

Chapter 28. Board of Dental Examiners.

The article heading of 12 AAC 28, Article 1 is changed to read:

**Article 1. Administration of Deep Sedation, General Anesthesia,
Moderate Sedation, and Minimal Sedation.**

12 AAC 28.010 is repealed and readopted to read:

12 AAC 28.010. Permit requirements for use of deep sedation or general anesthesia.

(a) Before administering deep sedation or general anesthesia a dentist licensed under AS 08.36 must have a deep sedation or general anesthesia permit issued by the board.

(b) An applicant for an initial or renewed permit to administer deep sedation or general anesthesia must

(1) submit a completed application on a form provided by the board;

(2) submit a dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with all applicable statutes and regulations;

(3) submit, on a form provided by the board, a dated and signed affidavit attesting that the dentist's facility meets the requirements of this chapter for the administration of deep sedation or general anesthesia;

(4) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);

(5) provide proof of current certification in advanced resuscitative techniques with hands-on simulated airway and megacode training for healthcare providers, including basic electrocardiographic interpretation; qualifying certification for an applicant who seeks to treat patients 13 years of age or older includes the American Heart Association's Advanced Cardiac

Life Support (ACLS) for Health Professionals; qualifying certification for an applicant who seeks to treat patients younger than 13 years of age includes Pediatric Advanced Life Support (PALS) for Health Professionals; an applicant who seeks to treat patients of any age must also be certified in both ACLS for Health Professionals and PALS for Health Professionals or must be certified in equivalent qualifying certifications under this paragraph, one for advanced cardiac life support for health professionals and one for pediatric advanced life support for health professionals; and

(6) submit the applicable fees specified in 12 AAC 02.190.

(c) In addition to meeting the requirements of (b) and (d) of this section, an applicant for an initial permit to provide deep sedation or general anesthesia must provide documentation that the applicant

(1) is a member of the American Association of Oral and Maxillofacial Surgery;

(2) successfully completed an advanced educational program in oral maxillofacial surgery accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association; or

(3) successfully completed an advanced educational program in dental anesthesiology accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association.

(d) In addition to meeting the requirements of (b) and (c) of this section, an applicant for an initial permit to provide deep sedation or general anesthesia must provide documentation that

(1) within three years immediately before application, the applicant completed training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation;

(2) if more than three years but less than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant completed all continuing education that would have been required for a deep sedation or general anesthesia permit under this section;

(3) if more than three years but less than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant completed a comprehensive review course approved by the board;

(4) if more than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant holds a permit for general anesthesia or deep sedation from another jurisdiction where the applicant is also licensed to practice dentistry and where the applicant completed at least 25 anesthesia cases at the requested permit level not earlier than the 12 months immediately preceding application; or

(5) demonstrates current competency to the satisfaction of the board that the applicant has adequate sedation or anesthesia skill to safely deliver deep sedation or general anesthesia services to the public.

(e) In addition to meeting the requirements of (b) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer deep sedation or general anesthesia must

(1) during each biennial licensing period participate in four or more contact hours of continuing education that relates specifically to hands-on advanced airway management or general anesthesia; if the permit holder provides anesthesia for patients younger than 13 years of age, the course must be a pediatric course;

(2) during each biennial licensing period participate in eight contact hours of continuing education that focuses on one or more of the following:

(A) physical evaluation;

(B) medical emergencies;

(C) monitoring and use of monitoring equipment;

(D) pharmacology of drugs and agents used in deep sedation and general anesthesia;

(3) complete at least 50 general anesthesia or deep sedation cases each biennial licensing period; and

(4) maintain continuing education records that can be audited, including course titles, instructors, dates attended, sponsors, and number of contact hours for each course.

(f) A dentist who has met the requirements of this section to administer deep sedation or general anesthesia to patients younger than 13 years of age will be issued a permit that so indicates.

(g) A permit to administer deep sedation and general anesthesia

(1) will be renewed when the dentist's license to practice is renewed if the dentist demonstrates continued compliance with AS 08.36 and this chapter; and

(2) expires on the date the dentist's license expires.

(h) For purposes of this section,

(1) one contact hour equals 50 minutes of instruction;

(2) one academic semester credit hour equals 15 contact hours;

(3) one academic quarter credit equals 10 contact hours; and

(4) one continuing education credit equals one contact hour.

(i) Credit is given only for class hours and not hours devoted to class preparation. (Eff. 4/10/70, Register 34; am 5/29/98, Register 146; am 6/24/2012, Register 202; am 12/15/2013, Register 208; am 4/14/2018, Register 226)

Authority:	AS 08.01.065	AS 08.36.100	AS 08.36.234
	AS 08.36.070	AS 08.36.110	AS 08.36.250

12 AAC 28 is amended by adding a new section to read:

12 AAC 28.015. Permit requirements for use of moderate sedation, or for use of minimal sedation for a patient younger than 13 years of age. (a) Unless exempt under 12 AAC 28.065, before administering moderate sedation to a patient, or minimal sedation to a patient younger than 13 years of age, a dentist licensed under AS 08.36 must have a moderate sedation permit issued by the board.

