

IN THE MATTER OF
DAVID KNOPF, D.M.D.

Respondent

License Number: 6771

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BEFORE THE MARYLAND
STATE BOARD OF
DENTAL EXAMINERS
Case Number: 2019-126

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CONSENT ORDER

On or about May 30, 2019 the Maryland State Board of Dental Examiners (the “Board”) summarily suspended the license of DAVID KNOPF, D.M.D. (the “Respondent”), License Number 6771, to practice dentistry in the State of Maryland. The Board took such action pursuant to its authority under: Md. Code Regs. (“COMAR”) 10.44.07.22, determining that there was a substantial likelihood that the Respondent posed a risk of harm to the public health, safety, or welfare; and Md. Code Ann., State Gov’t § 10-226(c)(2) (2014 Repl. Vol. & 2018 Supp.), concluding that the public health, safety and welfare imperatively required emergency action.

FINDINGS OF FACT

The Board finds the following facts.

1. At all times relevant hereto, the Respondent was licensed to practice dentistry in the State of Maryland. The Respondent was initially licensed on August 15, 1978. His license is current through June 30, 2019.

2. At all times relevant hereto, the Respondent has practiced dentistry at a private practice located at 20 East Timonium Road, Suite 300, Timonium, Maryland 20910 (the “Office”).

Complaint

3. On or about March 25, 2019, the Board received a complaint (the "Complaint") from an individual (the "Complainant") who identified herself as a former patient of the Office and complained about the dental care she received from the Respondent and other dentists at the Office in early 2017.

4. In the Complaint, the Complainant indicated that following treatment at the Office, she developed a serious infection that the named dentists failed to promptly diagnose, and that caused her severe pain, weakness, and other debilitating symptoms for several months afterward.

5. Additionally, the Complaint alleged that during a treatment visit to the Office, which took place after business hours, a team of cleaners "were down the hall vacuuming, wiping counters, moving equipment. In hindsight, it didn't appear to be an aseptic area."

6. Based on the Complaint, the Board initiated an investigation regarding the Office's compliance with CDC guidelines.¹

7. In furtherance of the investigation, the Board assigned an expert in infection control protocols (the "CDC Expert") to conduct an inspection of the Office.

Office 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.

8. On or about April 11, 2019, the CDC Expert, accompanied by a Board investigator, conducted an inspection to determine whether the Office was complying with the CDC guidelines. The Respondent, as well as the current owner of the Office, were present and treating patients at the Office during the inspection.

Expert Report

9. Following the inspection, the CDC Expert completed a report (the “Expert Report”) regarding compliance with CDC Guidelines at the Office.

10. In the Expert Report, the CDC Expert noted violations of the CDC Guidelines in a range of areas, specifically as outlined below.²

Section I: Policies and Practices

▪ **I.1 Administrative Measures**

- The Office had a CDC Manual, but it dated from 1992 and contained no updates

▪ **I.2 Infection Prevention Education and Training**

- No Documentation of “Time of Hire” training
- Last “annual” training documented as April 2017

▪ **I.3 Dental Health Care Personnel Safety**

- No Documentation of training
- No documentation of training regarding post-exposure protocol
- No documentation of compliance with hepatitis B vaccination requirements for dental healthcare personnel (DHCP)
- No documentation of tuberculosis screening of DHCP upon hire

▪ **I.4 Program Evaluation**

² The headings and numbering system used to outline the CDC-related issues herein are derived from the CDC’s published “Infection Prevention Checklist,” which the CDC Expert employed as a tool in completing her inspection.

- No documentation of program evaluation
- **I.5 Hand Hygiene**
 - No Documentation of training
 - No posting of "Hand Hygiene Protocol" in any of the treatment operatories, instrument processing area, or the staff rest room
- **I.6 Personal Protective Equipment (PPE)**
 - No documentation of training regarding PPE
 - Staff stated that they were following a policy implemented by the previous owner of the Office to take their cloth labcoats home and personally launder them. This policy was reportedly implemented in order to save costs compared to the previous policy of laundering PPE on site. The policy was reportedly "under review" but still in place at the time of the Board's inspection.
- **I.7 Respiratory Hygiene/Cough Etiquette**
 - No documentation of policy in practice
 - No "Cover Your Cough" poster present in the reception area
 - No tissues, face masks, hand sanitizer, or trash receptacle available in the reception area
- **I.8 Sharps Safety**
 - No documentation of training, update or evaluation of policy
 - The last documented pickup date for "sharps" waste was April 2017
- **I.9 Safe Injection Practices**
 - No documentation of training, update or evaluation of policy
- **I.10 Sterilization and Disinfection of Patient Care Items and Devices**
 - No documentation of training, update or evaluation of policy
 - Instrument processing location and layout of equipment and materials indicates the Office is not following a "Single Loop" sequence of sterilization

- Sealed sterilization pouches containing instruments are not labeled with the date and which processor was used for sterilization
- **I.11 Environmental Infection Prevention and Control**
 - No documentation of update or evaluation of policy
 - Last “annual” training documented as April 2017
 - Utility gloves were not available for use in the instrument processing area
 - Disinfectant container was not labeled with an activation date
- **I.12 Dental Unity Water Quality**
 - No documentation of update or evaluation of policy
 - Last “annual” training documented as May 2017

