

# **Anesthesia Subcommittee Meeting**

**March 11, 2016**

**Recommendations from  
Subcommittee Members**

Recommendations of  
Joshua Saxe, DDS

**NAC 631.2211 Scope.**([NRS 631.190](#), [631.265](#)) [NAC 631.2213](#) to [631.2256](#), inclusive, do not apply to the administration of:

1. Local anesthesia;
2. Nitrous oxide-oxygen analgesia, if the delivery system for the nitrous oxide-oxygen contains a mechanism which guarantees that an oxygen concentration of at least 25 percent will be administered to the patient at all times during the administration of the nitrous oxide; and
3. Oral medication that is administered to a patient **with monitoring by a pulse oximeter** to relieve anxiety in the patient, if the medication is not given in a dosage that is sufficient to induce in a patient a controlled state of depressed consciousness or unconsciousness similar to the state produced pursuant to the administration of general anesthesia, deep sedation ~~or conscious sedation~~, **minimal or moderate sedation**.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.2212 Board to determine degree of sedation.** ([NRS 631.190](#), [631.265](#)) In a proceeding of the Board at which the Board must determine the degree of sedation or level of consciousness of a patient, the Board will base its findings on:

1. The type and dosage of medication that was administered or is proposed for administration to the patient; and
2. The degree of sedation or level of consciousness that should reasonably be expected to result from that type and dosage of medication.

(Added to NAC by Bd. of Dental Exam'rs by R005-99, eff. 9-7-2000)

**NAC 631.2213 Permit required; qualifications of applicants.** ([NRS 631.190](#), [631.265](#))

1. Except as otherwise set forth in [NAC 631.2211](#) to [631.2256](#), inclusive, no dentist may:
  - (a) Use general anesthesia or deep sedation for dental patients, except in a facility accredited by The Joint Commission, unless he or she first obtains a general anesthesia permit, **deep sedation permit**; or
  - (b) Use ~~conscious sedation~~ **minimal or moderate sedation** for dental patients, except in a facility accredited by The Joint Commission, unless he or she first obtains a general anesthesia permit ~~or conscious sedation~~, **minimal or moderate sedation** permit.  
→ A separate general anesthesia permit ~~or conscious sedation~~, **deep sedation, minimal or moderate sedation** permit, as appropriate, is required for each location at which a dentist administers general anesthesia, deep sedation ~~or conscious sedation~~, **minimal or moderate sedation**.

2. To obtain a general anesthesia permit ~~or conscious sedation~~, **deep sedation, minimal or moderate sedation** permit, a dentist must apply to the Board for such a permit on a form prescribed by the Board, submit any fees that are set by the Board pursuant to [NRS 631.345](#) and produce evidence showing that he or she is a dentist who is licensed in this State, and:

- (a) For a ~~conscious sedation~~ permit to administer **minimal or moderate sedation**, the applicant must show evidence of:

- (1) The completion of a course of study, subject to the approval of the Board, of not less than 60 hours dedicated exclusively to the administration of ~~conscious sedation~~ **minimal or moderate sedation**, and the successful management of the administration of ~~conscious sedation~~ **minimal or moderate sedation** to not less than 20 patients; or



(2) The completion of a program for specialty training which is approved by the Commission on Dental Accreditation of the American Dental Association and which includes education and training in the administration of ~~conscious sedation~~ *minimal or moderate sedation* that is equivalent to the education and training described in subparagraph (1) and completion of an Advanced Cardiac Life Support course given by the American Heart Association or, if licensed as a specialist in pediatric dentistry, completion of a Pediatric Advanced Life Support course given by the American Heart Association.

(b) For a general anesthesia permit, the applicant must show evidence of the completion of an Advanced Cardiac Life Support course given by the American Heart Association and:

(1) The completion of a program, subject to the approval of the Board, of advanced training in anesthesiology and related academic subjects beyond the level of undergraduate dental school in a training program as described in the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, published by the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611, and available, free of charge, at the Internet address [http://www.ada.org/prof/resources/positions/statements/anxiety\\_guidelines.pdf](http://www.ada.org/prof/resources/positions/statements/anxiety_guidelines.pdf); or

(2) The completion of a graduate program in oral and maxillofacial surgery which has been approved by the Commission on Dental Accreditation of the American Dental Association.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R159-08, 4-23-2009)

**(3) Any holder of a minimal or moderate sedation permit will limit their patients to 13 years and older. The primary requirement for the administration of oral conscious sedation to a minor patient 13 years and under must demonstrate successful completion of a postgraduate program in pediatric dentistry approved by the Commission on Dental Accreditation in addition to the requirements as outlined above for a permit in the administration of minimal or moderate sedation.**

**NAC 631.2217 Review of holder of permit; renewal of permit.**([NRS 631.190](#), [631.265](#))

1. The holder of a general anesthesia ~~permit or conscious sedation~~, *deep sedation, minimal or moderate sedation* permit is subject to review by the Board at any time.

2. Each general anesthesia ~~permit and conscious sedation~~ *deep sedation, minimal or moderate sedation* permit must be renewed annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the permit.

**NAC 631.2219 Inspection and evaluation; reevaluation.**([NRS 631.190](#), [631.265](#))

1. The Board will require an inspection and evaluation of the facility, equipment, personnel, records of patients and the procedures used by every dentist who seeks or holds a general anesthesia ~~permit or conscious sedation~~ *deep sedation, minimal or moderate sedation* permit, and of the dentist himself or herself, before issuing such an original permit to the dentist, and at least once in every 5-year period thereafter.

2. The Board will renew general anesthesia permits ~~and conscious sedation~~ *deep sedation, minimal or moderate sedation* permits annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the permit, unless the holder is informed in writing, 60 days before the date for renewal, that a reevaluation of his or her credentials is required. In determining whether reevaluation is necessary, the Board



will consider, among other factors, complaints by patients and reports of adverse occurrences. A reevaluation will, if appropriate, include an inspection of the facility, equipment, personnel, records of patients and the procedures used by the holder, and an examination of his or her qualifications.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A 7-30-84; R005-99, 9-7-2000; R158-08, 12-17-2008)

**NAC 631.2221 Inspectors and evaluators; participation of members of Board.** (NRS [631.190](#), [631.265](#))

1. When an inspection or evaluation is required to issue or renew a general anesthesia ~~permit or conscious sedation permit,~~ *deep sedation, minimal or moderate sedation permit*, the Board will designate two or more persons, each of whom holds a general anesthesia, ~~permit, or conscious sedation~~ *deep sedation, minimal or moderate sedation* permit and has practiced general anesthesia, deep sedation ~~or conscious sedation,~~ *deep sedation, minimal or moderate sedation*, as applicable, for a minimum of 3 years preceding his or her appointment, exclusive of his or her training in the administration of anesthesia or sedation. At least one of the inspectors or evaluators must have had experience in the evaluation of dentists using general anesthesia, deep sedation ~~or conscious sedation~~ *minimal or moderate sedation*, as applicable. At least one member of the inspection or evaluation team must have had substantial experience in the administration of the type of anesthesia contemplated for use by the dentist being evaluated and must hold the type of permit for which the dentist is applying.

2. Any member of the Board who is a dentist may observe or consult in any inspection or evaluation. A member of the Board who is not a dentist may be present at an observation but may not participate in any grading or evaluation resulting from the inspection or evaluation.

**NAC 631.2223 Inspections and evaluations: General requirements.** (NRS [631.190](#), [631.265](#)) An inspection or evaluation ordered by the Board must be conducted in all offices where general anesthesia, deep sedation ~~or conscious sedation,~~ *minimal or moderate sedation* is to be administered and, except as otherwise required in [NAC 631.2236](#), must consist of:

1. An evaluation of the office's facilities and equipment, records and emergency medications; and

2. A demonstration of:

(a) The administration to a patient who is receiving dental treatment of the type of anesthesia or sedation for which the dentist is applying for a permit;

(b) Simulated emergencies in the surgical area of the dental office with participation by the members of the staff who are trained to handle emergencies;

(c) A dental procedure utilizing the type of anesthesia or sedation for which the dentist is applying for a permit;

(d) Any anesthesia or sedation technique that is routinely employed during the administration of anesthesia or sedation;

(e) The appropriate monitoring of a patient during anesthesia or sedation; and

(f) The observation of a patient during recovery and the time allowed for recovery.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.2225 Inspections and evaluations: Simulated emergencies.** (NRS [631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit ~~or conscious sedation~~ *deep sedation, minimal or moderate sedation permit*,

must meet the following minimum standards with regard to simulated emergencies. The dentist and his or her staff must demonstrate a knowledge of and a method of treatment for the following types of emergencies:

1. Airway obstruction laryngospasm;
2. Bronchospasm;
3. Emesis and aspiration of foreign material under anesthesia;
4. Angina pectoris;
5. Myocardial infarction;
6. Hypotension;
7. Hypertension;
8. Cardiac arrest;
9. Allergic reaction;
10. Convulsions;
11. Hypoglycemia;
12. Asthma;
13. Respiratory depression;
14. Allergy to or overdose from local anesthesia;
15. Hyperventilation syndrome; and
16. Syncope.

**NAC 631.2227 Inspections and evaluations: Physical facilities and equipment.** ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* or certificate of site approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.
2. The operating table or dental chair must:
  - (a) Allow the patient to be placed in a position such that the operating team can maintain the airway;
  - (b) Allow the operating team to alter the patient's position quickly in an emergency; and
  - (c) Provide a firm platform for the management of cardiopulmonary resuscitation.
3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.
4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure **must be available**.
5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.
6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.



7. Except as otherwise provided in this subsection, ancillary equipment must include:
- (a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;
  - (b) Endotracheal tubes and appropriate connectors;
  - (c) Oral airways;
  - (d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;
  - (e) An endotracheal tube type forcep;
  - (f) A sphygmomanometer and stethoscope;
  - (g) An electrocardioscope and defibrillator;
  - (h) Adequate equipment for the establishment of an intravenous infusion; and
  - (i) A pulse oximeter.
  - (j) *carnography*

8. *When administering anesthesia or sedation to pediatric patients the dentist's office must meet the following minimum standards with regard to physical facilities and equipment:*

- (a) *Pediatric Size Ambu Bag and Masks*
- (b) *Pediatric BP Cuffs*
- (c) *Laryngoscope with appropriate size blades*
- (d) *Intubation tubes multiple sizes*
- (e) *Aed with Peds paddles*
- (f) *Braselow Tape*
- (g) *Small Oral Air Ways*
- (h) *Pediatric Bite Block*

↳ A dentist's office inspected or evaluated for the issuance or renewal of a ~~conscious sedation~~ *minimal or moderate sedation* permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e) and (g) **and when administrating minimal or moderate sedation to a pediatric patient the following ancillary equipment is not required in paragraph 8. (c), (d), (e), (f)**

**NAC 631.2229 Inspections and evaluations: Records of patients.** ([NRS 631.190](#), [631.265](#))

A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* or certificate of site approval must meet the following minimum standards with regard to the records of patients:

1. Adequate medical history and records of physical evaluation.
2. Records of the administration of anesthesia must include:
  - (a) The patient's blood pressure and pulse;
  - (b) The names of the drugs and the amounts administered;
  - (c) The length of the procedure; and
  - (d) Any complications of anesthesia.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.2231 Inspections and evaluations: Emergency drugs.** ([NRS 631.190](#), [631.265](#))

Except as otherwise provided in this section, a dentist's office inspected or evaluated for the

issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* certificate of site approval must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
12. Anti-convulsive.