(b) The requirement to obtain a permit to administer moderate or minimal sedation under this section does not apply to a dentist currently permitted under 12 AAC 28.010 to administer deep sedation and general anesthesia.

(c) A dentist who holds a permit under this section may not administer or employ an agent or technique that has so narrow a margin for maintaining consciousness that the agent or technique is most likely to produce deep sedation or general anesthesia. These agents include ketamine, propofol, brexival, and sodium pentothal.

(d) An applicant for an initial or renewed permit to administer moderate or minimal sedation under this section must

- (1) submit a completed application on a form provided by the board;
- (2) submit a dated and signed affidavit stating that the information provided is

true, and that the dentist has read and complied with all applicable statutes and regulations;

(3) submit, on a form provided by the board, a dated and signed affidavit attesting that the dentist's facility meets the requirements of this chapter for the administration of moderate or minimal sedation under this section;

(4) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);

(5) provide proof of current certification in advanced resuscitative techniques with hands-on simulated airway and megacode training for healthcare providers, including basic electrocardiographic interpretation; qualifying certification for an applicant who seeks to treat patients 13 years of age and older includes the American Heart Association's Advanced Cardiac Life Support (ACLS) for Health Professionals; qualifying certification for an applicant who seeks to treat patients younger than 13 years of age includes Pediatric Advanced Life Support (PALS) for Health Professionals; an applicant who seeks to treat patients of any age must also be certified in both ACLS for Health Professionals and PALS for Health Professionals or must be certified in equivalent qualifying certifications under this paragraph, one for advanced cardiac life support for health professionals and one for pediatric advanced life support for health professionals; and

(6) submit the applicable fees specified in 12 AAC 02.190.

(e) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate sedation to a patient who is at least 13 years of age under this section must provide documentation that the applicant completed either

(1) training in moderate sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, as adopted by the American Dental

Association (ADA) House of Delegates, October 2016, adopted by reference; the applicant must complete the training required under this paragraph while enrolled in

(A) a dental program accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association; or

(B) a post-doctoral university or teaching hospital program; or

(2) a board-approved continuing education course in sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, adopted by reference in (1) of this subsection; the course must consist of a minimum of 60 hours of instruction plus administration of sedation for at least 20 individually managed patients per participant to establish competency and clinical experience in moderate sedation and management of a compromised airway.

(f) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate or minimal sedation to a patient who is younger than 13 years of age under this section must provide documentation that the applicant has completed a Commission on Dental Accreditation (CODA) accredited residency in pediatric dentistry or sufficient training in pediatric moderate sedation as determined by the board. The applicant must provide proof of administration of sedation for at least 20 individually managed patients younger than 13 years of age to establish competency and clinical experience in management of a compromised airway.

(g) In addition to meeting the requirements of (d) and (e) of this section, or (f) of this section if administering moderate or minimal sedation to a patient who is younger than 13 years of age, an applicant for an initial permit to provide moderate sedation and minimal sedation under this section must provide documentation that

(1) within three years immediately before application, the applicant completed training or education as required in this section in moderate sedation;

(2) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed all continuing education that would have been required for a permit under this section;

(3) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed a comprehensive review course approved by the board in moderate sedation;

(4) if more than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant holds a permit for moderate sedation from another jurisdiction where the applicant is also licensed to practice dentistry and where the applicant completed at least 25 anesthesia cases at the moderate sedation level not earlier than the 24 months immediately preceding application; or

(5) demonstrates current competency to the satisfaction of the board that the applicant has skill in moderate sedation to safely deliver moderate sedation services to the public.

(h) In addition to meeting the requirements of (d) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer moderate or minimal sedation under this section must

(1) during each biennial licensing period participate in four or more contact hours of continuing education that relates specifically to hands-on advanced airway management; if the permit holder provides moderate or minimal sedation for patients younger than 13 years of age, the course must be a pediatric course; contact hours earned from certification in health care

provider basic life support (BLS), advanced cardiac life support (ACLS), and pediatric advanced life support (PALS) courses may be used to meet the continuing education requirements for obtaining or renewing a permit to administer moderate or minimal sedation under this section;

(2) during each biennial licensing period participate in four contact hours of continuing education that focuses on one or more of the following:

- (A) venipuncture;
- (B) intravenous sedation;
- (C) enteral sedation;
- (D) physiology;
- (E) pharmacology;
- (F) nitrous oxide analgesia;
- (G) patient evaluation, patient monitoring, or medical emergencies;

(3) complete at least 25 moderate sedation cases each biennial renewal period;

and

(4) maintain continuing education records that can be audited, including course titles, instructors, dates attended, sponsors, and number of contact hours for each course.

