

TEXAS STATE BOARD OF DENTAL EXAMINERS

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Designation of Records Form

This form is to be used by the licensed Texas dentist to designate a custodian of records upon initial licensure and at each renewal period. Dental records are the sole property of the dentist who performs the dental service, unless otherwise designated per Board rules. Please provide the following information to appropriately designate ownership of records and appointment of a custodian, if necessary. Please check ($\sqrt{}$) one: □ Dental Applicant □ Licensed Texas Dentist If applicable: Texas License Number: Social Security Number: Date of Birth: First Name Middle Name Last Name Mailing Address City State Zip Code In the event that I leave a location or practice, whether by retirement, sale, transfer, termination of employment or become mentally or physically incapacitated, or abandon such records. I have the following arrangement in place: Please check $(\sqrt{})$ one below; You may attach another sheet, if it is needed. 1. Transfer of Records Agreement: 22 TAC §108.8(e)(2); This agreement may be made at any time in an employment or other working relationship between a dentist and another entity eligible to accept dental records. Such transfer of records may apply to all or any part of the dental records generated in the course of the relationship. Please provide the full name(s) of the dentist(s) involved in the agreement, include the locations involved in the agreement, and specifically identify what records □ Yes or □ No are involved. **Dental License Full Name** Location(s) Record(s) Type Number of Transferee 2. Records Management Agreement: 22 TAC §108.8(e)(3); A maintenance agreement shall not transfer ownership of the dental records, but shall require that the dental records be maintained in accordance with the laws and rules of the TSBDE. Provide full names of the dentists, locations, and what records are involved in the agreement. □ Yes or □ No Record(s) Type Dental License Number of Full Name Location(s) Manager Custodian of Records: 22 TAC § The designated custodian of records shall act as temporary or permanent custodian for the dentists in the event of the dentist's death, incapacity or abandonment of the records. a. My designated custodian of records is a Texas licensed dentist; i. Provide the following: Dental License Number Full Name Location(s) □ Yes or □ No b. My designated custodian of records is **NOT** a Texas licensed dentist; i. Provide the following; Full Name Phone/Email Location(s)

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May 8, 2019