

# Nevada State Board of Dental Examiners



2651 N. Green Valley Pkwy, Ste. 104 • Henderson, NV 89014 • (702) 486-7044 • (800) DDS-EXAM • Fax: (702) 486-7046

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## **Anesthesia Committee Meeting** **Meeting Minutes**

### **Meeting Date & Time**

Tuesday, January 28, 2025  
6:00 p.m.

### **Meeting Location**

Nevada State Board of Dental Examiners  
2651 N. Green Valley Pkwy, Ste. 104  
Henderson, NV 89014

### **Video Conferencing/ Teleconferencing Available**

**To access by phone, +1(646) 568-7788**

**To access by video webinar,**

**<https://us06web.zoom.us/j/87043991415>**

**Webinar/Meeting ID#: 870 4399 1415**

**Webinar/Meeting Passcode: 788829**

### **PUBLIC NOTICE:**

**Public Comment by pre-submitted email/written form and Live Public Comment by teleconference** is available after roll call (beginning of meeting and prior to adjournment (end of meeting). Live Public Comment is limited to three (3) minutes for each individual.

Members of the public may submit public comment in written form to: **Nevada State Board of Dental Examiners, 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014; FAX number (702) 486-7046; e-mail address [nsbde@dental.nv.gov](mailto:nsbde@dental.nv.gov)**. Written submissions received by the Board on or before **Monday, January 27, 2025, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

The Nevada State Board of Dental Examiners may: 1) address agenda items out of sequence to accommodate persons appearing before the Board or to aid the efficiency or effectiveness of the meeting; 2) combine items for consideration by the public body; 3) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. *See* NRS 241.030. Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual the board may refuse to consider public comment. *See* NRS 233B.126.

Persons/facilities who want to be on the mailing list must submit a written request every six (6) months to the Nevada State Board of Dental Examiners at the address listed in the previous paragraph. With regard to any board meeting or telephone conference, it is possible that an amended agenda will be published adding new items to the original agenda. Amended Nevada notices will be posted in compliance with the Open Meeting Law.

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Board, at (702) 486-7044, no later than 48 hours prior to the meeting. Requests for special arrangements made after this time frame cannot be guaranteed.

Pursuant to NRS 241.020(2) you may contact at (702) 486-7044, to request supporting materials for the public body or you may download the supporting materials for the public body from the Board's website at <http://dental.nv.gov> In addition, the supporting materials for the public body are available at the Board's office located at 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014.

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**Note:** Asterisks (\*) "For Possible Action" denotes items on which the Board may take action.

**Note:** Action by the Board on an item may be to approve, deny, amend, or table it.

**1. Call to Order**

**a. Roll Call/Quorum**

Dr. Branco – Present	Dr. West – Present
Dr. Hock – Present	Dr. Miller – Present
Dr. Schlesinger – Absent	Dr. Twesme – Absent
Dr. Okundaye – Absent	Dr. Saxe – Absent
Dr. Gray – Absent	

A.L. Higginbotham, Executive Director of the Board, and Mark Karris and Blair Parker, General Counsel for the Board, were also in attendance.

**2. Public Comment (Live public comment by teleconference and pre-submitted email/written form):**

The public comment period is limited to matters specifically noticed on the agenda. No action may be taken upon the matter raised during the public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place and manner restriction, but may not be limited to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

Members of the public may submit public comment via email to [nsbde@dental.nv.gov](mailto:nsbde@dental.nv.gov), or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before Monday, January 27, 2025, at 4:00 p.m. may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General’s Open Meeting Law Manual, the Chair may prohibit comment if the content of that comment is a topic that is not relevant to, or within the authority of, the Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

There were no public comments at this time.

**3. Chairman’s Report: Joshua Branco, DMD (For Possible Action)**

- a. Request to Remove Agenda Item(s) (For Possible Action)**
- b. Approve Agenda (For Possible Action)**

Dr. West motioned to approve the agenda, with Dr. Hock seconding the motion. The motion passed unanimously.