*(b) When **administering deep sedation** to pediatric patients the dentist's office must meet the following minimum standards with regard to pediatric emergency drugs:*

- (a) Epi Pen Jr*
- (b) Adenosine*
- (c) Aminodarone*
- (d) Magnesium Sulfate*
- (e) Procainamide*

↪ A dentist's office that is inspected or evaluated for the issuance or renewal of a ~~conscious sedation~~ *minimal or moderate sedation* permit is not required to maintain the emergency drugs described in subsections 4, 5, 9 and 11. **A dental office inspected or evaluated for the issuance or renewal of a deep sedation permit which sees pediatric patients should have the above drugs in paragraph (b) above.**

**NAC 631.2233 Inspections ~~and—evaluations:~~ Recommendations of inspectors ~~or evaluators;~~ decision of Board.** (NRS 631.190, 631.265)

1. The persons performing an inspection ~~or evaluation~~ of a dentist's office for the issuance or renewal of a ~~general anesthesia site permit~~ *for the administration of general anesthesia or conscious sedation deep sedation, minimal or moderate sedation permit* shall grade the office as passing or failing. **No later than 72 hours** ~~Within 10 days~~ after completing the inspection ~~or evaluation~~, each inspector ~~or evaluator~~ shall report his or her recommendation for passing or failing to the ~~Board~~ **Executive Director**, setting forth the details supporting his or her conclusion. ~~The Board is not bound by these recommendations.~~

2. *If the site is in compliance with the requirements set forth in NAC 631.2227, 631.2229 and 631.2231, the Executive Director shall, without any further action by the Board, issue a written notice of the agents' findings to the licensed dentist.*

~~The Board will make the final determination whether the office has passed or failed the inspection or evaluation and will notify the dentist whose office is the subject of the inspection or evaluation, in writing, of its findings within 30 days after the Board receives a recommendation from each inspector or evaluator who inspected or evaluated the office.~~



3. *If the site is not in compliance with the requirements set forth in NAC 631.2227, 631.2229 and 631.2231, the Executive Director shall, without any further action by the Board, issue a written notice which identifies the deficiencies and/ failure to the licensed dentist.*

4. *A dentist who has received a notice of failure from the Executive Director may, within 15 days after receiving the notice and rectifying the deficiencies, request in writing for a reinspection.*

5. *If the reinspection is granted by the Executive Director, it may be conducted by different persons in the manner set forth by NAC 631.2219 to 631.2233, inclusive, for an original inspection.*

6. *Pursuant to subsection 3 of NRS 233B.127, if a site inspection of an office or facility conducted pursuant to this section indicates that the public health, safety or welfare imperatively requires emergency action, the President of the Board may, without any further action by the Board, issue an order of summary suspension of the license of the licensed dentist pending proceedings for revocation or other action. An order for summary suspension issued by the President of the Board must contain findings of the exigent circumstances which warrant the issuance of the order for summary suspension. The President of the Board shall not participate in any further proceedings relating to the order.*

**NAC 631.2235 ~~Inspections and~~ Evaluations: Failure to pass; requests for reevaluations.**  
(NRS 631.190, 631.265)

1. The persons performing an evaluation of a dentist for the issuance or renewal of a permit *for the administration of general anesthesia, deep sedation, minimal or moderate sedation* shall grade the dentist as passing or failing. *No later than 72 hours* after completing the evaluation, each evaluator shall report his or her recommendation for passing or failing to the *Executive Director*, setting forth the details supporting his or her conclusion.

~~1. A dentist whose office the Board determines has failed the inspection or evaluation is not entitled to have a general anesthesia permit or conscious sedation permit issued or renewed~~

2. *If the dentist is in compliance with the requirements set forth in NAC 631.2219 to 631.2233, the Board shall issue the permit for the administration general anesthesia, deep sedation, minimal or moderate sedation.*

3. *If the dentist is not in compliance with the requirements set forth in NAC 631.2227, 631.2229 and 631.2231, the Executive Director shall, without any further action by the Board, issue a written notice which identifies the deficiencies and/ failure to the licensed dentist.*

~~2.~~ 4. A dentist who has received a notice of failure from the ~~Board~~ *Executive Director* may, within 15 days after receiving the notice, request the Board in writing for a reevaluation. The request for a reevaluation must state specific grounds supporting it.

~~3.~~ 5. If the reevaluation is granted by the Board, it will be conducted by different persons in the manner set forth by NAC 631.2219 to 631.2233, inclusive, for an original evaluation.

~~—4.~~ 6. No dentist who has received a notice of failing an inspection or evaluation from the Board may request more than one reevaluation within any period of 12 months.

7. *Pursuant to subsection 3 of NRS 233B.127, if an evaluation of a dentist for the administration of general anesthesia, deep sedation, minimal or moderate sedation is conducted pursuant to this section indicates that the public health, safety or welfare*



*imperatively requires emergency action, the President of the Board may, without any further action by the Board, issue an order of summary suspension of the license of the licensed dentist pending proceedings for revocation or other action. An order for summary suspension issued by the President of the Board must contain findings of the exigent circumstances which warrant the issuance of the order for summary suspension. The President of the Board shall not participate in any further proceedings relating to the order.*

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.2236 Certificate of site approval: General requirements.** ([NRS 631.190](#), [631.265](#))

1. A dentist who is licensed in this State may employ:

~~—(a) An anesthesiologist who is licensed as such by the State of Nevada; or~~

(b) A dentist who is licensed in this State and who holds a general anesthesia permit, ~~or **conscious sedation**~~ **deep sedation, minimal or moderate sedation** permit,

↳ to administer general anesthesia, deep sedation or ~~conscious sedation~~ **minimal or moderate sedation**, as appropriate, to his or her patients at his or her office if he or she holds a certificate of site approval issued pursuant to this section.

2. A dentist who is licensed in this State and who desires to receive or renew a certificate of site approval must submit to the Board:

(a) An application for a certificate or for the renewal of a certificate, in a form approved by the Board;

(b) The fee for the inspection of a facility which is established by the Board pursuant to [NRS 631.345](#); and

(c) Written documentation which demonstrates that the ~~anesthesiologist or~~ dentist who is to be employed to administer the general anesthesia, deep sedation or ~~conscious sedation~~ **minimal or moderate sedation** holds an appropriate ~~license or~~ permit issued by the ~~appropriate~~ board in this State to administer such anesthesia or sedation ~~and, if the person to be employed is an anesthesiologist, that the anesthesiologist maintains unrestricted active staff privileges within the department of anesthesiology at a hospital or surgical center approved by The Joint Commission.~~

3. Upon receipt of an application pursuant to this section, the Board will appoint one of its members or a representative of the Board to inspect the office of the applicant to determine whether the office complies with the requirements set forth in [NAC 631.2227](#), [631.2229](#) and [631.2231](#). The person conducting the inspection shall report his or her determination to the Board.

4. If the person conducting the inspection determines that the office of the applicant complies with the requirements of [NAC 631.2227](#), [631.2229](#) and [631.2231](#) and the applicant has otherwise met the requirements of this section, the Executive Director shall issue a certificate of site approval to the applicant.

**5. *If the person conducting the inspection determines that the office of the applicant fails to comply with the requirements of [NAC 631.2227](#), [631.2229](#) and [631.2231](#), the person conducting the inspection shall report his or her recommendations of failing to the Executive Director of the Board as set forth in [NAC 631.2233](#) to [NAC 631.2235](#)***

5. A holder of a certificate of site approval shall maintain the information described in paragraph (c) of subsection 2 at his or her office at all times.

6. Each certificate of site approval issued by the Board must be renewed annually or biennially, as applicable, based on the renewal period set forth in [NRS 631.330](#) for the type of license held by the holder of the certificate.



7. The Board may reinspect the office of the holder of a certificate of site approval at any time.

**NAC 631.2237 Procedures required before administration of anesthetic or sedation. (NRS 631.190, 631.265)**

1. Written consent of the patient must be obtained before the administration of a general anesthetic, deep sedation or ~~conscious sedation~~ *minimal or moderate sedation*, unless the dentist determines that an emergency situation exists in which delaying the procedure to obtain the consent would likely cause permanent injury to the patient. If the patient is a minor, the consent must be obtained from his or her parent or legal guardian.

2. A medical history must be taken before the administration of a general anesthetic, deep sedation or ~~conscious sedation~~ *minimal or moderate sedation*. A patient should be asked to describe any current medical conditions or treatments, including, without limitation, medications, drug allergies, impending or past operations and pregnancy, and to give other information that may be helpful to the person administering the anesthetic or sedation. The dentist is not required to make a complete medical examination of the patient and draw medical diagnostic conclusions. If a dentist suspects a medical problem and calls in a physician for an examination and evaluation, he or she may then rely upon that conclusion and diagnosis. Questions asked of and answers received from the patient must be permanently recorded and signed by the patient before the administration of any general anesthetic, deep sedation or ~~conscious sedation~~ *minimal or moderate sedation*, and this record must be a permanent part of the patient's record of treatment.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.2239 Properly equipped facility required; qualifications of auxiliary personnel. (NRS 631.190, 631.265)**

1. A dentist using general anesthesia, deep sedation, ~~conscious sedation~~ *minimal or moderate sedation* shall maintain a properly equipped facility for the administration of the anesthesia or sedation which is staffed with supervised auxiliary personnel who are capable of reasonably handling procedures, problems and emergencies incident thereto.

2. A dentist using general anesthesia, deep sedation, ~~conscious sedation~~ *minimal or moderate sedation* shall ensure that his or her auxiliary personnel are certified in basic cardiopulmonary resuscitation by the American Heart Association.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000)

**NAC 631.224 Employment of certified registered nurse anesthetist. (NRS 631.190, 631.265)**

1. Any dentist who holds a general anesthesia permit pursuant to the provisions of NAC 631.2211 to 631.2256, inclusive, may employ a certified registered nurse anesthetist to administer the general anesthesia, deep sedation, ~~conscious sedation~~ *minimal or moderate sedation* to a patient if the dentist is physically present and directly supervises the administration of the general anesthesia, deep sedation, ~~conscious sedation~~ *minimal or moderate sedation* to the patient. The holder of the permit must maintain at his or her office evidence in writing that the certified registered nurse anesthetist is licensed to practice in the State of Nevada and maintains unrestricted active staff privileges within the department of anesthesiology at a hospital or surgical center which is certified by The Joint Commission.

2. Except as otherwise provided in NAC 631.2236, a dentist who does not hold a general anesthesia permit may not allow any person to administer general anesthesia, deep sedation, ~~conscious sedation~~

~~conscious sedation~~ *minimal or moderate sedation* to his or her patients unless the treatment is rendered within a facility approved by The Joint Commission.

**NAC 631.2241 Report of injuries to patients.** ([NRS 631.190](#), [631.265](#)) Each holder of a general anesthesia permit, ~~conscious sedation~~, *deep sedation, minimal or moderate sedation* permit or certificate of site approval shall submit to the Board a complete report regarding any mortality or unusual incident which occurs outside a facility accredited by The Joint Commission and produces permanent injury to a patient or requires the hospitalization of a patient, as a direct result of the administration of general anesthesia, deep sedation ~~or conscious sedation~~, *minimal or moderate sedation*. The report must be submitted within 30 days after the date of the incident. If a dentist fails to report any incident as required by this section, his or her permit may be revoked.

(Added to NAC by Bd. of Dental Exam'rs, eff. 10-21-83; A by R005-99, 9-7-2000; R159-08, 4-23-2009)

**NAC 631.2254 Temporary permits.** ([NRS 631.190](#), [631.265](#))

1. The Board may grant a temporary permit to administer general anesthesia and deep sedation or a temporary permit to administer ~~conscious sedation~~ *minimal or moderate sedation* to an applicant who meets the qualifications for a permit to administer that type of anesthesia or sedation pursuant to [NAC 631.2213](#).

