

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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The status of an appeal may be found on court access websites at:

<http://ccap.courts.state.wi.us/InternetCourtAccess> and <http://www.courts.state.wi.us/wscca>

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STATE OF WISCONSIN  
BEFORE THE DENTISTRY EXAMINING BOARD

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IN THE MATTER OF APPLICATION FOR  
A DENTIST LICENSE

:  
:  
: ORDER GRANTING  
: LIMITED LICENSE  
:

KENNETH PINESCHI, DDS  
APPLICANT.

0005600

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The parties to this action for the purposes of Wis. Stat. § 227.53 are:

Kenneth Pineschi  
6263 Vicksburg Road  
Rockford, IL 61107

Wisconsin Dentistry Examining Board  
1400 East Washington Avenue  
P.O. Box 8935  
Madison, WI 53708-8935

FINDINGS OF FACT

- I. Kenneth Pineschi (Applicant) has filed an application (#620884) for a credential to practice as a Dentist in Wisconsin via Endorsement.
- II. Information received in the application process reflects that the Applicant was granted a license as a Dentist in Illinois on September 22, 1977. Applicant's Illinois Dentist license expires on September 30, 2018.
- III. Information also received in the application process reflects that the Applicant was previously disciplined in the state of Illinois, in March 1990, involving his prescribing practices in Illinois.
  - A. The Applicant issued multiple prescriptions for the Schedule II controlled substances Percodon and Dilaudid for five (5) patients.
  - B. While most of the prescriptions were for between twenty (20) and forty (40) tablets, one patient received nine (9) prescriptions for Dilaudid in quantities between eighty (80) and one hundred fifty (150) tablets. This patient also received Dilaudid prescriptions for smaller quantities. Some of the prescriptions were not entered in the dental patient records and some of the patient records were deficient in that they were not adequate for identification purposes and did not fully document the patients' oral condition or services rendered.

- C. The Illinois Department of Professional Regulation determined that these prescriptions were issued for other than dental therapeutic purposes and/or were excessive for the patient's dental needs.

#### CONCLUSIONS OF LAW

- I. The Board has jurisdiction over this matter pursuant to Wis. Stat. § 447.02, and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. §§ 15.08(5)(c) and 227.44(5).
- II. Applicant has engaged in unprofessional conduct by having his Illinois license to practice Dentistry subject to disciplinary action. Wis. Stat. § 447.07(3)(a) and Wis. Admin. Code § DE 5.02(14).
- III. The above referenced facts demonstrate that Applicant violated a law or laws which substantially relate to the practice of Dentistry. Wis. Stat. § 447.07(3)(f) and Wis. Admin. Code § DE 5.02(15).

#### ORDER

NOW, THEREFORE, IT IS ORDERED that KENNETH PINESCHI is GRANTED A DENTIST LICENSE subject to the following LIMITATIONS, TERMS AND CONDITIONS:

1. Within sixty (60) days from the date of this Order, Applicant shall review the Board's Best Practices for Prescribing Controlled Substances Guidelines and submit an affidavit attesting to his review of the document. The Board's Best Practices for Prescribing Controlled Substances Guidelines can be found at <https://dsps.wi.gov/Documents/BoardCouncils/DEN/DENGuidelinesApril2017.pdf>.
2. Applicant shall file quarterly reports with the Department of Safety and Professional Services Monitor (Department Monitor). Each report shall include the following:
  - A. The name, address, and telephone number of Applicant, and name, address, and telephone number of his employer;
  - B. Describe the circumstances of Applicant's employment, including the nature and extent of the Applicant's prescribing practices and whether he has practiced in compliance with all laws governing the practice of dentistry;
  - C. Applicant shall report to the Department Monitor any change of employment status, residence, address, or telephone number within five (5) days of the date of a change.
  - D. A copy of Applicant's Prescribing Practice Metrics Report from the Wisconsin Prescription Drug Monitoring Program (PDMP). The entire report, including your Prescribing Volume Ranking must be submitted.
  - E. Any other information required by the Board.

3. The Department Monitor is the individual designated by the Board as its agent to coordinate compliance with the terms of this Order. Any requests, petitions, reports and other information required by this Order shall be mailed, e-mailed, faxed or delivered to:

Department Monitor  
Department of Safety and Professional Services  
1400 E. Washington Ave.  
P.O. Box 7190, Madison, WI 53707-7190  
Telephone (608) 267-3817; Fax (608) 266-2264  
DSPSMonitoring@wisconsin.gov

4. Applicant may petition the Board for full, unrestricted licensure after completion of one (1) year of practice in compliance with all terms and conditions of this Order. "Practice in compliance" includes the submission of reports, the content of which are satisfactory to the Board. A denial of such a petition shall not be deemed a denial of license under Wis. Stat. §§ 227.01(3), or 227.42, or Wis. Admin. Code ch. SPS 1, and shall not be subject to any right to further hearing or appeal.
5. In the event that Applicant violates any terms of this Order, Applicant's license may, in the discretion of the Board or its designee, be SUSPENDED, without further notice or hearing, until Applicant has provided proof, which is determined by the Board or its designee to be sufficient, that Applicant is in compliance with the terms of the Order. The Board may, in addition and/or in the alternative, refer any violation of this Order to the Division of Legal Services and Compliance (DLSC) for further investigation and action.
6. In the event the Board determines that the Applicant's PDMP prescribing data indicate suspicious or critically dangerous conduct or practice, Applicant's license may be subject to immediate suspension without further notice or hearing. The Board may, in addition and/or in the alternative, refer any suspicious or critically dangerous conduct or practice to DLSC for further investigation and action.
7. Applicant shall be responsible for all costs and expenses associated with compliance with the terms and conditions of this Order.

Dated at Madison, Wisconsin this 24 day of January 2018.

WISCONSIN DENTISTRY EXAMINING BOARD

By: Rubra Beres *ek*  
A Member of the Board

STATE OF WISCONSIN  
BEFORE THE DENTISTRY EXAMING BOARD

IN THE MATTER OF APPLICATION FOR  
A DENTIST LICENSE

KENNETH PINESCHI, DDS  
APPLICANT.

STIPULATION

0005600

It is hereby stipulated between the above-referenced Applicant and the State of Wisconsin  
Dentistry Examining Board (Board) as follows:

The Applicant has filed an application for a Dentist license. Information received by the  
Board reflects a basis for denial of the application for a credential. Based upon the  
information of record, the Board agrees to issue, and the Applicant agrees to accept a  
Limited License as a Dentist subject to the terms and conditions set forth in the attached  
Order.

Dated this 22 day of JANUARY, 2018.

  
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Kenneth Pineschi, Applicant

STATE OF WISCONSIN  
DENTISTRY EXAMINING BOARD

Dated this 24 day of January, 2018.

By: Raela Beresek  
Member of the Board