**4. Old Business: (For Possible Action)**

**5. New Business: (For Possible Action)**

- a. Review, Discussion and Consideration of Recommendation to the Board regarding an increase to the cost of anesthesia evaluations from \$250 per evaluation to \$500 per evaluation – NRS 631.190; NRS 631.345; NAC 631.029 (For Possible Action)**

Dr. Branco introduced the agenda item, clarifying that the proposed fee increase was for evaluations performed by anesthesia evaluators, not payments made to evaluators. Mr. Higginbotham confirmed the clarification, noting the fee increase applied to evaluations for site inspections or anesthesia assessments. Dr. Branco stated that the fee increase could attract more evaluators, given the current shortage. Dr. Jade Miller

asked whether the fee increase applied to both initial and renewal evaluations. Dr. Branco confirmed that it applied to all evaluations, regardless of whether it was an initial inspection or a five-year renewal. Dr. West emphasized that the increase is necessary and clarified that the site inspections would remain at \$250 while the more complex anesthesia evaluations would be raised to \$500. He noted that the new pay structure for evaluators would make them 1099 contract workers to simplify accounting. He shared that evaluators could group multiple evaluations geographically to complete several in a day. Dr. Hock agreed with the proposed increase, highlighting the backlog of evaluations and the need to implement changes to motivate evaluators. Dr. West added that he would send emails to current and potential evaluators to gauge their availability and spread the workload. He explained that evaluators should dictate their schedules, and applicants seeking evaluations would need to accommodate them. Dr. Miller asked for clarification about the cost per evaluator. Dr. West confirmed that each evaluator would be paid \$500 per evaluation, which could require multiple evaluators depending on the case. Mr. Higginbotham clarified that the increase only applied to anesthesia evaluations, while the site inspections remained at \$250. Dr. Branco motioned to approve the fee increase for anesthesia evaluations from \$250 to \$500 and leave site inspections at \$250. Dr. West seconded the motion, and all committee members were in favor. The motion passed unanimously.

**b. Review, Discussion and Consideration of Recommendation to the Board regarding a fee increase for “Biennial renewal fee for a permit to administer general anesthesia, moderate sedation or deep sedation” from \$200 to \$500 – NRS 631.190; NRS 631.345; NAC 631.029 (For Possible Action)**

Mr. Higginbotham explained that the current renewal fees were insufficient, leading to a net-zero or negative balance. Mr. Higginbotham noted that while an increase could only be temporary due to regulatory caps, the Board needed a solution to address the backlog and sustain operational costs. He said that long-term adjustments would require legislative action, but the immediate increase was necessary. Dr. Branco asked if the fee increase to \$500 would be enough to cover the shortfall. Mr. Higginbotham explained that the proposed increase was the maximum allowed under current regulations and emphasized that a more permanent solution would require legislative changes. Dr. West agreed that while the increase was not ideal, it was a temporary solution that could help reduce the backlog. Dr. Branco motioned to approve the biannual renewal fee increase from \$250 to \$500. Dr. Hock seconded the motion. All were in favor and the motion passed.

**c. Review, Discussion and Consideration of Recommendation to the Board Regarding the Issuance of Two (2) Hours of Continuing Education Credits to Anesthesia Evaluators for Each Anesthesia Evaluation Performed – NRS 631.190; NAC 631.173; NAC 631.175 (For Possible Action)**

Dr. Branco introduced the proposal to grant two (2) CE credits for each anesthesia evaluation performed, capped at 20 credits biennially. He expressed concerns about evaluators potentially fulfilling all their CE requirements through evaluations without attending courses for updated knowledge. Dr. West agreed and proposed capping CE credits and ensuring that the six (6) CE hours specific to anesthesia still be obtained through courses. Dr. Hock suggested allowing up to 20 general CE credits for evaluations while requiring the separate six-hour anesthesia-specific CE requirement. Dr. Miller confirmed that the requirement for anesthesia-specific CE was six (6) hours biennially. Dr. West suggested capping general CE credits from evaluations at 20 hours and revisiting the policy if evaluators exploited the system. Dr. Moore raised concerns about whether the Board could legally issue CE credits for evaluations under the current statutes. Mr. Parker referenced NAC 631.173, which allows CE credits for volunteer work under approved organizations, but acknowledged that the Board itself may not fit this description. Dr. Moore emphasized that the optics of “self-CE” could be problematic and suggested further legal review. Dr. West made a motion to approve two (2) general CE credits per evaluation, capped at 20 credits biennially, with the six (6) anesthesia-specific CE hours to be obtained separately. Dr. Moore suggested tabling the motion due to legal ambiguities. Dr. Branco agreed that it might be good to table the agenda item until further research into the legality of the matter. Kelly Taylor, RDH raised concerns about the optics of awarding CE credits for tasks evaluators are already being paid for, comparing it to tracking work done as a professional meeting. She suggested aligning CE credits with professional development settings. Dr. Hock explained that the primary aim of this proposal is to alleviate the backlog by incentivizing evaluators, similar to how it is done in California. Dr. West responded that evaluators do additional preparation before evaluations, which constitutes legitimate learning. He argued that unless statutes explicitly forbid it, CE credits could be justified to address the backlog and meet state pressures. Mr. Karris explained that the legislative commission had previously shown concern over evaluator shortages and encouraged the Board to find ways to attract more evaluators. Mr. Karris said that awarding CE credits, combined with increased evaluator fees, could be a temporary solution. Dr. Moore brought up