2. A temporary permit is valid for not more than 90 days, but the Board may, in any case it deems appropriate, grant a 90-day extension of the permit.

3. The Board may require the holder of a temporary permit to pass an on-site inspection as a condition of retaining the permit. If the holder fails the inspection, his or her permit will be revoked. In case of revocation, the holder of a temporary permit may apply to be reinspected in accordance with the procedures set forth in [NAC 631.2235](#).

(Added to NAC by Bd. of Dental Exam'rs, eff. 11-28-90; A by R005-99, 9-7-2000)

**NAC 631.2256 Continuing education required.** ([NRS 631.190](#), [631.265](#), [631.342](#)) Every 2 years, the holder of a general anesthesia permit ~~or conscious sedation~~, permit must complete at least 3 hours in courses of study that specifically relate to anesthesia or sedation, as applicable, before the permit may be renewed. This training will be credited toward any continuing education required by [NAC 631.173](#).



**Recommendations from:**

**John Bitting**

**Regulatory Counsel for  
DOCS Education**

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## Angelica L. Bejar

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**From:** John Bitting  
**Sent:** Thursday, March 03, 2016 1:05 PM  
**To:** Angelica L. Bejar  
**Cc:** Debra Shaffer  
**Subject:** RE: Anesthesia Subcommittee Info  
**Attachments:** MA sedation rules.pdf; MA MIN and facility permit apps (B-2 and DB-2).pdf; KY sedation rules.pdf; KY sedation and office permit app COMBINED (all levels).pdf

Angelica,

Thank you for getting in touch with me. I had a draft email I was going to send to Debra earlier this week and didn't get around to sending it. I've attached the Kentucky rules and permit application and the Massachusetts rules and permit application.

The Massachusetts rules provide a simple workable framework (mostly because they don't separate moderate sedation by route of administration). They also balance safety and efficacy very well. The Nevada draft changes look very similar to Mass. E.g. minimal sedation requires 16-24 hours of training plus ACLS, which is something DOCS advocates very strongly. (Most states don't require ACLS for minimal sedation, but we don't think dentists should be doing any sedation without ACLS or at least advanced airway management.)

I enclosed the Kentucky materials because of the concern re pediatric minimal sedation. Kentucky has a separate pediatric minimal sedation permit and requires a separate 24-hour pediatric-specific training and PALS certification.

I thought our December 15th conference call went well, except for one thing. A little oral midazolam plus nitrous does not automatically equal moderate sedation "by definition." The definition of *minimal sedation* in the ADA guidelines, and consequently all states that have adopted the ADA guidelines, expressly allows for oral (one-drug) plus nitrous. There isn't an exception for pediatric sedation.

I have some of my own ideas for the permit framework. Separate adult and pediatric minimal sedation permits (each 24 hours training e.g. Kentucky) and then an adult moderate sedation permit (60 hours IV training per ADA guidelines) of which a "pediatric designation" could be added (maybe 30 included hours training with 10-20 cases e.g. Colorado). And then the DS/GA permit.

So...four permits, one of which has a pediatric designation (moderate). We want to preserve the GPs pediatric minimal sedation since there aren't enough pedodontists to serve this greatly underserved population. Frankly, Roger Sanger (our pediatric faculty) and I think that pediatric moderate should be referred to hospital-based dentistry. However, as discussed, pedodontists could theoretically be automatically permitted for moderate with pediatric designation based on their residency.

However, I got the impression from some on the committee want to require a pediatric *moderate* permit if a GP wants to provide pediatric minimal sedation. This would prevent the GPs who take Dr. Sanger's/DOCS's 25-hour Pediatric Sedation Dentistry course from providing pediatric minimal sedation. This is only true in 7 states (CO, ID, IA, TN, NC, NH, OH), and hasn't been proven to reduce M&M. Recently, there was a pediatric death in Dallas that involved Demerol; which is one of those drugs (along with chloral hydrate) that Dr. Sanger hates, but still get taught in some dental schools.

I think the anxiolysis exception to the minimal sedation permit has become outdated for the reasons I stated during the 12/15 meeting. It's time for everyone to get training and equipment, stop winging it, and stop flying under the radar.

I know this is a lot of info. Nevada is on the right track. I'm happy to help.

I look forward to "meeting" with the committee next Friday.

**John P. Bitting, Esq.**  
**Regulatory Counsel**  
DOCS Education



# **State of Massachusetts**

- Sedation Regulations**
- Sedation & Facility Permit Apps**

## 234 CMR 3.00: ADMINISTRATION OF GENERAL ANESTHESIA, DEEP SEDATION, CONSCIOUS SEDATION, AND NITROUS OXIDE-OXYGEN SEDATION

## Section

- 3.01: Scope
- 3.02: Definitions
- 3.03: Permits
- 3.04: Anesthesia Administration Permit Evaluations and On-Site Facility Inspections
- 3.05: Facility Requirements and Patient Monitoring Procedures
- 3.06: Anesthesia Review Committee
- 3.07: Adverse Occurrences
- 3.08: Penalty for Non-compliance
- 3.09: Scope of Permit L-Local Anesthesia Permit for Dental Hygienists
- 3.10: Definition of Direct Supervision
- 3.11: Qualifications of Dental Hygienists for Permit L
- 3.12: Course of Study for Permit L
- 3.13: Application for and Renewal of Permit L
- 3.14: Recording of Anesthesia

3.01: Scope

- (1) Effective April 1, 1988, no licensed dentist shall administer general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation, unless such dentist has been issued an anesthesia administration permit by the Massachusetts Board of Registration in Dentistry (the Board).
- (2) Effective April 1, 1988, administration permit holders may only administer general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation at those sites which have been issued a facility permit by the Board or in those hospital or dental school settings described in 234 CMR 3.04(2).
- (3) An anesthesia administration permit holder may administer anesthesia or sedation as authorized by his/her type of administration permit (Permit A, B, or C) at any facility which has been issued a facility permit (Permit D) by the Board.

3.02: Definitions

Conscious Sedation: Sedation in which protective reflexes are normal or minimally altered. The patient remains conscious and maintains the ability to independently maintain an airway and respond appropriately to verbal command. Conscious sedation also includes the use of other sedative agents and/or premedication in combination with nitrous oxide-oxygen.

Deep Sedation: A depressed level of consciousness, which may range to unconsciousness, from which the patient is not easily aroused. It may be accompanied by a partial or complete loss of protective reflexes, including the inability to maintain a patent airway independently and respond purposefully to physical stimulation or verbal command.

General Anesthesia: A controlled state of unconsciousness, accompanied by a partial or complete loss of protective reflexes, which may include inability to maintain an airway independently and to respond purposefully to physical stimulation or verbal command.

Nitrous Oxide-Oxygen Sedation: Conscious sedation accomplished solely by the use of nitrous oxide-oxygen.

3.03: Permits

A two year administration permit, category specific, to administer general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation may be issued by the Board to dentists meeting the qualifications listed below. A two year facility permit may be issued by the Board to facilities meeting the qualifications listed in 234 CMR 3.03(1).

## 3.03: continued

(1) Categories of Permits.

(a) Administration Permits. An anesthesia administration permit A, B, or C must be obtained by every dentist who administers general anesthesia, deep sedation, conscious sedation, and/or nitrous-oxide oxygen sedation. The requirement of obtaining an administration permit shall not apply to those dentists working with a qualified anesthesiologist (M.D., D.O., or Dental Anesthesiologist). The requirement of obtaining a facility permit, however, as set forth in 234 CMR 3.03(1)(b), shall apply to the facilities where any such dentist works with the anesthesiologist. In addition to the educational qualifications set forth below regarding administration permits A, B and C, all dentists applying for any type of administration permit must successfully complete an anesthesia administration evaluation conducted by the Board or its agent, as set forth in 234 CMR 3.04(1).

1. PERMIT A - Administration of General Anesthesia, Deep Sedation, Conscious Sedation, and/or Nitrous-Oxide Oxygen Sedation: Educational Qualifications. Educational qualifications for the issuance of Permit A include documentation of:

- a. successful completion of a minimum of one year advanced training in anesthesiology beyond the dental school level;
- b. having met the educational requirements for certification by the American Board of Oral and Maxillofacial Surgery; or
- c. certification as a Fellow in Anesthesia by the American Dental Society of Anesthesiology.

2. PERMIT B - Administration of Conscious Sedation Only: Educational Qualifications. Documentation of having successfully completed a course which conforms to the American Dental Association Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry, Parts 1 and 2.

3. PERMIT C - Administration of Nitrous Oxide-Oxygen Sedation Only: Educational Qualifications. Documentation of having successfully completed a course which conforms to the American Dental Association Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry, Parts 1 and 2.

(b) Facility Permits.

1. PERMIT D - Facility Permit for General Anesthesia, Deep Sedation, Conscious Sedation, and/or Nitrous Oxide-Oxygen Sedation Qualifications. A facility permit D must be obtained for every office site in which general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation is administered. Facility permits are also required for the offices of those dentists who work with a qualified anesthesiologist (M.D., D.O., or Dental Anesthesiologist).

(c) Temporary Permits for New Applicants.

1. Temporary Administration Permit. For dentists who qualify for an administration permit, a temporary permit may be granted by the Board. The granting of such temporary permit shall be based upon an evaluation of the applicant's qualifications as stated in the application and pending the applicant's successful completion of an anesthesia administration evaluation conducted by the Board or its agent.

2. Temporary Facility Permit. For sites which qualify for a facility permit, a temporary permit may be granted by the Board. The granting of such temporary permit shall be based upon an evaluation of the facility, its equipment and personnel as stated in the application and pending a satisfactory on-site facility inspection conducted by the Board or its agent.

3. Renewal. All administration and facility permits must be renewed every two years.

3.04: Anesthesia Administration Evaluations and On-Site Facility Inspections

Anesthesia administration evaluations and on-site facility inspections shall be conducted by at least one evaluator appointed by the Board upon recommendation of the Anesthesia Review Committee. If the results of the evaluation or inspection are deemed unsatisfactory, a second evaluation or inspection may be conducted, within a reasonable time, by a different evaluator upon written request of the applicant.



## 3.04: continued

(1) Approval for Administration Permits A, B, and C. Evaluations for anesthesia administration permits shall include observing actual dental treatment under general anesthesia, deep sedation, conscious sedation, and/or nitrous-oxide oxygen sedation, as appropriate to the type of permit applied for by the applicant. The office personnel must also demonstrate cardio-pulmonary resuscitation (CPR) and an emergency drill as well as show documentation of scheduled office drills.

(2) Approval for Facility Permit D. Approval shall require an on-site inspection of the facility, drugs and equipment, and personnel utilized in the administration of anesthesia. Facility requirements are listed in 234 CMR 3.05. Facility permits are not applicable to those hospital and/or dental school settings which have been approved by the Joint Commission on Accreditation of Hospitals or the Commission on Accreditation of the Council on Education of the American Dental Association. Private dental offices of dentists practicing within hospital or dental school facilities, however, are subject to 234 CMR 3.00.

3.05: Facility Requirements and Patient Monitoring Procedures

Every facility utilized by a dentist with an administration permit or by a dentist with no permit who is working with a qualified anesthesiologist must be properly equipped for the type of anesthesia or sedation being administered and staffed with a supervised team of auxiliary personnel capable of appropriately managing procedures and emergencies incident thereto. The facility design shall be such that there is access for emergency and transport equipment. Adequacy of the facility, equipment, and competence of the personnel shall be determined as outlined in 234 CMR 3.05.

