

**REPORT OF RECOMMENDATIONS AND FINDINGS  
ON THE DENTAL ANESTHESIA PROPOSAL FOR A CHANGE IN  
SCOPE OF PRACTICE**

By the Nebraska  
State Board of Health

To the Director of the Division of Public Health of the Department of Health and  
Human Services, and the Members of the Health and Human  
Services Committee of the Legislature

January 27, 2014

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## **Part One: Preliminary Information**

### **Introduction**

The Credentialing Review Program is a review process advisory to the Legislature which is designed to assess the need for state regulation of health professionals. The credentialing review statute requires that review bodies assess the need for credentialing proposals by examining whether such proposals are in the public interest.

The law directs those health occupations and professions seeking credentialing or a change in scope of practice to submit an application for review to the Department of Health and Human Services, Division of Public Health. The Director of this Division will then appoint an appropriate technical review committee to review the application and make recommendations regarding whether or not the application in question should be approved. These recommendations are made in accordance with statutory criteria contained in Section 71-6221 of the Nebraska Revised Statutes. These criteria focus the attention of committee members on the public health, safety, and welfare.

The recommendations of technical review committees take the form of written reports that are submitted to the State Board of Health and the Director of the Division along with any other materials requested by these review bodies. These two review bodies formulate their own independent written reports on the same credentialing proposals. All reports that are generated by the program are submitted to the Legislature to assist state senators in their review of proposed legislation pertinent to the credentialing of health care professions.

## **The Members of the Nebraska State Board of Health**

Janet Coleman (public member)

Shane Fleming, BSN, MSN, RN

Paul Salansky, OD (Secretary)

Wayne Stuberg, PhD, PT

John Tennity, DPM

Gary Westerman, DDS

Daryl Wills, DC (Vice Chair)

Edward Discoe, MD

Anthony Moravec, DVM

Russell Hopp, D.O.

Diane Jackson, APRN

Kenneth Kester, PharmD, JD

Dale Michels, MD (Chair)

Debra Parsow (public member)

Roger Reamer, MBA (hospital administrator)

Rich Robinson, PE

Jeromy Warner, PsyD, LP

### **Meetings Held**

The Meeting of the Credentialing Review Committee of the Board, Held January 9, 2014

The Meeting of the Full Board of Health, Held January 27, 2014

## **Part Two: Summary of Recommendations on the Proposal**

### **Summary of the Technical Committee Recommendations**

The committee members unanimously recommended approval of the dental anesthesia proposal.

### **Summary of the Recommendations of the Nebraska State Board of Health**

#### **Actions Taken on the Entire Proposal:**

The Board members recommended approval of the proposal.

#### **Ancillary Recommendations:**

The Board members approved the following ancillary recommendation:

That the Board of Health encourage the Board of Dentistry to ensure that the content of the training courses to be used to train dentists in anesthesia procedures are consistent with current American Dental Association guidelines. Additionally, there should be a recertification process to reflect ongoing guideline changes.

## **Part Three: Summary of the Dental Anesthesia Proposal**

The proposal would eliminate the requirement that dentists must have a permit to administer nitrous oxide, but would require them to acquire permits to provide other types of sedation. Currently, dentists are only required to have a permit to administer nitrous oxide.

The proposal would require dentists to comply with current American Dental Association standards and guidelines for anesthesia. Current Nebraska requirements do not comply with these standards and guidelines. The proposal would accomplish this by establishing the following requirements for dentists, depending on the level of sedation to be utilized:

- A Minimal Sedation Permit would be required for sedation procedures that provide an amount of sedation that is greater than nitrous oxide but less than that provided under moderate sedation (see 'Moderate Sedation', below). The proposal would require each permit holder to take at least six hours of continuing education directly related to the administration and management of sedation in a dental office every two years. They would be required to hold a valid certificate in basic life support for healthcare providers.
- A Moderate Sedation Permit would be required for a level of sedation beyond minimal sedation in which a patient is brought to a drug-induced depressive state. For this permit, the dentist would be required to have advanced cardiac life support training, basic life support training, and receive at least six hours of continuing education training directly related to the administration and management of sedation in a dental office every two years.
- A Deep Sedation Permit, sometimes called a General Sedation Permit, would require advanced education and training in sedation, advanced life support training, basic life support training, and six hours of continuing education every two years.

The applicants stated that these requirements would provide greater assurance that dentists receive sufficient education and training to be competent in administering sedation.

The original proposal was amended by deleting all references to dental auxiliaries. **(The full text of the current proposal can be found on the credentialing review program link at <http://dhhs.ne.gov/licensure/Pages/credentialing-review.aspx>)**

## **Part Four: Discussion on the Issues by the Board Members**

### **Comments by John Tenny, DPM, Chairperson of the Dental Anesthesia Technical Review Committee**

Dr. Tenny briefly summarized the work of his committee. He informed the Board members that the Board of Dentistry is the applicant group for this proposal, and that this board brought this proposal forward because of the need to update Nebraska's statutes in the area of dental sedation to better protect dental patients.

