

IN THE MATTER OF * BEFORE THE MARYLAND
CHRISTOPHER G. STUZYNSKI, D.D.S. * STATE BOARD OF DENTAL
Respondent * EXAMINERS
License Number: 14412 * Case Number: 2021-032

* * * * *

CONSENT ORDER

In or around August 2020, the Maryland State Board of Dental Examiners (the “Board”) opened an investigation of **CHRISTOPHER G. STUZYNSKI, D.D.S.** (the “Respondent”), License Number 14412. Based on its investigation, the Board determined that it has grounds to charge the Respondent with violating the Maryland Dentistry Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 16-101 *et seq.* (2014 Repl. Vol.).

The pertinent provisions of the Act provide:

Health Occ. § 4-315

(a) *License to practice dentistry.* – Subject to the hearing provisions of § 4-318 of this subtitle, the Board may ... reprimand any licensed dentist, place any licensed dentist on probation, or suspend or revoke the license of any licensed dentist, if the ... licensee:

(16) Behaves... unprofessionally... pertaining to the dentistry profession;

(30) Except in an emergency life-threatening situation where it is not feasible or practicable, fails to comply with the Centers for Disease Control’s [“CDC”] guidelines on universal precautions[.]

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BOARD OF DENTAL EXAMINERS

Prior to the Board issuing disciplinary charges, the Respondent agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

The Board makes the following Findings of Fact:

I. LICENSING BACKGROUND

1. At all times relevant, the Respondent was and is licensed to practice dentistry in the State of Maryland. The Respondent was originally licensed to practice dentistry in Maryland on March 24, 2010, under License Number 14412. The Respondent's license is current through June 30, 2021.

2. At all times relevant, the Respondent practiced dentistry at a private practice located at 111 Warren Road, Suite 1A, Cockeysville, Maryland 21030 (the "Office").

II. COMPLAINT

3. On or about August 31, 2020, the Board received a complaint alleging, among other things, that there were substandard infection control practices at the Office. Based on the complaint, the Board initiated an investigation of the Office's compliance with CDC guidelines.¹

III. INFECTION CONTROL INSPECTION

¹ The Centers for Disease Control and Prevention ("CDC") is a federal agency dedicated to designing protocols to prevent the spread of disease. The CDC has issued guidelines (the "CDC Guidelines") for dental offices which detail the procedures deemed necessary to minimize the chance of transmitting infection both from one patient to another and from the dentist, dental hygienist and dental staff to and from the patients. These guidelines include some very basic precautions, such as washing one's hands prior to and after treating a patient, and also sets forth more involved standards for infection control. Under the Act, all dentists are required to comply with the CDC guidelines, which incorporate by reference Occupational Safety and Health Administration's ("OSHA") final rule on Occupational Exposure to Bloodborne Pathogens (29 CFR 1910.1030). The only exception to this rule arises in an emergency which is life-threatening *and* where it is not feasible or practicable to comply with the guidelines.

4. Due to allegations of potential infection control issues at the Office, on or about September 15, 2020, a Board-assigned infection control inspector (the "Board Inspector"), along with a Board investigator, visited the Office and conducted an infection control inspection.

5. The Respondent was present during the inspection, as was an office manager (the "Office Manager"), a dental assistant and a dental hygienist.

6. As part of the inspection, the Board Inspector utilized the publicly available Centers for Disease Control and Prevention ("CDC") Infection Prevention Checklist for Dental Settings. Based on the inspection, the Board Inspector made the following findings regarding the Office's compliance with the CDC Guidelines:

Section I: Policies and Practices

I.1 Administrative Measures – The Office had an outdated "The Doctors Management OSHA Manual" from 2009 and MOSH and OSHA Compliance Directive, BBP Exposure Control Plan dated 2014-2015. The Office had no specific documentation of an annual reassessment of infection prevention policies and procedures. The Office did not have a Certification of Compliance from the Governor but had an email sent to the Secretary of Health.