(1) Drugs and Equipment Required for Administration of General Anesthesia, Deep Sedation, Conscious Sedation, and/or Nitrous Oxide-Oxygen Sedation. A facility which administers general anesthesia, deep sedation, conscious sedation and/or nitrous oxide-oxygen sedation must be equipped with the following drugs and equipment:

- (a) suction;
- (b) monitoring equipment (including stethoscope and sphygmomanometer);
- (c) equipment capable of delivering oxygen under positive pressure;
- (d) gas delivery machines must have an oxygen fail-safe system, adequate waste gas scavenging, and shall be checked and calibrated periodically;
- (e) a protocol for management of emergencies shall be developed and emergency drills must be carried out and documented;
- (f) all emergency equipment and drugs must be maintained on a scheduled basis;
- (g) an adequate supervised recovery area must be available;
- (h) epinephrine;
- (i) an antihistamine;
- (j) an anticonvulsant;
- (k) vasodilator (e.g. nitroglycerine);
- (l) an antihypoglycemic agent;
- (m) a bronchodilator;
- (n) a corticosteroid;
- (o) vasopressor;
- (p) equipment for the insertion and maintenance of an intravenous infusions (not required for facilities administering nitrous oxide-oxygen only); and
- (q) a pulse oximeter (effective 1/1/91) (not required for facilities administering nitrous oxide-oxygen only).

(2) Additional Drugs and Equipment Required for Administration of General Anesthesia and/or Deep Sedation. The following drugs and equipment must also be available in a facility which administers general anesthesia and/or deep sedation:

- (a) a narcotic antagonist;
- (b) a muscle relaxant;
- (c) atropine;
- (d) lidocaine;
- (e) sodium bicarbonate;

## 3.05: continued

- (f) dantrolene sodium (required if a halogenated anesthesia agent (e.g. halothane, enflurane, isoflurane) is used or depolarizing skeletal muscle relaxants (e.g. succinylcholine) are administered);
- (g) EKG monitor and defibrillator; and
- (h) endotracheal tubes and laryngoscope.

(3) Patient Monitoring. The following procedures must be followed by administration permit holders:

(a) Medical History. An appropriate medical history shall be recorded on the patient's chart prior to the administration of general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation.

(b) Monitoring and Recording of Vital Signs.

1. General Anesthesia and Deep Sedation. Monitoring and recording of vital signs including blood pressure, respiration, and heart rate must be done for all patients administered general anesthesia and deep sedation. In addition, an EKG monitor and a pulse oximeter (effective 1/1/91) must be used. The temperature of children administered general anesthesia must be monitored.

2. Conscious Sedation. Monitoring and recording of vital signs including blood pressure, respiration, and heart rate must be done for all patients administered conscious sedation. In addition, a pulse oximeter must be used (effective 1/1/91).

3. Nitrous Oxide - Oxygen Sedation. Baseline monitoring and recording of vital signs, including blood pressure, respiration, and heart rate must be done for all patients administered nitrous oxide-oxygen sedation whenever possible. Intraoperative monitoring requires observation of appropriate physiologic parameters.

(c) The Anesthesia Chart. For patients administered general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation, the anesthesia chart shall contain documentation that vital signs have been recorded, and that the responsiveness of the patient was checked at specific intervals, including the recovery period. The chart must also record the duration of the procedure and agents administered. A note of the patient's condition upon discharge must also be recorded.

(d) Utilizing an Anesthesiologist. When a qualified anesthesiologist (M.D., D.O., or Dental Anesthesiologist) is utilized, such individual must remain on the dental facility premises until any patient administered general anesthesia, deep sedation, and/or conscious sedation regains full consciousness.

(e) Personnel. The following personnel requirements must be met in all facilities administering general anesthesia, deep sedation, conscious sedation, and/or nitrous oxide-oxygen sedation:

1. General Anesthesia and Deep Sedation. For general anesthesia and/or deep sedation, at least three appropriately trained individuals are required:

- a. the operating dentist, who directs the general anesthesia and/or deep sedation;
- b. A person responsible for observing and monitoring the patient. If this person is an appropriately trained professional, he or she may direct and/or administer the general anesthesia and/or deep sedation; and
- c. A person assisting the operating dentist. The person responsible for administering the anesthesia must remain on the premises until the patient regains full consciousness.

2. Conscious Sedation and/or Nitrous Oxide-Oxygen Sedation. For conscious sedation and/or nitrous oxide-oxygen sedation, at least two appropriately trained individuals are required:

- a. the operating dentist, who directs the conscious sedation and/or nitrous oxide-oxygen sedation; and
- b. an assistant trained to monitor appropriate physiologic parameters.

(f) Certification in Cardio-Pulmonary Resuscitation (CPR). All personnel involved in the administration of general anesthesia, deep sedation, conscious sedation and/or nitrous oxide-oxygen sedation must be currently certified in cardio-pulmonary resuscitation (CPR).

### 3.06: Anesthesia Review Committee

(1) Members. The Board shall appoint an Anesthesia Review Committee, such committee to consist of at least five individuals with the Chairman of the Board's Committee on Anesthesia and Sedation as a permanent member. The following members will have staggered five year terms:

- (a) At least one Diplomate of the American Board of Oral and Maxillofacial Surgery;
- (b) At least one member of the Massachusetts Dental Society of Anesthesiology who is a Fellow of the American Dental Society of Anesthesiology;
- (c) At least one member of the Anesthesia Committee of the Massachusetts Society of Oral and Maxillofacial Surgeons; and
- (d) At least one diplomate of the American Board of Pediatric Dentistry.

(2) Duties and Responsibilities. The Anesthesia Review Committee shall have the duty and responsibility to:

- (a) review applications;
- (b) make recommendations to the Board of individuals (*i.e.* evaluators) to conduct administration evaluations and on-site facility inspections;
- (c) evaluate results of administration evaluations and on-site facility inspections;
- (d) recommend to the Board the granting of administration and facility permits; and
- (e) periodically review qualifications for the issuance of administration and facility permits.

(3) Qualifications of Evaluators. All dentists performing administration evaluations and on-site facility inspections shall meet the educational requirements for Fellowship of the American Dental Society of Anesthesiology.

(4) Credentials. The Board may, at its discretion, accept the results of an administration evaluation or on-site facility inspection performed by the Anesthesia Committee of the Massachusetts Society of Oral and Maxillofacial surgeons or other appropriate organization that meets the requirements of the Anesthesia Review Committee of the Board as fulfillment of the Board's administration evaluation or on-site facility inspection requirement.

(5) Payment to Evaluators. Evaluators will be compensated by the Commonwealth of Massachusetts through the Division of Registration.

(6) Terms of Appointment. Of those persons first appointed by the Board as members of the Anesthesia Review Committee, one member shall be appointed for a term to expire in January, 1989, one member shall be appointed to a term to expire in 1990, one member shall be appointed to a term to expire in 1991, one member shall be appointed in a term to expire in 1992 and one member shall be appointed to a term to expire in 1993.

### 3.07: Adverse Occurrences

A dentist who holds an administration permit issued pursuant to 234 CMR 3.00, shall report to the Board any anesthesia, deep sedation, conscious sedation and/or nitrous oxide-oxygen sedation related mortality which occurs during or as a result of treatment provided by the administration permit holder within 48 hours of the occurrence of any such mortality. Any morbidity which may result in permanent physical or mental injury as a result of the administration of general anesthetic agents, sedative agents or nitrous oxide-oxygen analgesia shall be reported to the Board by the administration permit holder providing such treatment within 30 days of the occurrence of any such morbidity.

### 3.08: Penalty for Non-compliance

Non-compliance with 234 CMR 3.00 shall subject a licensee's administration permit, facility permit and/or dental license to disciplinary action by the Board.

### 3.09: Scope of Permit L-Local Anesthesia Permit for Dental Hygienists

(1) No licensed dental hygienist shall administer local anesthesia, unless such dental hygienist has been issued a Permit L-Local Anesthesia Permit by the Board.



## 3.09: continued

- (2) A dental hygienist who holds a Permit L-Local Anesthesia permit may administer such anesthesia only under the direct supervision of a dentist licensed in Massachusetts.

3.10: Definition of Direct Supervision

Direct Supervision means the dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure(s)/duty(ies), remains physically present within the confines of the dental facility while the procedure(s)/duty(ies) are being performed, and examines the patient before his/her dismissal.

3.11: Qualifications of Dental Hygienists for Permit L

- (1) A two-year administration permit to administer local anesthesia may be issued by the Board to dental hygienists meeting the qualifications in 234 CMR 3.11(2)(a) and (b).
- (2) Permit L to Administer Local Anesthesia. A dental hygienist seeking a permit to administer local anesthesia must meet all of the following qualifications:
- (a) Be licensed as a dental hygienist in Massachusetts; and
  - (b) Provide the Board with documentation demonstrating:
    - 1. Current certification in Basic Life Support and/or CPR;
    - 2. Successful completion of a training program or course of study in a formal program in the administration of local anesthesia, which shall be a minimum of 35 hours of instruction, including no less than 12 hours of clinical training, and be conducted by an educational institution accredited by the Commission on Dental Accreditation of the American Dental Association; and
    - 3. Successful completion of a written examination in the administration of local anesthesia administered by the Northeast Regional Board of Dental Examiners (NERB) or any successor agency approved by the Board.
- (3) Instructors training students for certification to be certified to administer local anesthesia in Massachusetts shall be licensed to practice dentistry or dental hygiene in this state.

3.12: Course of Study for Permit L

An applicant for a Permit L-Administration of Local Administration shall have completed a minimum of 35 hours of instruction, which must include, but is not limited to:

- (a) Medical History evaluation procedures;
- (b) Physical evaluation of the dental patient;
- (c) Pharmacology of local anesthesia and vasoconstrictors; and
- (d) Local anesthesia, didactic and clinical courses, including the following:
  - 1. Anatomy of head, neck, and oral cavity as it relates to administering local anesthetic agents;
  - 2. Indications and contraindications for administration of local anesthesia;
  - 3. Selection and preparation of the armamentaria and record keeping for administering various local agents;
  - 4. Medical and legal management of complications;
  - 5. Recognition and management of post-injection complications;
  - 6. Proper infection control techniques with regard to local anesthesia and proper disposal of sharps;
  - 7. Methods of administering local anesthetic agents with emphasis on technique and minimum effective dosage; and
  - 8. Management of diagnosis, prevention and treatment of medical emergencies.

3.13: Application for and Renewal of Permit L

- (1) Application for Permit L-Local Anesthesia Permits. Application for a local anesthesia permit shall be on forms provided by the Board and shall be accompanied by:

## 3.13: continued

(a) The permit fee, to be determined annually by the Secretary of Administration and Finance, made payable by check to the Commonwealth of Massachusetts; and

(b) Documentation of the following:

1. Current Basic Life Support (BLS) and/or CPR certification;
2. Successful completion of a training program or course of study in a formal program in the administration of local anesthesia in accordance with 234 CMR 3.12 and accredited by the American Dental Association;

Completion of the training program in the administration of local anesthesia shall be successfully completed no earlier than two years preceding the date of application of Permit L.

3. Successful completion of a written examination in the administration of local anesthesia administered by the Northeast Regional Board of Dental Examiners (NERB) or any successor agency approved by the Board.