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

- **II.1 Hand Hygiene is Performed Correctly**
 - Hand hygiene practices by DHCP was inconsistent
 - Protocol was not posted in any of the operatories or the instrument processing area
- **II.2 Personal Protective Equipment (PPE) is Used Correctly**
 - Utility gloves not used while processing instruments
 - DHCP reportedly launder their cloth labcoats at home in the evenings after wearing them throughout the day at the Office
- **II.3 Respiratory Hygiene/Cough Etiquette**
 - No "Cover Your Cough" poster present in the reception area
 - No tissues, face masks, hand sanitizer, or trash receptacle available in the reception area
- **II.4 Sharps Safety**
 - Sharps containers available in operatories, but the last documented pickup date for “sharps” waste was April 2017

▪ **II.6 Sterilization and Disinfection of Patient Care Items and Devices**

- Dental rotary burs, rubber dam clamps, rim lock trays and Palodent matrix showing indications of having been used (dental materials present) were placed in containers for possible reuse in dental operatory
- Sealed sterilization pouches containing instruments are not labeled with the date and which processor was used for sterilization
- Instrument processing location and layout of equipment and materials indicates the Office is not following a "Single Loop" sequence of sterilization

▪ **II.7 Environmental Infection Prevention and Control**

- Barriers were not placed on the HVE, SVE or A/W Syringe
- Disinfectant container was not labeled with an activation date

▪ **II.8 Dental Unit Water Quality**

- Dental unit log for self-contained water bottles was inconsistent regarding dates of change and maintenance

11. The Expert concluded that based on the violations of the CDC Guidelines found during the CDC Inspection, in particular those listed above, there exists a potential risk to patient and staff safety at the Office.

12. As a licensed dentist who practices at the Office, the Respondent failed to ensure compliance with the CDC Guidelines at all times.

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, including but not limited to failing to ensure compliance with the CDC Guidelines at the Office as described above, constitutes: behaving dishonorably or unprofessionally, or violating a professional code of ethics 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)(28).

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, it is, by a majority of the Board considering this case:

ORDERED that the Board's *Order for Summary Suspension* of the Respondent's license to practice dentistry in the State of Maryland, issued on May 30, 2019, is hereby **TERMINATED**; and it is further

ORDERED that the Respondent is hereby **REPRIMANDED**, and it is further

ORDERED that the Respondent is placed on **PROBATION** for a period of **TWO (2) YEARS**, subject to the following terms and conditions:

1. A Board-assigned inspector shall conduct an unannounced inspection at the Office within ten (10) business days of the date of this Consent Order in order to evaluate the Respondent and his staff regarding compliance with the Act and infection control guidelines. The Board-assigned inspector shall be provided with copies of the Board's file, the Consent Order, and any other documentation deemed relevant by the Board.
2. The Respondent shall provide to the Board-assigned inspector a schedule of the regular weekly office hours of the Office and promptly apprise the inspector of any changes.
3. During the probationary period, both the Office 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 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.
6. On or before the fifth day of each month, the Respondent shall provide to the Board a copy of the current patient appointment book for that month for the Office.
7. Within three (3) months of the date of this Consent Order, the Respondent shall successfully complete a Board-approved in-person four (4) credit hour course(s) in infection control protocols, which may not be applied toward his license renewal.
8. Within three (3) months of the date of this Consent Order, the Respondent shall successfully complete a Board-approved in-person two (2) credit hour course(s) in professional ethics, which may not be applied toward his license renewal.
9. If the above-mentioned courses are not completed within three (3) months of the date of the Consent Order, there shall be an automatic 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.
10. The Respondent is fined in the amount of TWO THOUSAND FIVE HUNDRED DOLLARS (\$2500), due within twelve (12) months of the effective date of the Consent Order; and
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, may grant, grant with conditions, or deny the petition at its sole discretion.

AND IT IS FURTHER ORDERED that after the conclusion of the **TWO (2)** YEAR probationary period, 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, or a designated Board committee. The Board,

or designated Board committee, shall grant the termination if the Respondent has fully and satisfactorily complied with all of the probationary terms and conditions and there are no pending complaints of similar nature; and it is further

ORDERED that if the Board has reason to believe that the Respondent has failed 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 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

ORDERED that the Respondent shall be responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

6/5/2019
Date

David Knopf
David Knopf, D.D.S., the Respondent

NOTARY

STATE OF MARYLAND
CITY/COUNTY OF Baltimore

I HEREBY CERTIFY that on this 5th day of June,
2019, before me, a Notary Public of the foregoing State and City/County personally appear
David Knopf, D.D.S., and made oath in due form of law that signing the foregoing Consent
Order was his voluntary act and deed.

AS WITNESSETH my hand and notary seal.

Andrea A. Page
Notary Public

My commission expires: 10/10/19

ORDERED that this Consent Order is a **PUBLIC DOCUMENT** pursuant to Md. Code Ann., Gen. Provisions §§ 4-101 *et seq.* (2014).

June 5, 2019
Date

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

CONSENT

I, David Knopf, D.D.S., acknowledge that I am represented by counsel and have consulted with counsel before entering into this Consent Order. By this Consent and for the purpose of resolving the issues raised by the Board, I agree and accept to be bound by the foregoing Consent Order and its conditions.

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 provided by the law. I agree to forego my opportunity to challenge these allegations. I acknowledge the legal authority and jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed after any such hearing.

I sign this Consent Order after having an opportunity to consult with counsel, voluntarily and without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order.