I.2 Infection Prevention Education and Training – The Office did not have annual office training of dental staff.

I.3 Dental Health Care Personnel Safety - The Office did not have documentation of Hepatitis B vaccination records for the dental staff. There was no written policy of all other recommended immunizations or a baseline tuberculosis screening upon hire.

I.4 Program Evaluation - The Office did not have current written policies for routine monitoring and evaluation of the infection prevention and control program available at the time of inspection.

I.5 Hand Hygiene - All supplies necessary for adherence to proper hand hygiene were available, but there was no documentation of training, monitoring, or policy review for hand hygiene.

I.6 Personal Protective Equipment (PPE) - There were sufficient supplies of PPE, but there was no documentation of training log or protocol for staff usage.

I.7 Respiratory Hygiene/Cough Etiquette - The Office did not have signs of respiratory hygiene/cough etiquette posted near the entrance. There were no policies, procedures, protocols, or training logs available for inspection.

I.8 Sharps Safety - Written policies, procedures, and guidelines for post-exposure management were available.

I.9 Safe Injection Practices - The Office did not have written policies, procedures, and guidelines for safe injection practices. Sharps disposal container was located in the sterilization area in a hard to reach location.

I.10 Sterilization and Disinfection of Patient Care Items and Devices - The Office did not have written policies and procedures for instrument and device maintenance, sterilization, or staff training. There was documentation of staff training to ensure appropriate use of PPE.

I.11 Environmental Infection Prevention and Control - The Office did not have written policies and procedures for routine cleaning and disinfection of environmental surfaces, barrier protection and PPE.

I.12 Dental Unit Water Quality - The Office did not have written policies and procedures for maintaining dental unit water quality that meets EPA regulatory standards. There were no written policies or procedures outlining response to community boil-water advisory.

Section II: Direct Observation of Personnel and Patient-Care Practices

II.1 Hand Hygiene is Performed Correctly - The dental assistant was observed not performing hand hygiene before donning gloves, after removal of PPE outer surgical gown and moving to an adjacent treatment room to retrieve supplies while still wearing gloves.

II.2 Personal Protective Equipment (PPE) is Used Correctly - The dental assistant and hygienist were observed not having adequate eye protection. None of the dental health care providers wore face shields even though they were available. Heavy duty utility

gloves were not used during instrument transport, cleaning and surface disinfection cleaning.

II.3 Respiratory Hygiene/Cough Etiquette - The Office did not have Respiratory Hygiene/Cough Etiquette signs with instructions to patients posted.

II.4 Sharps Safety - A sharps container was located in a hard reach area behind the autoclave.

II.5 Safe Injection Practices - No administration of local anesthesia was observed during inspection.

II.6 Sterilization and Disinfection of Patient Care Items and Devices - The Office did not comply with sterilization procedures for XCP digital sensor holders as indicated by the manufacturer. Instrument sterilization packages were not sealed at the indicator line, nor were they labeled with the minimum requirement of the sterilizer use, the date of sterilization, the cycle or load number, and an applicable expiration date. There were no clear indications of clean and contaminated workspaces. The slow speed handpiece in the dental hygienist treatment room was left in place and used on consecutive patients without the use of barrier protection or sterilization. The dental hygienist transported dirty instruments to the sterilization area without a covered lid on the tray.

II.7 Environmental Infection Prevention and Control - The Office did not use barriers to protect clinical contact surfaces. Inappropriate PPE eyewear was used while engaging in environmental cleaning. The eye wash station was poorly maintained and had an inadequate flow of water with only one of the two water jets accessible.

II.8 Dental Unit Water Quality - The Office did not have documentation of waterline quality management and maintenance log.