(2) Application for Permit L by Credentials. Application for a local anesthesia permit by a dental hygienist qualified in another jurisdiction by virtue of successful completion of an examination to administer local anesthesia shall be accompanied by:

(a) The permit fee, to be determined annually by the Board, made payable by check to the Commonwealth of Massachusetts; and

(b) Documentation of the following:

1. Current Basic Life Support (BLS) and/or CPR certification;
2. Documentation of successful completion of a training program or course of study in a formal program in the administration of local anesthesia accredited by the American Dental Association and equivalent to the course of study described in 234 CMR 3.12; and
3. A letter from the dentist who directly supervised the hygienist attesting to the hygienist's experience in administering local anesthesia within the previous two years.

(3) Renewal of Anesthesia Permits. A Permit to administer Local Anesthesia shall be renewed biennially, at the same time the applicant's license to practice dental hygiene is renewed. The application for renewal of Permit L shall be accompanied by:

(a) The permit fee, to be determined annually by the Board, made payable by check to the Commonwealth of Massachusetts; and

(b) Documentation of the following: Current Basic Life Support (BLS) and/or CPR certification.

### 3.14 Recording of Anesthesia

(1) The dental hygienist shall obtain the local anesthesia only from the licensed dentist who is exercising direct supervision of the dental hygienist administering the local anesthesia.

(2) The dental hygienist shall sign and document in the patient record the date, type and amount of local anesthesia obtained from the supervising dentist.

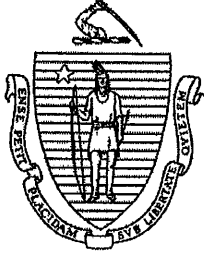
(3) Upon completion of the treatment, any unused portion of the local anesthesia and armamentarium shall be returned to the supervising dentist and disposed of according to the Center for Disease Control (CDC) Guidelines.

## REGULATORY AUTHORITY

234 CMR 3.00: M.G.L. c. 112, § 43.

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The Commonwealth of Massachusetts  
Division of Health Professions Licensure  
**Board of Registration in Dentistry**  
239 Causeway Street, 2nd Floor, Suite 200  
Boston, MA 02114  
(617)973-0971  
[www.mass.gov/dph/boards/dn](http://www.mass.gov/dph/boards/dn)

## **Individual Permit B-2 (Minimal Sedation)**

(See 234 CMR 6.13 Effective August 20, 2010)

### **Information and Instructions**

**Minimal Sedation (Anxiolysis)** is a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and physical coordination may be impaired, airway reflexes, and ventilatory and cardiovascular functions are unaffected (American Society of Anesthesiologists, adopted October, 2009) (234 CMR 6.02).

**Individual Permit B-2** authorizes a qualified dentist to administer minimal sedation, and/or nitrous oxide-oxygen in conjunction with an enteral sedative agent dispensed or administered in a dental facility that has the required Facility Permit for the type of anesthesia or sedation being administered in compliance with the provisions of 234 CMR 6.00, and/or in a hospital and/or dental school setting that has been approved by the Joint Commission on the Accreditation of Hospitals or the Commission on Accreditation of the Council on Education of the American Dental Association, and/or in a hospital or clinic licensed pursuant to MGL c. 111 ss. 51 through 56.

#### **Educational Qualifications:**

- Successful completion of an education program that provides comprehensive and appropriate training necessary to administer and manage minimal sedation and complies at a minimum with the *ADA Guidelines for Teaching Pain Control Sedation to Dentists and Dental Students, 2007*, at the time training was commenced; (**Note:** Minimum 16 lecture hrs. + clinically-oriented experiences during which competency in both enteral-only and enteral/inhalation techniques are demonstrated.)  
**OR**
- Certification by the American Board of Oral and Maxillofacial Surgery (ABOMS)  
**OR**
- Certification as a Fellow and/or Board certification in Anesthesia issued by the American Dental Board of Anesthesiology

**Please Note:** Training must have been completed within the past five (5) years.



The Commonwealth of Massachusetts  
Division of Health Professions Licensure  
**Board of Registration in Dentistry**  
239 Causeway Street, 2nd Floor, Suite 200  
Boston, MA 02114  
(617) 973-0971  
www.mass.gov/dph/boards

## Application

### Individual Permit B-2 (Minimal Sedation)

1. APPLICANT NAME: \_\_\_\_\_ MA DN Lic. # \_\_\_\_\_  
Last First MI

2. ADDRESS OF RECORD: \_\_\_\_\_  
(No.) (Street) (Apt #) (City or Town) (State/Country) (Zip Code)  
Note: The address of record may be home or business and is, by law, public information.

3. TELEPHONE NUMBER(S) DAY: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

4. EMAIL ADDRESS: \_\_\_\_\_

#### 5. REQUIRED ATTACHMENTS/ENCLOSURES

**Attachment A:** Check or money order payable to the Commonwealth of Massachusetts in the amount of \$180.

**Attachment B:** Proof of current certification in ACLS or PALS.

**Attachment C:** Proof of successful completion of an education program that complies at a minimum with the *ADA Guidelines for Teaching Pain Control Sedation to Dentists and Dental Students, 2007*, at the time training was commenced;

or

- Proof of certification by the American Board of Oral and Maxillofacial Surgery (ABOMS);

or

- Proof of certification as a Fellow and/or Board certification in Anesthesia issued by the American Dental Board of Anesthesiology.





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Division of Health Professions Licensure  
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## **Facility Permit D-B2**

(See 234 CMR 6.06 Effective August 20, 2010)

### **Administration of Minimal Sedation**

#### **Application Instructions**

Facility Permit D-B2 authorizes the administration of minimal sedation at the specific site named on the Permit, as performed by a qualified dentist licensed to practice under MGL c. 112 s. 45 or by a medical anesthesiologist licensed by the Massachusetts Board of Registration in Medicine. Prior to the administration of minimal sedation in a dental office, a Facility Permit D-B2 must be obtained by the qualified dentist for each office site where minimal sedation is to be administered, including the offices of dentists who work with a qualified medical or dental anesthesiologist (234 CMR 6.03). Facility Permit D-B2 also authorizes the administration of nitrous oxide-oxygen at this site by qualified dentists with the proper individual anesthesia permits as issued by the Board.

**Exemption:** A Facility Permit D-B2 is not required for the administration of minimal sedation or nitrous oxide-oxygen at those hospital and/or dental school settings that have been approved by the Joint Commission on Accreditation of Hospitals or the Commission on Accreditation of the Council on Education of the American Dental Association, or for hospitals and clinics licensed pursuant to M. G. L. c. 111, §§ 51 through 56. A private dental office of a licensed dentist that is located within a hospital or dental school facility, however, is subject to 234 CMR 6.00.

#### **PLEASE NOTE:**

- 1) A facility permit is issued by the Board in the name of a dentist currently licensed under MGL c. 112 s. 45 for the specific address named in the application and is not transferable to either another facility or another licensee. A facility permit immediately expires when the licensee in whose name it is issued ceases to practice at the facility.
- 2) A site inspection is required for completion of this application. Once the permit application is complete, a compliance officer will contact you to set up a time for the inspection. If you are a member of the Massachusetts Society of Oral and Maxillofacial Surgeons whose practice site named in the application has been inspected within the past five years you may submit a copy of the results of that inspection along with the application for a Facility Permit D-B2 in lieu of requesting a Board inspection.
- 3) Please consult Statutes, Rules, and Regulations pertaining to the administration of anesthesia and sedation (234 CMR 6.00) at [www.mass.gov/dph/boards/dn](http://www.mass.gov/dph/boards/dn) for detailed descriptions of requirements for the Facility Permit D-B1 and Individual Anesthesia permits and go to [www.osha.gov](http://www.osha.gov), [www.ada.org](http://www.ada.org) and [www.cdc.gov](http://www.cdc.gov) for up-to-date information on and requirements for the provision anesthesia in dental offices. Specific questions may be addressed to the Board by emailing [dentistry.admin@state.ma.us](mailto:dentistry.admin@state.ma.us)



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www.mass.gov/dph/boards/dn

**Application -Facility Permit D-B2**

1. APPLICANT NAME \_\_\_\_\_ MA DN Lic. # \_\_\_\_\_  
Last First MI

2. FACILITY ADDRESS: \_\_\_\_\_  
No. Street Unit #  
City/Town State Zip Code

3. BUSINESS NAME/DOING BUSINESS AS: \_\_\_\_\_

4. TELEPHONE NUMBER-DAY: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

5. EMAIL ADDRESS: \_\_\_\_\_

6. PRACTICE OWNER (if different from applicant)

Name: \_\_\_\_\_ MA Dental Lic. # \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

7. FACILITY DENTAL DIRECTOR (if applicable – see 234 CMR 5.02 (3))

Name: \_\_\_\_\_ MA Dental Lic. # \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

8. TYPE(S) OF ANESTHESIA AND/OR SEDATION  
TO BE ADMINISTERED AT THIS SITE  
(Check all that apply.)

Nitrous Oxide- Oxygen Only \_\_\_\_\_

Nitrous Oxide-Oxygen + Oral Sedatives \_\_\_\_\_

Oral Sedation Only \_\_\_\_\_

~~I.V. Sedation~~ \_\_\_\_\_

~~General Anesthesia and Deep Sedation~~ \_\_\_\_\_

~~Other route of administration:~~ \_\_\_\_\_



**FACILITY PERMIT D-B2 APPLICATION ATTACHMENTS**

- Attachment 1:** Personal or business check or money order made payable to THE COMMONWEALTH OF MASSACHUSETTS in the amount of \$180. **All fees are non-refundable and non-transferable.**
- Attachment 2:** Required Equipment and Emergency Drugs (**see form attached**)
- Attachment 3:** Documentation of most recent local fire department inspection of the application site within the past year.
- Attachment 4:** Copy of current ACLS or PALS or BLS certificates for all individuals administering or assisting.
- Attachment 5:** Copy of office's medical history form.
- Attachment 6:** Copy of office's anesthesia chart form.
- Attachment 7:** Copy of office's anesthesia consent form.
- Attachment 8:** Copy of a schedule and log demonstrating the regular inspection of all emergency drugs and equipment for administration of minimal sedation at the office site, including the date(s) and name of person who last checked drugs and equipment and the results of the checks, including that of the condition of equipment according to manufacturers' specifications.
- Attachment 9:** Copy of a written protocol for management of emergencies.
- Attachment 10:** Copy of schedule and content of regular and routine office emergency drills.
- Attachment 11:** Copy of WEEKLY spore testing results for the three (3) months prior to application for Facility Permit D-B2. If office has been open less than three months, submit the protocols and procedures for spore testing at the site and any and all WEEKLY spore testing results to date.
- Attachment 12:** Copy of Federal DEA Controlled Substance Certificate and MA Controlled Substance Registration for the specific address listed on this application. (M.G.L. c. 94C, §10)
- Attachment 13:** Request for on-site inspection of the site by the Board.
- Attachment 14:** Copy of DPH Radiation Control Program Certification, (M.G. L. c. 111 §5N)
- Attachment 15:** Copy of all current individual anesthesia permits of staff.

