PROPOSED AMENDMENTS TO ARTICLE XIII ANALGESIA, SEDATION, AND GENERAL ANESTHESIA RULES FOR A DENTIST IN AN AMBULATORY FACILITY

7. Minimal Sedation- a minimally depressed level of consciousness produced by a pharmacological method, that retains the patient's ability to independently and continuously maintain an airway and respond normally to tactile stimulation and verbal command. The patient should be oriented to person, place and time. Although cognitive function and coordination may be modestly impaired, ventilatory and cardiovascular functions are unaffected. In accordance with this particular definition, the drug and/or techniques used should carry a margin of safety wide enough never to render unintended loss of consciousness. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of minimal sedation. When the intent is minimal sedation for adults, the appropriate initial dosing of a single enteral drug is no more than the maximum recommended dose of a drug that can be prescribed for unmonitored home use. When the intent is Minimal Sedation, only one drug can be given in addition to nitrous oxide.

Pediatric Considerations: In addition to the physiologic parameters for Minimal Sedation in children under 12 years of age, when the intent is Minimal Sedation, only one drug can be given in addition to nitrous oxide. A drug CANNOT be from the scheduled category of drugs II, III or IV with the exception of Diazepam. If a child under 12 years of age is given any drug for sedation from Schedule II, II or IV, with the exception of diazepam, that child is considered more than minimally sedated.

C. STANDARD OF CARE

1 10. For Pediatric Sedation all drugs from Schedule II, III or IV for sedations must be administered in the dental office.

ADD

I

١

- 11. No more than two patients age twelve or under may be sedated to a moderate level simultaneously by the same practitioner.
- D.3.f. Patient Monitoring: The dentist <u>or qualified staff</u> must remain in the operatory during active dental treatment to monitor the patient continuously until the patient meets the criteria for discharge to the recovery area. The dentist or qualified staff must monitor the patient during recovery until the patient is ready for discharge by the dentist. The dentists must determine and document that levels of consciousness, oxygenation, ventilation and circulation are satisfactory prior to discharge.

G. QUALIFIED STAFF: Sedation Monitoring Requirements

There are certain situations when a dentist must entrust the monitoring of a sedated patient to a staff member. The Board recognizes this need and has developed an expanded function permit for certain dental assistants, hygienists or other staff members who meet the following minimal criteria and have applied for and received a permit from the board.

Staff monitoring patients undergoing any level of sedation must hold a current Nitrous Oxide Permit from the Board and a current certification in health care provider level of CPR.

Staff monitoring patients undergoing Deep Sedation or General Anesthesia must hold a current permit from the Board as a Sedation Assistant.

To qualify as a Sedation Assistant, an person must:

- Be a Certified Dental Assistant, Registered Dental Assistant, Registered Nurse or Licensed Practical Nurse
- 2. Hold a current certification in health care provider level CPR
- 3. Hold a current permit from the Board to monitor and induce nitrous oxide analgesia
- 4. Successfully complete the American Association of Oral and Maxillofacial Surgeons Anesthesia Assistant's Training Program or a Board approved equivalent course within the two year period immediately previous to submitting an application to be a Sedation Assistant.
- ADD 5. Show proof of completing a minimum of two hours of continuing education related to office emergency management or direct care of sedated patients in order to renew the permit from the Board. Proof of annual review of office emergency preparedness updates or drills, as required in Section C.3 of this Article, can be submitted to fulfill this requirement.

Exemptions: Licensed physicians with a specialty in anesthesiology and Certified Registered Nurse Anesthetists are exempt from the educational and permit requirements listed in this section. Other licensed health care providers, who can show proof of successful completion of a course which meets or exceeds those listed in this regulation, may obtain an exemption from the Board on a case by case basis.