7. Based on the observations made by the Board Inspector, the Respondent failed to ensure compliance with CDC Guidelines at the Office. However, after being contacted by the Office of the Attorney General, the Respondents engaged a Board-approved infection control specialist in May 2021 to ensure the Office was in full compliance of CDC Guidelines. The infection control specialist has since issued a report, dated May 15, 2021, with photo attachments detailing corrective actions taken by the Office to ensure full compliance with CDC Guidelines.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent's conduct, as described above, constitutes violations of the Act as cited above, specifically: the Respondent's conduct as described above, including but not limited to failing to ensure compliance with the CDC Guidelines at the Office as described above, constitutes: behaving... unprofessionally... pertaining to the dentistry profession, in violation of Health Occ. § 4-315(a)(16); and failing to comply with Centers for Disease Control's guidelines on universal precautions in violation of Health Occ. § 4-315(a)(30).

ORDER

It is, on the affirmative vote of a majority of the Board, hereby:

ORDERED that the Respondent shall ensure that the Respondent's dental practice, located at 111 Warren Road, Suite 1A, Cockeysville, Maryland 21030 immediately ceases all dental treatment until the Board issues a separate Order terminating this provision (the "**Order Lifting Voluntary Cessation**"); and it is further

ORDERED that upon the Board's receipt of verified documentation that the Respondent has formally retained the services of a qualified Board-approved infection control consultant and that the consultant has issued a favorable report substantiating that the Respondent and his office staff are in substantial compliance with CDC Infection Control Guidelines, the Board shall issue an **Order Lifting Voluntary Cessation**, which shall allow the practice cited above to resume dental treatment; and it is further

ORDERED that the Respondent is **REPRIMANDED**; and it is further

ORDERED that from the date of the Board's the **Order Lifting Voluntary Cessation**, the Respondent shall be placed on **PROBATION** for a period of **TWO (2) YEARS** under the following terms and conditions:

1. A Board-assigned inspector shall conduct an unannounced inspection within ten (10) business days (or as soon as practicable) in order to evaluate the Respondent and staff regarding compliance with the Act and infection control guidelines. The Board-assigned inspector shall be provided with copies of the Board file, the Consent Order, and any other documentation deemed relevant by the Board;
2. On a continuing basis, the Respondent shall provide to the Board-assigned inspector a schedule of the Office's regular weekly hours of practice and promptly apprise the consultant of any changes;
3. During the probationary period, the Respondent shall be subject to quarterly unannounced onsite inspections by a Board-assigned inspector;
4. The Board-assigned inspector shall provide inspection reports to the Board within ten (10) business days of the date of each inspection and may consult with the Board regarding the findings of the inspections;
5. The Respondent shall, at all times, practice dentistry in accordance with the Act, related regulations, and shall comply with CDC and Occupational Safety and Health Administration's ("OSHA") guidelines on infection control for dental healthcare settings, including enhanced COVID-19 related precautions; and
6. At any time during the period of probation, if the Board makes a finding that the Respondent is not in compliance with CDC and/or OSHA guidelines, the Respondent shall have the opportunity to correct the infractions within seven (7) days and shall be subject to a repeat inspection within seven (7) days to confirm that the violation has been remedied.

7. The Respondent is fined in the amount of **TWO THOUSAND FIVE HUNDRED DOLLARS (\$2500)**, due within sixty (60) days to the board;
8. Within three (3) months of the date of the reinstatement of the Respondent's license, the Respondent shall successfully complete a Board-approved in-person (or, if in-person courses are not available due to the current State of Emergency, then by video-conference) four (4) credit hour course(s) in infection control protocols, presented by a board-approved instructor, which may not be applied toward his license renewal.
9. Within three (3) months of the date of the reinstatement of the Respondent's license, the Respondent shall successfully complete a Board-approved in-person (or, if in-person courses are not available due to the current State of Emergency, then by video-conference) two (2) credit hour course(s) in ethics, presented by a board-approved instructor, which may not be applied toward his license renewal.
10. If the above-mentioned courses are not completed within three (3) months of the date of the Consent Order, the Board may allow an extension of three (3) additional months if the Respondent demonstrates to the Board's satisfaction that he was unable to complete the courses despite a good-faith effort.
11. The Respondent may file a petition for early termination of his probation after one (1) year from the date of this Consent Order. After consideration of the petition, the Board, or a designated committee of the Board, shall grant the petition if the Respondent has satisfactorily complied with the terms and conditions of this Consent Order.