**APPLICANT ATTESTATION:** I \_\_\_\_\_ **HEREBY CERTIFY,**  
Print Full Name of Applicant

**UNDER THE PAINS AND PENALTIES OF PERJURY, THAT:**

- **ALL INFORMATION PROVIDED IN THIS APPLICATION IS ACCURATE AND TRUE;**
- **I HAVE READ AND UNDERSTOOD THE STANDARDS AND REQUIREMENTS FOR THE ADMINISTRATION OF ANESTHESIA AND SEDATION AS PROMULGATED BY THE BOARD ON AUGUST 20, 2010 AT 234.CMR 6.00, INCLUDING, BUT NOT LIMITED TO, THE REQUIREMENTS OF THIS PERMIT FOR:**
  - **AUXILIARY PERSONNEL REQUIRED AT 234 CMR 6.11(2)**
  - **PATIENT EVALUATION REQUIRED AT 234 CMR 6.11 (3)**
  - **PRE-OPERATIVE PREPARATION REQUIRED AT 234 CMR 6.11 (4)**
  - **PATIENT MONITORING AND DOCUMENTATION REQUIRED AT 234 CMR 6.11 (5)**
  - **MANAGEMENT OF RECOVERY AND DISCHARGE OF PATIENTS AT 234 CMR 6.11 (6)**
  - **MANAGEMENT OF PEDIATRIC AND SPECIAL NEEDS PATIENTS AT 234 CMR 6.11 (7)**
  - **EMERGENCY MANAGEMENT AT 234 CMR 6.11 (8)**
  - **CURRENT ACLS, PALS AND BLS CERTIFICATION FOR ALL STAFF ADMINISTERING AND ASSISTING**
- **I UNDERSTAND THAT, UNDER THE TERMS OF THIS PERMIT, THE ADMINISTRATION OF MINIMAL CONSCIOUS SEDATION AND NITROUS OXIDE-OXYGEN SEDATION IS LIMITED SOLELY TO THE PRACTICE SITE WHERE THERE IS THE REQUISITE FACILITY D PERMIT FOR THE TYPE OF ANESTHESIA OR SEDATION TO BE ADMINISTERED.**
- **I AM CURRENTLY, AND WILL CONTINUE TO BE, IN COMPLIANCE WITH ALL STATUTES, RULES, AND REGULATIONS PERTAINING TO THE PRACTICE OF DENTISTRY IN THE COMMONWEALTH OF MASSACHUSETTS AS REQUIRED BY LAW.**

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Attachment 2**

**EQUIPMENT REQUIRED BY 234 CMR 6.06 TO BE PROVIDED AND MAINTAINED AT SITE**

EQUIPMENT REQUIRED	DATE LAST INSPECTED
Alternative light source for use during power failure	
Automated or manual external defibrillator including batteries and other components	
Disposable CPR mask (pediatric and adult)	
Disposable syringes (assorted sizes)	
Equipment suitable for proper positioning of the patient for administration of cardiopulmonary resuscitation, including a back board	
Gas delivery system capable of positive pressure ventilation, which must include: <ul style="list-style-type: none"> <li>▪ Oxygen</li> <li>▪ Safety-keyed hose attachments</li> <li>▪ Capability to administer 100% oxygen in all rooms (operatory, recovery, examination, and reception)</li> <li>▪ Gas storage in compliance with safety codes</li> <li>▪ Adequate waste gas scavenging system</li> <li>▪ Nasal hood or cannula.</li> </ul>	
Latex free tourniquet	
Means of monitoring vital signs (pediatric and adult) <i>e.g. pulse oximeter</i>	
Oxygen (portable Cylinder E tank) pediatric and adult masks capable of giving positive pressure ventilation including bag-valve-mask system	
Pulse oximeter with battery pack	
Sphygmomanometer and stethoscope (pediatric and adult)	
Suction <i>plus backup recommended</i>	
Supervised area for recovery	

**EMERGENCY DRUGS AND DRUG CLASSIFICATIONS  
REQUIRED BY 234 CMR 6.06 TO BE PROVIDED AND MAINTAINED AT SITE**

REQUIRED DRUGS	NAME OF DRUG	DOSAGE	EXPIRATION DATE
Acetylsalicylic acid (rapidly absorbable form)			
Ammonia inhalants			
Anticonvulsant <i>e.g. Valium</i>			
Antihistamine <i>e.g. Benadryl, hydroxyzine</i>			
Antihypoglycemic agent <i>e.g. glucose</i>			
Bronchodilator <i>e.g. Albuterol</i>			
Corticosteroid <i>e.g. prednisone</i>			
Epinephrine pre-loaded syringes			
Oxygen			
Reversal agents <i>e.g. flumazenil</i>			
Two (2) epinephrine ampules			
Vasodilator <i>e.g. nitroglycerin</i>			
Vasopressor <i>e.g. Vasopressin</i>			

**Attachment 2 (page 2)**

<b>NAME(S) OF DENTIST(S)/ANESTHESIOLOGIST(S) WHO WILL BE ADMINISTERING ANESTHESIA AT THIS FACILITY</b>	<b>LICENSE NUMBER</b>	<b>ANESTHESIA PERMIT NUMBER</b>	<b>ACLS/BLS CERTIFICATION EXPIRATION DATE</b>
Dental Director:			

<b>NAME(S) OF DENTAL/SURGICAL ASSISTANT(S)</b>	<b>EXPIRATION DATE OF CPR/BLS CERTIFICATION</b>

**SIGN AND SEND THIS APPLICATION AND ALL REQUIRED ATTACHMENTS TO:**

**THE MASSACHUSETTS BOARD OF REGISTRATION IN DENTISTRY**

**239 CAUSEWAY STREET-SUITE 200, BOSTON, MA 02114**

**KEEP A COPY OF THIS APPLICATION AND ALL ATTACHMENTS FOR YOUR RECORDS**



# **State of Kentucky**

- Sedation Regulations**
- Sedation & Site Permit Apps**

**201 KAR 8:550. Anesthesia and sedation.**

RELATES TO: KRS 313.035

STATUTORY AUTHORITY: KRS 313.035(1)

NECESSITY, FUNCTION AND CONFORMITY: KRS 313.035(1) requires the board to promulgate administrative regulations related to conscious anesthesia and sedation permits. This administrative regulation establishes requirements for permits to perform conscious sedation or anesthesia.

Section 1. Definitions. (1) "Advanced Cardiac Life Support" or "ACLS" means a certification that an individual has successfully completed an advanced cardiac life support course that meets or exceeds the standards established by the American Heart Association and incorporated by reference in 201 KAR 8:532.

(2) "Anesthesia" means an artificially induced insensibility to pain usually achieved by the administration of gases or drugs.

(3) "Anesthesia and sedation" means:

- (a) Minimal sedation;
- (b) Moderate sedation;
- (c) Deep sedation; and
- (d) General anesthesia.

(4) "Board" means the Kentucky Board of Dentistry.

(5) "Certified registered nurse anesthetist" means a registered nurse who is currently certified to practice nurse anesthesia in Kentucky.

(6) "Conscious sedation permit" means a permit that was issued by the board prior to February 1, 2011, that authorized the dentist to whom the permit was issued to administer parenteral sedation for the practice of dentistry.

(7) "Deep sedation" means a drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Cardiovascular function is usually maintained.

(8) "Enteral" means a technique of administration in which the agent is absorbed through the gastrointestinal (GI) tract or oral mucosa (oral, rectal, or sublingual).

(9) "Facility" means a location in which anesthesia or sedation is administered for the practice of dentistry.

(10) "Facility inspection" means an on-site inspection by the board or its designee to determine if a facility where the applicant proposes to provide anesthesia and sedation is adequately supplied, equipped, staffed, and maintained in a condition to support the provision of anesthesia and sedation services in a manner that meets the requirements of this administrative regulation.

(11) "General anesthesia" means a drug-induced loss of consciousness during which patients are not arousable even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation, drug-induced depression, or changes in neuromuscular function. Cardiovascular function may be impaired.

(12) "General anesthesia permit" means a permit that was issued by the board prior to February 1, 2011, that authorized the dentist to whom the permit was issued to administer general anesthesia for the practice of dentistry.

(13) "Incident" means dental treatment performed on a patient under minimal sedation, moderate sedation, deep sedation, or general anesthesia with unforeseen complications.

(14) "Incremental dosing" means administration of multiple doses of a drug until a desired effect is reached.

(15) "Minimal sedation" means a drug-induced state, with or without nitrous oxide to decrease anxiety, in which patients respond normally to tactile stimulation and verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are maintained and do not require assistance.

(16) "Moderate enteral sedation" means a drug-induced depression of consciousness through the gastrointestinal tract or oral mucosa during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

(17) "Moderate parenteral sedation" means a drug-induced depression of consciousness that bypasses the gastrointestinal tract or oral mucosa during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

(18) "Moderate sedation" means a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Intervention is not required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

(19) "Nitrous oxide sedation" means a technique of inhalation sedation with nitrous oxide and oxygen.

(20) "Parenteral" means a technique of administration in which the drug bypasses the gastrointestinal tract, that is, through an intramuscular, intravenous, intranasal, submucosal, subcutaneous, or intraosseous technique.

(21) "Pediatric Advanced Life Support" or "PALS" means a certification that an individual has successfully completed a pediatric advanced life support course that meets or exceeds the standards established by the American Heart Association and incorporated by reference in 201 KAR 8:532.

(22) "Sedation" means the reduction of stress or excitement by the administration of a drug that has a soothing, calming, or tranquilizing effect.

Section 2. Nitrous Oxide Sedation. (1) Nitrous oxide sedation may be used by a Kentucky-licensed dentist without a specific sedation permit or by a Kentucky-licensed dental hygienist certified to administer block and infiltration anesthesia and nitrous oxide analgesia.

(2) Equipment used in the administration of nitrous oxide sedation shall have functional safeguard measures that:

- (a) Limit the minimum oxygen concentration to thirty (30) percent; and

- (b) Provide for scavenger elimination of nitrous oxide gas.
- (3) The dentist shall:
  - (a) Insure that a patient receiving nitrous oxide is constantly monitored; and
  - (b) Be present in the office while nitrous oxide is being used.
- (4)(a) Under a dentist's direct supervision and direct orders, a dental assistant may administer nitrous oxide.
- (b) If a dental assistant administers nitrous oxide, the dental assistant shall administer the level prescribed by the dentist.

Section 3. Minimal Sedation Without a Permit. (1) A permit shall not be required for a dentist to administer minimal enteral sedation for patients age thirteen (13) and older.

(2) A dentist who intends to administer minimal sedation shall indicate the intent to administer minimal sedation in the patient's record.

(3) Medication used to produce minimal sedation shall not exceed the manufacturer's recommended dose (MRD) for unmonitored use by the individual. Additional dosing shall be within the MRD limits.

(4) A dentist who administers minimal sedation shall maintain a margin of safety and a level of consciousness that does not approach moderate sedation and other deeper states of sedation and general anesthesia.

(5) Nitrous oxide may be combined with an oral medication. If nitrous oxide is combined with an oral medication, the level of sedation shall be maintained at the level of minimal sedation.

Section 4. Permit and Location Certificate Required. (1) A dentist shall not administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry unless:

(a) The dentist holds an appropriate Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit issued by the board; or

(b) The dentist holds a conscious sedation or general anesthesia permit that shall be converted to a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit at the next license renewal.

(2) A dentist shall not administer an anesthetic technique under a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit issued by the board at a facility unless:

(a) The facility has a current Anesthesia and Sedation Facility Certificate issued by the board; or

(b) The facility passed an inspection by the board for the purpose of issuing a conscious sedation or general anesthesia permit.

(3) A treating dentist who does not hold an anesthesia and sedation permit shall not allow a physician anesthesiologist, another dentist who holds an anesthesia and sedation permit, or a certified registered nurse anesthetist to administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry at a facility owned or operated by the treating dentist unless:

(a) The facility has a current Anesthesia and Sedation Facility Certificate issued by the board; or

(b) The facility passed an inspection by the board for the purpose of issuing a conscious sedation or general anesthesia permit.