Dr. Tenny informed the Board members that the original proposal included provisions on dental auxiliaries. However, early in the review these provisions were removed from the proposal by the applicant group because they wanted a review focused solely on the issues of dental anesthesia.

Dr. Tenny stated that the technical committee members were supportive of the proposed education and training guidelines for dental anesthesia throughout their review process.

### **Comments by Representatives of the Applicant Group**

Dr. Charles Bauer, DDS, speaking on behalf of the applicant group, stated that the Board of Dentistry is concerned about the safety of patients under the current situation. Dr. Bauer stated that Nebraska is lagging behind the rest of the nation in ensuring the safety of dental anesthesia procedures. He stated that this is why it is so important that Nebraska act to adopt the American Dental Association's guidelines for dental sedation. He stated that adopting these guidelines would ensure that all dentists in our state receive the necessary education and training to administer dental sedation procedures safely and effectively.

### **Comments by Those with Concerns about the Proposal**

Debra Schardt, RDH, speaking on behalf of the Nebraska Dental Hygienists' Association, expressed concern about the removal of the dental auxiliary provisions from the original dental anesthesia proposal. Ms. Schardt stated that this was done without clear explanation. She went on to state that there are serious issues in Nebraska vis-à-vis the role of dental auxiliaries in the provision of dental anesthesia, and that these issues needed to be addressed by the dental anesthesia proposal. She commented that wording in the proposal indicates that monitoring of some dental sedation procedures would be provided by "appropriately trained persons," but that there is no clarification of the meaning of this wording.

Dr. Discoe asked the applicants to explain why they removed the dental auxiliary components from their proposal. Dr. Bauer responded that oral surgeons informed the Board of Dentistry that they would oppose the proposal as long as the dental auxiliary components remain in it. He went on to state that, given the controversial nature of the dental auxiliary components in the original proposal, the Board of Dentistry decided that

it would be better to deal with the auxiliary issues at a later time rather than risk further delay in getting the ADA guidelines for dental anesthesia reviewed and acted upon.

Dr. Hopp asked the applicants whether they could have addressed concerns about dental auxiliaries by proposing that they be required to get training in certain anesthesia procedures. Dr. Bauer responded that a dentist cannot require that an unlicensed dental auxiliary get additional training. He informed the Board members that the role of dental auxiliaries in dental anesthesia is limited to the monitoring of nitrous oxide sedation and minimal sedation. Moderate and deep sedation procedures require the utilization of more highly trained and educated professionals such as sedation nurses, for example. Dr. Discoe asked Dr. Bauer if a patient could slide from moderate sedation into deep sedation. Dr. Bauer responded that this is a real danger under certain circumstances, and that this is why all involved in such procedures need to be very well trained.

### **Discussion by the Board Members**

Dr. Discoe expressed concern that the proposal does not provide information about the details of the proposed education and training to be used to upgrade dental anesthesia practice. Dr. Tenny responded to this concern by stating that he is more concerned about dentists getting access to this training than with the details of this training. He went on to state that, during their review of these issues, the technical committee members did not question the details of the proposed new education and training, and indicated that they trusted the Board of Dentistry to ensure that the new courses and training would follow from the standards defined by the American Dental Association. A spokesperson for the applicant group responded to Dr. Discoe's concerns by stating that the rules and regulations will address the details of the new course and the training. Dr. Tenny commented that the committee members were informed that the course and the training regimen have already been created. All that is needed is legislation that mandates it for all dentists in Nebraska.

Dr. Discoe commented that there is no assurance that the training course in question actually satisfies the standards of the American Dental Association, and that he would have liked to have been able to examine the details of this course himself. He commented on the 'on-line' component of the proposed continuing education provision by stating that such courses are often very inadequate. An applicant representative responded that the 'on-line' component of this continuing education course would occur only after the trainee has completed all of the 'hands-on' training.

Dr. Tenny commented that detailing this education and training is not the job of the applicant group, rather, it is the job of the Board of Dentistry. He added that the purpose of credentialing review is to chart out the broader policy implications of issues rather than attempting to define specific training details.



## **Part Five: Recommendations of the Board of Health**

### **Actions Taken on the Entire Proposal:**

The Board members took the following action on the proposal: Voting to approve the proposal were Discoe, Fleming, Jackson, Kester, Michels, Salansky, Parsow, Tennity, Warner, Westerman, and Wills. Voting against approval was Hopp. By this action the Board members recommended approval of the proposal.

### **Ancillary Recommendations:**

The Board members took action on the following ancillary recommendation advanced to them by their Credentialing Review Committee:

That the Board of Health encourage the Board of Dentistry to ensure that the content of the training courses to be used to train dentists in anesthesia procedures are consistent with current American Dental Association guidelines. Additionally, there should be a recertification process to reflect ongoing guideline changes.

Voting to approve this ancillary recommendation were Discoe, Fleming, Jackson, Kester, Michels, Salansky, Parsow, Tennity, Warner, Westerman, and Wills. By this action the Board members recommended in favor of this ancillary recommendation.