AND IT IS FURTHER ORDERED that no part of the training or education that the Respondent receives in order to comply with this Consent Order may be applied to his required continuing education credits, and it is further

ORDERED that the Respondent shall at all times cooperate with the Board, any of its agents or employees, and with the Board-assigned inspector, in the monitoring,

supervision and investigation of the Respondent's compliance with the terms and conditions of this Consent Order, and it is further

ORDERED that the Respondent shall be responsible for all costs incurred under this Consent Order; and it is further

ORDERED that, unless otherwise ordered by the Board, after a minimum of two (2) years from the effective date of the Order for Reinstatement, the Respondent may submit a written petition to the Board requesting termination of probation. After consideration of the petition, the probation may be terminated through an order of the Board. The Board shall grant termination if the Respondent has fully and satisfactorily complied with all of the probationary terms and conditions and there are no pending investigations or outstanding complaints related to the findings of fact in this Consent Order; and it is further

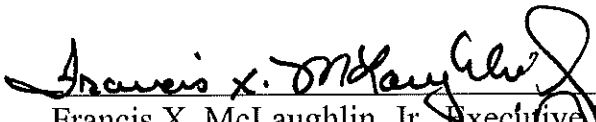
ORDERED that if the Respondent allegedly fails to comply with any term or condition of probation or this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If there is a genuine dispute as to a material fact, the hearing shall be an evidentiary hearing before the Board. If there is no genuine dispute as to a material fact, the Respondent shall be given a show cause hearing before the Board; and it is further

ORDERED that after the appropriate hearing, if the Board determines that the Respondent has failed to comply with any term or condition of probation or this Consent Order, the Board may reprimand the Respondent, place the Respondent on probation with

appropriate terms and conditions, or suspend or revoke the Respondent's license to practice dentistry in Maryland. The Board may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine upon the Respondent; and it is further

ORDERED that this Consent Order is a public document pursuant to Md. Code Ann., Md. Code Ann., Gen. Prov. §§ 4-101 et seq. (2014).

6/24/2021
Date


Francis X. McLaughlin, Jr., Executive Director
Maryland State Board of Dental Examiners

CONSENT

By this Consent, I, Christopher G. Stuzynski, D.D.S., agree and accept to be bound by this Consent Order and its conditions and restrictions. I waive any rights I may have had to contest the Findings of Fact and Conclusions of Law.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections as provided by law. I acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I also affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed any such hearing.

I sign this Consent Order after having had the opportunity to consult with counsel, and I fully understand and comprehend the language, meaning and terms of this Consent Order. I voluntarily sign this Order and understand its effect.

June 4th 2021
Date

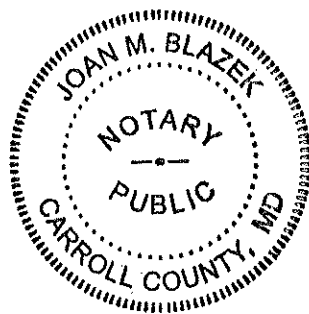
Christopher G. Stuzynski D.D.S.
Christopher G. Stuzynski, D.D.S.
Respondent

NOTARY PUBLIC

STATE OF Maryland
CITY/COUNTY OF: Baltimore

I HEREBY CERTIFY that on this 4th day of June 2021, before me, a Notary Public of the State and County aforesaid, personally appeared² Christopher G. Stuzynski, D.D.S., and gave oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.



Joan M. Blazek
Notary Public
My commission expires: 11/20/23

² During the current State of Emergency, and in compliance with the Governor's emergency orders, notarization may be accomplished remotely.