Section 5. Classifications of Anesthesia and Sedation Permits. The following permits shall be issued by the board to a qualified licensed dentist:

(1) Minimal Pediatric Sedation permit that authorizes a dentist to use minimal enteral sedation for patients age five (5) to twelve (12). Medication or medications used to produce minimal sedation shall not exceed the manufacturer's recommended dose (MRD) for unmonitored use by the individual. Incremental dosing shall be prohibited. All dosing shall be administered in the dental office. A dentist who administers minimal sedation shall maintain a margin of safety and a level of consciousness that does not approach moderate sedation and other deeper states of sedation and general anesthesia. Nitrous oxide may be combined with an oral medication. If nitrous oxide is combined with an oral medication, the level of sedation shall be maintained at the level of minimal sedation;

(2) Moderate Enteral Sedation permit that authorizes a dentist to use moderate enteral sedation for patients age thirteen (13) and older;

(3) Moderate Parenteral Sedation permit that authorizes a dentist to use moderate parenteral sedation for patients age thirteen (13) and older;

(4) Moderate Pediatric Sedation permit that authorizes a dentist to use moderate sedation by any route of administration for patients age twelve (12) and under; and

(5) Deep Sedation or General Anesthesia permit that authorizes a dentist to use:

(a) General anesthesia; or

(b) Deep sedation.

Section 6. Qualifications for Obtaining a Minimal Pediatric Sedation Permit. To qualify for a Minimal Pediatric Sedation permit, an applicant shall:

(1) Submit an Application for Sedation or Anesthesia Permit;

(2) Pay the fee required by 201 KAR 8:520;

(3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and

(4) Provide proof of successful completion of:

(a) a Commission on Dental Accreditation (CODA) accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage minimal sedation; or

(b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of twenty-four (24) hours of didactic instruction on pediatric minimal sedation by the enteral route or the combination enteral and nitrous oxide route.

Section 7. Qualifications for Obtaining a Moderate Enteral Sedation Permit. To qualify for a Moderate Enteral Sedation permit, an applicant



shall:

- (1) Submit an Application for Sedation or Anesthesia Permit;
- (2) Pay the fee required by 201 KAR 8:520;
- (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and
- (4) Provide proof of successful completion of:
  - (a) A Commission on Dental Accreditation (CODA) accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate sedation; or
  - (b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of twenty-four (24) hours of didactic instruction plus management of at least ten (10) adult case experiences by the enteral route or the combination enteral and nitrous oxide route. These ten (10) cases shall include at least three (3) live (on sight) clinical dental experiences managed by participants in groups that shall not exceed five (5) individuals. These three (3) live (on-sight) experiences may be obtained by observing a permit level dentist in his or her office, and the remaining cases may include simulations and video presentations and shall include at least one (1) experience in returning a patient from deep to moderate sedation.

Section 8. Qualifications for Obtaining a Moderate Parenteral Sedation Permit. To qualify for a Moderate Parenteral Sedation permit, an applicant shall:

- (1) Submit an Application for Sedation or Anesthesia Permit;
- (2) Pay the fee required by 201 KAR 8:520;
- (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and
- (4) Provide proof of successful completion of:
  - (a) A CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate parenteral sedation; or
  - (b) Provide proof of successful completion of a board-approved course that shall consist of a minimum of sixty (60) hours of didactic instruction plus management of at least twenty (20) patients per course participant in moderate parenteral sedation techniques.

Section 9. Qualifications for Obtaining a Moderate Pediatric Sedation Permit. To qualify for a Moderate Pediatric Sedation permit, an applicant shall:

- (1) Submit an Application for Sedation or Anesthesia Permit;
- (2) Pay the fee required by administrative regulation;
- (3) Hold current certification in either ACLS or PALS or successfully complete a six (6) hour board-approved course that provides instruction on medical emergencies and airway management; and
- (4) Provide proof of successful completion of a CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage moderate sedation for patients age twelve (12) and under.

Section 10. Qualifications for Obtaining a Deep Sedation or General Anesthesia Permit. To qualify for a Deep Sedation or General Anesthesia permit, an applicant shall:

- (1) Submit an Application for Sedation or Anesthesia Permit;
- (2) Pay the fee required by administrative regulation;
- (3) Hold current certification in either ACLS or PALS; and
- (4) Provide proof of successful completion of:
  - (a) A board-approved Accreditation Council for Graduate Medical Education (ACGME) accredited post doctoral training program in anesthesiology which affords comprehensive and appropriate training necessary to administer deep sedation and general anesthesia;
  - (b) A board-approved nurse anesthesia program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs that affords comprehensive and appropriate training necessary to administer deep sedation and general anesthesia;
  - (c) Successful completion of a minimum of two (2) years advanced clinical training in anesthesiology from a Joint Commission on Accreditation of Healthcare Organization (JCAHO) accredited institution that meets the objectives set forth in part two (2) of the American Dental Association's Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry; or
  - (d) Provide proof of successful completion of a CODA-accredited postdoctoral training program that affords comprehensive and appropriate training necessary to administer and manage deep sedation and general anesthesia.

Section 11. Multiple Application Levels Permitted. Dentists with education and training for more than one (1) level of sedation may mark their levels of qualification on the Application for Sedation or Anesthesia Permit, based on the requirements of Sections 6 through 10 of this administrative regulation.

Section 12. Location Requirement. A dentist holding a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit shall advise the board of the name and address of each facility where the dentist intends to or has ceased to administer anesthesia and sedation by submitting the Anesthesia and Sedation Permit Location Notification Form within ten (10) business days of the change.

Section 13. Anesthesia and Sedation Facility Certificates. (1) The owner or operator of a facility shall obtain an Anesthesia and Sedation Facility Certificate from the board for any location at which:

- (a) A dentist holding a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, Deep Sedation or General Anesthesia, conscious sedation, or general anesthesia permit may administer anesthesia and sedation under the

permit; or

(b) The treating dentist may allow a physician anesthesiologist, another dentist who holds an anesthesia and sedation permit, or a certified registered nurse anesthetist to administer an anesthetic technique in order to attain a level beyond minimal sedation for the practice of dentistry.

(2) A facility owner or operator desiring to obtain an Anesthesia and Sedation Facility Certificate shall:

(a) Submit an Application for an Anesthesia and Sedation Facility Certificate;

(b) Pay the fee required by 201 KAR 8:520; and

(c) Successfully pass a facility inspection as outlined in Section 14 of this administration.

(3) A dentist currently in an advanced training course for sedation may request the Board of Dentistry complete a Sedation Facility Inspection prior to completion of the course.

(4) The owner or operator of a facility shall not allow an individual to administer anesthesia or sedation unless the individual is permitted to do so under this administrative regulation.

(5) The owner or operator of a facility shall maintain for five (5) years for inspection by the board the name and license number of each dentist, physician anesthesiologist, or certified registered nurse anesthetist who has administered anesthesia or sedation at that location.

(6) The owner or operator of a facility shall ensure that the facility:

(a) Remains properly equipped in accordance with Section 14 of this administrative regulation; and

(b) Remains properly staffed in accordance with Section 15 of this administrative regulation.

(7) In addition to the requirements contained in subsection (6) of this section, the owner or operator of a facility shall ensure that the facility has appropriate nonexpired emergency and sedation medications.

Section 14. Facility Inspection Criteria. (1) To qualify for an Anesthesia and Sedation Facility Certificate, the facility shall pass an evaluation of facility equipment, medications, and clinical records.

(a) The following shall be provided by the facility to qualify:

1. Oxygen and gas delivery system, backup system fail-safe;

2. Gas storage facility;

3. Safety indexed gas system;

4. Suction and backup system;

5. Auxiliary lighting system;

6. Suitability of operating room to include:

a. Size, which shall be at a minimum ten (10) feet by eight (8) feet or eighty (80) square feet;

b. Operating primary light source and secondary portable back-up source, unless back-up generator is available; and

c. Accessibility by emergency medical staff;

7. Recovery area, including oxygen, suction, and visual and electronic monitoring, which may include the operating room;

8. Preoperative medical history and physical evaluation form; and

9. Anesthesia and monitoring equipment checked to insure proper working order.

(b) The following shall be provided by the facility or by an individual listed in Section 22 of this administrative regulation:

1. Appropriate drugs for each procedure, all of which shall be unexpired, including reversal agents and emergency medications;

2. Appropriate devices to maintain an airway with positive pressure ventilation;

3. Anesthesia records, including monitoring and discharge records and a check sheet.

a. The check sheet shall be signed by the provider and the dentist and placed in each record.

b. If the dentist is the provider, only the dentist's signature shall be required;

4. Monitoring equipment, including pulse oximeter and blood pressure monitoring;

5. Electrocardiogram (EKG):

a. May be present for use by Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, and Moderate Pediatric Sedation permit holders for patients with significant cardiac history; and

b. Shall be present for use by Deep Sedation or General Anesthesia permit holders;

6. Defibrillator or automated external defibrillator (AED) for moderate and Deep Sedation or General Anesthesia permits; and

7. For deep sedation or general anesthesia in pediatric patients:

a. A precordial stethoscope; or

b. A pretracheal stethoscope.

(2) During a facility inspection, inspectors shall:

(a) Examine the facility's equipment to determine if it is in proper working order;

(b) Determine if appropriate emergency drugs are present; and

(c) Determine if emergency drugs are nonexpired.

Section 15. Inducing a Level of Sedation for a Patient. (1) Administration of minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia to a patient requires at least the following appropriately trained individuals:

(a) The treating dentist;

(b) An individual trained and competent in basic life support (BLS) or its equivalent to assist the treating dentist; and

(c) Another individual trained and competent in BLS or its equivalent in close proximity to assist if needed.

(2) A dentist administering minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia to a patient shall not leave the site until the patient:

(a) Is conscious;

(b) Is spontaneously breathing;

- (c) Has stable vital signs;
- (d) Is ambulatory with assistance; and
- (e) Is under the care of a responsible adult.

(3) A treating dentist who allows a physician, another dentist, or certified registered nurse anesthetist to administer minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, moderate pediatric sedation, deep sedation, or general anesthesia under Section 22 of this administrative regulation shall ensure that the physician, dentist, or certified registered nurse anesthetist shall not leave the site until the patient:

- (a) Is conscious;
- (b) Is spontaneously breathing;
- (c) Has stable vital signs;
- (d) Is ambulatory with assistance; and
- (e) Is under the care of a responsible adult.

Section 16. Conscious Sedation Permits and General Anesthesia permits. (1) A dentist who holds a current general anesthesia permit may continue to administer anesthesia and sedation consistent with a Deep Sedation or General Anesthesia permit until the expiration date of the permit.

(2) A dentist who holds a current conscious sedation permit and meets the requirements of Section 9(4) of this administrative regulation may continue to administer anesthesia and sedation consistent with a Moderate Pediatric Sedation permit until the expiration date of the permit.

(3) A dentist who holds a current conscious sedation permit and meets the requirements of Section 8 of this administrative regulation may continue to administer anesthesia and sedation consistent with a Moderate Parenteral Sedation permit until the expiration date of the permit.

(4) During the license renewal process, current general anesthesia permit holders shall convert the permit to a Deep Sedation or General Anesthesia permit.

(5) During the license renewal process, current conscious sedation permit holders shall convert the permit to a minimal pediatric sedation, moderate enteral sedation, moderate parenteral sedation, or moderate pediatric sedation permit.

(6) A dentist who currently practices enteral sedation without a permit may continue without a permit until January 1, 2012 and shall receive a Moderate Enteral Sedation permit by the submission of:

- (a) Twenty-four (24) hours of didactic education plus twenty (20) sedation records documenting their experience; and
- (b) Satisfactory completion of an on-site inspection as outlined in Section 14 of this administrative regulation.

Section 17. Issuance and Expiration of Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permits.

