMPC/SG will ask each provider to submit a copy of his or her professional diplomas, certificates of internship and residency training, license, and AF Forms 1540 and 1562. The appropriate documents will be verified and sent to the provider's gaining MTF at least 15 days prior to the individual's reporting date. The gaining MTF must get and verify appropriate documents that were not available at the time the provider's credentials were processed.

A2-7. **Provider's Credentials File.** The Privacy Act of 1974 governs access to PCFs. The file for each provider is divided into six separate sections using a six-part folder (NSN 7530-00-990-8884) as follows:

a. **Section I.** Section I includes the current application for privileges and lists of privileges for the present unit of assignment, including the AF Form 1540 and privilege lists. A positive medication list for physician assistants, nurse practitioners, and optometrists must be included.

b. **Section II. Performance Data.** This section consists of two parts:

(1) The permanent documents contained in the PCF which reflect relevant and factual performance data on the provider. This section includes, but is not limited to, AF Forms 1562 and 22. AF Form 22 summarizes data in the PAF and is completed by the individual who maintains the PAF each time a provider:

(a) Is considered for renewal of privileges.

(b) Is reassigned to another MTF.

(c) Separates/retires or terminates employment or services.

TESTIMONY ON SB 126 BEFORE SENATE LABOR & COMMERCE
COMMITTEE MEETING ON MARCH 20, 1989

DR. JASON RAMPTON: (Anchorage)

Good afternoon. My name is Dr. Jason Rampton. I gave testimony at the previous hearing on the 8th of February. I also spoke later with Senator Faiks here in Anchorage.

The main concern that was expressed by those who oppose SB 126 was how do we verify the background of a dentist who seeks licensure by credentials. To answer this question, I've compiled a typical package of the in depth background information that can easily be obtained for a federally employed dentist. I believe before you -- I sent down three stapled packets of credentialing information.

The first packet contained an annual performance report. This is a yearly report and it's basically a report card for the dentist. This report card is completed by two or three other dentists, who are his direct supervisors. It contains information on his professionalism, on his dental skills, on his moral integrity, and other important issues. If the dentist has practiced in central service for 20 years then, for example, he would have 20 of these [indisc.] report cards. Can there be any better yardstick to measure a dentist? I think not, in fact, I think you would agree that a long-term track record of past performance is the best indicator of future performance.

The second packet contains information on continuing dental education. A dentist who is currently licensed in Alaska, as previously was mentioned, is required to complete an average of 14 hours of continuing education annually. That's only 14 hours to maintain his license. In the Air Force, on the other hand, by comparison, we're required to complete an average of 50 hours annually. That's more than three times what is required by other licensed dentists in Alaska. And by the way, the requirements for continuing dental education is set forth by the Army and [indisc.] are very similar to those of the Air Force.

The third package you have before you contains precise credentialing information used by the Elmendorf Air Force Base Regional Hospital. This file provides information on specific dental procedures that individual dentists routinely perform on other patients at this particular base. It is a very in depth credentialing process and all federally employed dentists are subject to a very similar credentialing process. As you can see before you, very clearly there is an abundance, and I do mean there is an abundance of documentation to support the dental credentials in federally employed dentists. These documents can be presented to the state board upon their request at any time.

Now, I would challenge the Alaska Dental Society to produce any similar such in depth documentation and

credentials for licensed dentists who have taken the Western Regional Board exam. The Western Regional Board exam demonstrates only that a dentist can perform basic critical procedures while someone is looking over his shoulder. This is not to say that there are not highly qualified dentists practicing in Alaska, but, rather, that the in depth historical long-term documentation of credentials is far better for an experienced federally employed dentists. Just, the documentation is very, very good, and these credentials are, I repeat, are verifiable.

I also ask how many Alaskan licensed dentists can provide proof of their current CPR certification. I think that the committee would find this very revealing, and I'd also like to point out that all federally employed dentists are required to be CPR certified.

Now there is another question regarding the burden of proof - that is who is responsible to do [indisc.] in verifying credentials. The burden of proof to provide the documentation for credentials should be placed upon the applicant. If the Dental Board desires to further investigate the background of the dentist, then let them do so. If they want to, the Dental Board could easily telephone every licensing agency in the entire country requesting background information, or past litigation, or discipline, and it could easily be done with a telephone call giving the applicant's name and social security number. Any added expense required to perform this inquiry

should be paid by the applicant. Perhaps a processing fee of say \$500 or \$1,000, or whatever the Board deems necessary should be paid to ensure that this process would be met, that this process would not financially burden the State of Alaska.

Now, in conclusion I would like to say that there are dentists with very good verifiable gold-plated credentials who are being victimized by current emergency regulations by the Dental Board. Local dentists are clearly protecting their turfs. If this bill is not passed, a great injustice will be allowed to continue. I urge you, I urge you ever so strongly to support this bill. I thank you again for the opportunity to speak, and if you have any questions, I'd like to answer them for you.