California's system of allowing CE for calibration training but emphasized the importance of ensuring legal backing for CE issuance. Mr. Parker stated that although there is no specific statute allowing CE for evaluations, there is also no prohibition. Dr. West motioned to approve two (2) hours of CE credit issuance per evaluation, capped at 10 CE credits biennially, not applicable toward the six (6) anesthesia-specific CE hours. Dr. Hock seconded the motion and the motion passed unanimously.

**d. Review, Discussion and Consideration of Recommendation to the Board Regarding Revisions to NAC 631.2219 Concerning 5-year Evaluations/Inspections for General Anesthesia Permits and Moderate Sedation Permits – NRS 631.190; NAC 631.2219 (For Possible Action)**

Dr. West asked about the proposed language and whether it included adjustments based on legislative commission feedback. Mr. Karris explained that the current requirements of inspections every five (5) years were problematic due to human and financial resource constraints. He noted that the legislative commission had been concerned about permits expiring due to missed inspections. Mr. Karris recommended simplifying the language to ensure permits remain active until inspections are completed and allow for rolling inspections within a five-to-ten-year period. Dr. West suggested that Dr. Branco and Mr. Karris collaborate to refine the inspection language, incorporating both clinical and legislative considerations. Mr. Karris recommended that the language be finalized and presented directly to the full Board. Dr. West motioned to have Dr. Branco and Mr. Karris collaborate on refining the proposed revision language and to present it to the full Board during the next meeting. The motion was seconded by Dr. Hock and the motion passed unanimously.

**e. Review, Discussion and Consideration of Recommendation to the Board the Operational Designation of the Numbers Needed to Perform an Evaluation – NAC 631.2221; NAC 631.2223; NAC 631.2225; NAC 631.2227; NAC 631.2229; NAC 631.2231; NAC 631.2235; NRS 631.190 (For Possible Action)**

Mr. Higginbotham highlighted that the current requirements for two evaluators is causing delays due to scheduling challenges and a shortage of evaluators. Dr. West suggested having one evaluator be a fully credentialed anesthesia permit holder, while the second could be a Board member, as a temporary solution to alleviate backlog. Dr. Branco stressed the importance of keeping two (2) evaluators for anesthesia evaluations to ensure thoroughness and avoid potential bias. He suggested focusing on recruiting more evaluators instead of lowering the requirement. Dr. Moore proposed virtual site inspections for simpler tasks, such as checking equipment and medications, to alleviate some of the burden. Dr. West motioned to continue requiring two (2) evaluators for anesthesia evaluations but allow one site evaluator for site inspections. Dr. Branco seconded the motion and all were in favor. The motion passed.

**f. Review, Discussion and Consideration of Transitioning Routine Anesthesia Application Review Processing Authority to Board Staff – NRS 631.190 (For Possible Action)**

Dr. West clarified that this process already works well and should remain as is. Dr. Branco confirmed that applications with complete documentation go directly to the full Board, while any with issues are discussed by the committee. Dr. West motioned to continue the current process, with Board staff verifying applications, followed by review by the Anesthesia Committee Chairperson and the Executive Treasurer before submission to the full Board. Dr. Hock seconded the motion and all were in favor. The motion passed.

**6. Public Comment (Live public comment by teleconference): This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon the matter raised during public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place and manner restriction but may not be limited based upon viewpoint. The Chairperson may allow additional time at his/her discretion.**

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of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of speakers.

Dr. Moore commended the committee for handling complex topics effectively. She also reminded the committee to ensure all subcommittee members receive notifications of future meetings.

**7. Announcements:**

**8. Adjournment: (For Possible Action)**

Dr. West motioned to adjourn the meeting, with Dr. Hock seconding the motion. All were in favor and the meeting was adjourned.