(1) Once an applicant has met the qualifications for obtaining a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia permit the board shall issue a permit in sequential numerical order.

(2) Each permit issued under this administrative regulation shall expire on the same date as the permit holder's license to practice dentistry.

Section 18. Renewal of Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, and Deep Sedation or General Anesthesia Permits. An individual desiring renewal of an active Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, and Deep Sedation or General Anesthesia permits shall:

- (1) Submit a completed and signed Application for Renewal of Sedation or Anesthesia Permit;
- (2) Pay the fee required by 201 KAR 8:520; and

(3) Provide evidence to the board that the applicant meets the continuing education requirements outlined in Section 19 of this administrative regulation.

Section 19. Continuing Education Requirements for Renewal of a Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation, or Deep Sedation or General Anesthesia Permit.

(1) An individual desiring renewal of an active Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, or Moderate Pediatric Sedation permit shall:

- (a) Complete at least six (6) hours of clinical continuing education related to sedation or anesthesia in a classroom setting that includes hands-on airway management during the two (2) year term of the permit; or
- (b) Maintain ACLS or PALS certification.

(2) An individual desiring renewal of an active Deep Sedation or General Anesthesia permit shall:

- (a) Complete not less than four (4) hours of on-site clinical continuing education related to sedation or anesthesia during the two (2) year term of the permit; and
- (b) Maintain ACLS or PALS certification.

(3) Continuing education required by this administrative regulation shall:

- (a) Not be used to satisfy other continuing education requirements; and
- (b) Be in addition to other continuing education requirements of 201 KAR 8:532.

Section 20. Facilities Inspected Prior to February 1, 2011. A facility owner or operator desiring to obtain an Anesthesia and Sedation Facility Certificate for a facility which passed an inspection by the board prior to February 1, 2011 shall provide proof to the board of having

passed a facility inspection for the purpose of issuing a conscious sedation or general anesthesia.

Section 21. Issuance of an Anesthesia and Sedation Facility Certificate. Once an applicant has met the qualifications for obtaining an Anesthesia and Sedation Facility Certificate the board shall issue a certificate in sequential numerical order.

Section 22. Administration by a Physician Anesthesiologist, Dentist, or Certified Registered Nurse Anesthetist at the Facility of a Treating Dentist. (1) A treating dentist may allow at his or her dental facility, administration of sedation or anesthesia by a:

- (a) Kentucky-licensed physician anesthesiologist or a Kentucky-licensed Certified Registered Nurse Anesthetist; or
- (b) Dentist who holds an anesthesia and sedation permit.

(2) Administration by an individual listed in subsection (1)(a) of this section shall:

- (a) Comply with this administrative regulation; and
- (b) Not require board review.

(3) Nothing in this section shall preclude a dentist from working with a Kentucky-licensed physician anesthesiologist or a Kentucky-licensed Certified Registered Nurse Anesthetist in an ambulatory care center or hospital.

Section 23. Morbidity and Mortality Incident Reports. (1) A dentist shall report to the board, in writing, any death caused by or resulting from the dentist's administration of minimal sedation, moderate sedation, deep sedation, or general anesthesia within seven (7) days after its occurrence.

(2) A dentist shall report to the board, in writing, any incident that resulted in hospital in-patient admission caused by or resulting from the dentist's administration of minimal sedation, moderate sedation, deep sedation, or general anesthesia within thirty (30) days after its occurrence.

(3) The written report to the board required in subsections (1) and (2) of this section shall include:

- (a) The date of the incident;
- (b) The name, age, and address of the patient;
- (c) The patient's original complete dental records;
- (d) The name and license number of the licensee and the name and address of all other persons present during the incident;
- (e) The address where the incident took place;
- (f) The preoperative physical condition of the patient;
- (g) The type of anesthesia and dosages of drugs administered to the patient;
- (h) The techniques used in administering the drugs;
- (i) Any adverse occurrence including:
  1. The patient's signs and symptoms;
  2. The treatment instituted in response to adverse occurrences;
  3. The patient's response to the treatment; and
  4. The patient's condition on termination of any procedures undertaken; and
- (j) A narrative description of the incident including approximate times and evolution of symptoms.

(4) The duties outlined in this section shall apply to every dentist who administers any type of sedation or anesthesia.

Section 24. Registered Dental Assistant Duties permitted when working with Sedation Permit holders: (1) A registered dental assistant working with Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia permit holders may, under direct supervision:

(a) Apply noninvasive monitors;

(b) Perform continuous observation of patients and noninvasive monitors appropriate to the level of sedation, during the pre-operative, intra-operative and post-operative (recovery) phases of treatment;

(c) Report monitoring parameters to the operating dentist on a periodic basis and when changes in monitored parameters occur;

(d) Record vital sign measurements in the sedation record; and

(e) Remove IV lines (Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders only).

(2) A registered dental assistant working with Minimal Pediatric Sedation, Moderate Enteral Sedation, Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders, may under direct supervision assist in the management of emergencies.

(3) A registered dental assistant working with Moderate Parenteral Sedation, Moderate Pediatric Sedation and Deep Sedation or General Anesthesia Permit holders may, under direct supervision:

(a) Administer medications into an existing IV line upon the verbal order and direct supervision of a dentist with a Moderate Parenteral Sedation, Moderate Pediatric or Deep Sedation or General Anesthesia permit; and

(b) Establish an IV line under direct supervision if they have completed a course approved by the board of Dentistry in intravenous access.

Section 25. Incorporation by Reference. (1) The following material is incorporated by reference:

- (a) "Application for Sedation or Anesthesia Permit", February 2011;
- (b) "Application for Sedation or Anesthesia Facility Certificate", February 2011; and
- (c) "Sedation of Anesthesia Permit Location Notification Form", February 2011.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday 8 a.m. through 4:30 p.m. This material is also available on the board's Web site at <http://dentistry.ky.gov>. (37 Ky.R. 2308; 2876; eff. 8-5-11.)





Fee	Date
Approved by	
Permit number	
Date Issued	

FOR KBD USE ONLY

# Kentucky Board of Dentistry



312 Whittington Parkway, Suite 101  
 Louisville, KY 40222  
 502/429-7280  
<http://dentistry.ky.gov>

## APPLICATION FOR SEDATION OR ANESTHESIA PERMIT

Please print in ink or type your responses. List your name as it appears on your license.

### Section 1. Must be completed by ALL applicants.

Dentist's Name \_\_\_\_\_  
Last/Suffix First Middle

License Number \_\_\_\_\_

Business address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

- Applying for
- Minimal Pediatric Sedation Permit 201 KAR 8:550 Section 5 *PSD course*
  - Moderate Enteral Sedation Permit 201 KAR 8:550 Section 6 *OSD course*
  - Moderate Parenteral Sedation Permit 201 KAR 8:550 Section 7
  - Moderate Pediatric Sedation Permit 201 KAR 8:550 Section 8
  - Deep Sedation or General Anesthesia Permit 201 KAR 8:550 Section 9

A short resume showing evidence of your qualifications must accompany this application with a detailed listing of all dental, professional, and post-doctoral education supporting these qualifications, including dates attended with copies of supporting documents.

### Section 2. Applicants MUST Submit Proof of having met the Requirements of:

- Minimal Pediatric Sedation Permit 201 KAR 8:550 Section 5 *PSD course*
- Moderate Enteral Sedation Permit 201 KAR 8:550 Section 6 *OSD course*
- Moderate Parenteral Sedation Permit 201 KAR 8:550 Section 7
- Moderate Pediatric Sedation Permit 201 KAR 8:550 Section 8
- Deep Sedation or General Anesthesia Permit 201 KAR 8:550 Section 9

### Section 3. Fee for Application for Sedation or Anesthesia Permit

You must submit a check or money order made out to the Kentucky Board of Dentistry for the amount of \$250.00

### Section 4. Affidavit. Must be completed by ALL applicants.

I hereby certify that the above facts are true and I agree to abide by the rules and regulations set by the Kentucky Board of Dentistry including any future amendments to said rules and regulations.

State of \_\_\_\_\_  
 County of \_\_\_\_\_

\_\_\_\_\_  
Applicant's signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary public signature

\_\_\_\_\_  
My commission expires on

RETURN YOUR COMPLETED APPLICATION, NON-REFUNDABLE FEE, AND SUPPORTING DOCUMENTATIONS TO THE ADDRESS ABOVE.

Fee	Date
Inspected by	
Certificate number	
Date Issued	

FOR KBD USE ONLY

# Kentucky Board of Dentistry



312 Whittington Parkway, Suite 101  
 Louisville, KY 40222  
 502/429-7280  
<http://dentistry.ky.gov>

## APPLICATION FOR SEDATION OR ANESTHESIA FACILITY CERTIFICATE

Please print in ink or type your responses. List your name as it appears on your license.

### Section 1. Must be completed by ALL applicants.

Owner Operator Name \_\_\_\_\_  
Last/Suffix First Middle

License Number of Dentist \_\_\_\_\_ (if applicable)

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

City State ZIP KY County Phone #

- Applying for
- Minimal Pediatric Sedation Facility Certificate *PSD course*
  - Moderate Enteral Sedation Permit Facility Certificate *OSD course*
  - Moderate Parenteral Sedation Permit Facility Certificate
  - Moderate Pediatric Sedation Permit Facility Certificate
  - Deep Sedation or General Anesthesia Permit Facility Certificate

**Section 2. Applicants MUST Submit Proof of having met the Requirements of: (To be completed by the inspector on the date of inspection. Please call the Kentucky Board of Dentistry to schedule an inspection.)**

- 201 KAR 8:550 Section 13.

Signature of the Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

### Section 3. Fee for Application for Sedation or Anesthesia Facility Certificate

You must submit a check or money order made out to the Kentucky Board of Dentistry for the amount of \$250.00

### Section 4. Affidavit. Must be completed by ALL applicants.

I hereby certify that the above facts are true and I agree to abide by the rules and regulations set by the Kentucky Board of Dentistry including any future amendments to said rules and regulations.

State of \_\_\_\_\_  
 County of \_\_\_\_\_

\_\_\_\_\_  
 Applicant's signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
 Notary public signature

\_\_\_\_\_  
 My commission expires on

RETURN YOUR COMPLETED APPLICATION, NON-REFUNDABLE FEE, AND SUPPORTING DOCUMENTATIONS TO THE ADDRESS ABOVE.

Date	
Approved by	
Certificate number	
Date Issued	

FOR KBD USE ONLY

# Kentucky Board of Dentistry



312 Whittington Parkway, Suite 101  
 Louisville, KY 40222  
 502/429-7280  
<http://dentistry.ky.gov>

## SEDATION OR ANESTHESIA PERMIT LOCATION NOTIFICATION FORM

Please print in ink or type your responses. List your name as it appears on your license.

### Section 1. Must be completed by ALL applicants.

Dentist's Name \_\_\_\_\_  
Last/Suffix First Middle

License Number \_\_\_\_\_

Add Facility  Delete Facility \_\_\_\_\_ Facility Permit Number

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

Add Facility  Delete Facility \_\_\_\_\_ Facility Permit Number

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

Add Facility  Delete Facility \_\_\_\_\_ Facility Permit Number

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

Add Facility  Delete Facility \_\_\_\_\_ Facility Permit Number

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

Add Facility  Delete Facility \_\_\_\_\_ Facility Permit Number

Facility address \_\_\_\_\_  
Business Name Number & Street PO Boxes Not Acceptable

\_\_\_\_\_  
City State ZIP KY County Phone #

Applicant's signature \_\_\_\_\_

Effective Date of Change \_\_\_\_\_