GEORGE HANSEN: (Anchorage)

Yes, Senator Eliason, this is George Hansen. I'm a private practicing dentist in Anchorage. I've been here 12 years. I may be protecting my turf, but I don't think there could be much done to damage my practice at this stage of the game.

[Indisc.] to testify against the bill in its present form, my source of information is primarily the ADA. The members of the ADA absolutely favor a freedom of movement of dentists, but we put a qualification on there that it has to be with support of the patient. That is, the patient's rights must be considered, and so while we want

to move dentists with a minimum of inconvenience, we don't want to take away all the boarders. The ADA then falls short of recommending licensure by credential at this time, and essentially for the same reasons that the committee is having difficulty forming an acceptable statute. That is, the incomplete ability to establish clinical and professional competency sufficient to protect the patients.

With regard to specific sections of the bill, on page 1, line 25, requires the Board to establish equivalency of testing procedures. The ADA has been looking at that for some time and we find it to be somewhat of a difficult problem and expect two more years before we can resolve that problem.

Line 29 requires that a dentist employed in federal service be endorsed by an employing federal agency. We believe that that's being discriminatory. There are many dentists who will be coming to Alaska, or at least looking at Alaska, who are employed, but they will be employed by other dentists, or will be employed by unions, [indisc] insurance companies. We think that an endorsement requiring only a federal service dentist would not be correct.

On the next page, page 2, lines 2 and 3, require a continuous active practice averaging 20 hours per week, but it doesn't specify clinical practice. We would think that that would be a minimum amount of time in clinical practice.

Lines 5, 6 and 7 speak to unresolved complaints. Well that information should be confidential. That is, if the complaint is unresolved, it should not be brought to the attention of the Board. That compounds a problem, however, if our Board can't find what other boards are looking at without compromising the precision of the dentist who is applying and is under investigation, then that means that our Board doesn't have the information available. That would mean then that whoever applies would have to go through some waiting period. We see that as being another area of great difficulty.

Lines 12 to 17, speak to continuing education related to dentistry. It doesn't specify that there will be an approving agency for those CE courses. Also, it is unspecified that any part of the CE must be clinical dentistry.

There is no fiscal notes here. I find that the states of Arkansas and Tennessee discontinued licensure by credential because they found that they were flooded by applicants and were unable to review the applications that were submitted to them.

So, in theory, I would say that the resources are not yet available to the licensing agency in Alaska - that is the Dental Board - to ensure adequate proof of professional competency. The Dental Board is not currently empowered to protect the public by examining, if we allow them to examine credentials only. I would say that when proof of

patient satisfaction is made part of the process, then licensure by credential should be incorporated.

Thank you, Senator.

DR. WAYNE A JENKINS (Sitka)

Good afternoon, Senator and members of the committee. I'm Dr. Wayne Jenkins and I am a dentist in Sitka.

I am strongly in support of SB 126. The working draft has been very well done and would offer protection to the patient. The requirements are even more strenuous than that required of the practical exam, for example, the CPR requirement, which is very good. The 50 hours of continuing dental education over a three-year period is even more stringent than is required for re-licensing.

I have no vested interest in this bill, as I am not eligible to be credentialed. I failed the Alaska board in 1964. Just a brief rundown on my CD, if I've never testified here before. I am a graduate of the University of [indisc.]; 1962 a Veterans Administration internship; commissioned officer in the United States Public Health Service from 1963 - I have had a total of assignments off and on in Alaska for 9-1/2 years; I hold a masters degree in dental education and dental research from Indiana University granted in 1972; I have been on the faculty of dental school at New York University, the University of Pacific, the University of California; I have been on the faculty of the University of Hawaii, School of Dental

Hygiene and also the University of New York and two dental programs of dental assisting; I was also the consultant to the Veterans Administration in Hawaii in 1979 through 1981; I spent nine years assigned exclusively to doing clinical and laboratory research on dental materials. I have 22 publications in national and international journals; and I have over 61 presentations before local, state and national and international professional groups.

The [indisc] about the Alaska Dental Society has bragged over the last few years that they were able to stop licensure by credentials and encourage the supporting of legislation again this year as opposed to recommendations of the committee. Again, this is pure and simple protectionist policy. Since I [indisc.] in 1958, the majority of the interviews and the polls from the American Dental Association has found that the majority of the dentists in the American Dental Association favor some form of credentialing, but have always insisted that this be done as a state's right, not a national policy. National policy is looking at this very closely and something should be done on a state's rights basis. At the present time, the president of the American Dental Association, who is dean of the dental school at the University of the Pacific, is a strong endorser of credentialing, but also as a state's rights measure. Credentialing is the way of the future and it should not be used as a protectionist policy.

This is my testimony and I thank you this afternoon.

DR. MARY ANNE NAVITSKY: (Sitka)

I am a lifetime resident of Alaska and want to endorse the bill, 126. I have grown up in Alaska and know that often health care is very limited in many areas of Alaska, and feel that although we do need someone to protect the patient, limiting the number of dentists, I do not believe, is a way to adequately protect the patient's well-being.

The need for some way of dealing with that problem of inadequate care is definitely there. I believe licensure by credential is not going to disrupt the care of the patient.

Thank you very much.

WILLIAM R. EVANS: (Anchorage)

I've maintained a private solo practice in Eagle River since September of 1982 and was licensed by credential in Alaska in January of 1982. I also hold a Washington license obtained by examination.

I have submitted written testimony to the committee. The current draft relieves many of the concerns I held regarding the initial proposal. I wish to make it very clear that I do not support any sort of legislation or regulations that diminish or dilute the quality controlled [indisc.] for licensure in Alaska. I do favor legislative wording that would not preclude case presentations for evaluation by the board. It is my understanding that the use of the word "interview" does not allow, in the

attorney general's opinion, an oral examination. Perhaps, changing the wording to "interview and/or case presentation, or oral examinations" would allow for cases to be submitted for evaluation. I appreciate the difficulty of creating an objective oral examination, and I do believe it could be done. I feel it would be in the best interest of the State of Alaska to give the Board of Dental Examiners the option to use [indisc.] if necessary to do so.

Regarding paragraph 8 of the current draft, I would urge the committee to change the wording to "50 hours of continuing education related to clinical dentistry." This would preclude the continuing education requirement being satisfied by practice management courses.

In spite of my membership in the South Central Alaska Dental Society and the Alaska Dental Society, I support SB 126 and do not agree with their opposition to licensure by credentials. They have, in my opinion, failed to show how a carefully and well thought out protocol for licensure by credentials would have any adverse effect on the people of the State of Alaska.

Thank you for you attention, Mr. Chairman.

DR. DOUGLAS SMOLE: (Anchorage) [Dr. Smole's testimony was read into the record by Aileen Smith, an Anchorage attorney]

I am Dr. Douglas Smole, a practicing general dentist for 25 years. My family and I have resided, and I have practiced dentistry in Anchorage for 17 years. I am in my 5th years of private practice and am currently a member of the state board of dental examiners. I am a member of the American Dental Association (ADA) and its state and local dental society components. I am a fellow in the American Academy of General Dentistry.

Prior to private practice, I provided dental service as a commissioned officer in the U.S. Public Health Service in seven states and completed my 20+ years of service as chief of dental services for the Southcentral Services Unit at the Alaska Native Medical Center. I have had a broad range of responsibilities, training and experience and will readily provide a curriculum vitae upon request.

I concur with the American Dental Association position "that an evaluation of a practicing dentist's theoretical knowledge and clinical skill based on his performance record can provide as much protection to the public as would an evaluation based on examination". This position is supported by ADA immediate past president (1988) James Saddoris of Tulsa Oklahoma who stated that "we think licensure by credentials is the proper tack to take". "Many people will tell you that the check and balance on the education system is the licensure system. That's not true the ADA's Commission on Accreditation. The majority of the ADA's House of Delegates thinks that licensure by

credentials is an excellent method and we recommend that to the states." (quote from AGD Impact 2/88)

Furthermore, surveys of ADA members nationwide in 1972 and 1986 indicated that 68% and 76.9% of the members supported licensure by credentials. It is significant to note that in Alaska the opinion of Alaska Dental Society membership has not been formally surveyed on the credentialing question. In my experience, I have heard many Alaskan dentists express opinions in favor of properly processed credential licensure. I believe that state dental boards should be much more than gate keepers and should engage in a variety of efforts directed toward assuring the quality and accessibility of care. Boards must also promote integrity in the provision of that care.

During my years in Alaska, I have been a close observer of the State Dental Board and its licensing activities. At one time, the exam was given at the Native Medical Center. I have worked with dozens of dentists who were examined by the board. Generally the pass rate was 40-50% with extremes of 90% or more the year the teamsters clinics came to Alaska and 10% in 1984. In 1984, 18 candidates took the clinical exam in June, and 2 were granted licenses. At the same session, 12 presented their credentials and I was granted a license. During the first four years that the statutes allowed licensure by credentials, only 5 licenses were granted even though the board was presuming that credential exam based on case

review was legal. It was this crises in 1984 that lead to a threatened lawsuit, the Attorney General's decision, the regulation staying licensure by credentials and movement of the board toward accepting the results of the Western Region Examining Board (WREB). Unfortunately, th episode in 1984 caused considerable discomfort for the board and resulted in much time being spent in fending off challenges. The pain reoccurs whenever the concept of credentialing re-appears. I believe that it is time to put the past aside and to take a positive approach to assuring that licensure by credentials is done in accordance with the statutes, but with modifications of the process to assure protection for the public and fairness to qualified candidates.

Alaska's acceptance of the WREB clinical exam results is a significant improvement. I believe that the WREB is a fair measure of some of the basic knowledge and sills of the general dentist. The exam uses measurable criteria and standard, anonymity of examinees and is will organized. It is important to understand that the WREB is not the panacea that some would rhetorically want you to believe. The WREB functions as a clinical examining agency. The WREB does not do background checks on the candidates. The WREB does not test specialty skills of dental specialists that perform oral surgery, orthodontics, childrens dentistry or other specialties.