(i) A dentist who holds a permit for parenteral sedation that the board issued before April 14, 2018 will be issued a moderate sedation permit immediately.

(j) A dentist who has met the requirements of this section to administer moderate or minimal sedation to patients younger than 13 years of age will be issued a permit that so indicates.

(k) A permit to administer moderate or minimal sedation under this section

(1) will be renewed when the dentist's license to practice is renewed if the dentist

demonstrates continued compliance with AS 08.36 and this chapter; and

(2) expires on the date the dentist's license expires.

(l) For purposes of this section,

(1) one contact hour equals 50 minutes of instruction;

(2) one academic semester credit hour equals 15 contact hours;

(3) one academic quarter credit equals 10 contact hours; and

(4) one continuing education credit equals one contact hour.

(m) Credit is given only for class hours and not hours devoted to class preparation. (Eff. 4/14/2018, Register 226)

Authority: AS 08.01.065 AS 08.36.100 AS 08.36.234
 AS 08.36.070 AS 08.36.110 AS 08.36.250

Editor's note: A copy of the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, adopted by reference in 12 AAC 28.015, or an electronic equivalent may be obtained by contacting the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611-2678; Internet address:
http://www.ada.org/en/~media/ADA/Advocacy/Files/anesthesia_use_guidelines.

12 AAC 28.030 is repealed and readopted to read:

12 AAC 28.030. Persons other than permit holders. (a) In addition to a dentist holding a valid permit under 12 AAC 28.010 or 12 AAC 28.015, the following persons may administer deep sedation, general anesthesia, or moderate sedation:

(1) a certified registered nurse anesthetist with a valid license under AS 08.68 and 12 AAC 44 from the Board of Nursing;

(2) a physician with a valid license under AS 08.64 and 12 AAC 40 from the State Medical Board to practice anesthesiology.

(b) A dentist employing or collaborating with a person described in (a)(1) or (2) of this section must establish a written agreement with that person to guarantee that, when deep sedation, general anesthesia, or moderate sedation is provided, all facility, equipment, monitoring, and training requirements for all personnel under this chapter have been met. The dentist shall provide the written agreement to the board.

(c) The dentist employing or collaborating with a person described in (a)(1) or (2) of this section must

(1) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);

(2) provide all dental treatment and ensure that the person described in (a)(1) or (2) of this section remains in the dental facility until the patient receiving anesthesia or sedation services is discharged;

(3) ensure that all sedation and anesthesia records provided by the person described in (a)(1) or (2) of this section are maintained as a permanent part of the patient's treatment record; and

(4) notify the board at the initiation of the employment or collaboration by filing notice of the written agreement, on a form provided by the board; the dentist must notify the board of any amendments to the agreement when a dental license is renewed. (Eff. 4/10/70, Register 34; am 6/24/2012, Register 202; am 4/14/2018, Register 226)

Authority: AS 08.36.070

12 AAC 28.040 is repealed and readopted to read:

12 AAC 28.040. Informed written consent. Before administering deep sedation, general anesthesia, or moderate sedation, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall

(1) discuss with the patient, or with the patient's parent, legal guardian, or caregiver if the patient is younger than 13 years of age, the nature and objectives of the sedation and anesthesia along with the risks, benefits, and alternatives;

(2) obtain informed written consent of the patient or of the parent or legal guardian; and

(3) maintain a copy of the informed written consent in the patient's permanent record. (Eff. 4/10/70, Register 34; am 12/15/2013, Register 208; am 4/14/2018, Register 226)

Authority: AS 08.36.070

12 AAC 28.050 is repealed and readopted to read:

12 AAC 28.050. Medical history. (a) Before administering deep sedation, general anesthesia, or moderate sedation to a patient, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall

(1) obtain and record the patient's medical history, including

(A) a description of all current treatments;

(B) all current medications and dosages;

(C) assessment of the patient's body mass index (BMI);

(D) impending operations;

(E) pregnancies; and

(F) other information that may be helpful to the person administering the sedation or anesthesia; and

(2) record the questions asked of and answers received from the patient, parent, legal guardian, or caregiver, signed by the patient, parent, legal guardian, or caregiver, as a permanent part of the patient's treatment record.

(b) The dentist is not required to make a medical examination of the patient and draw medical diagnostic conclusions. If the dentist suspects a problem and calls in a physician for an examination, the dentist may rely upon the physician's conclusion and diagnosis. (Eff. 4/10/70, Register 34; am 12/15/2013, Register 208; am 4/14/2018, Register 226)

Authority: AS 08.36.070

12 AAC 28.060 is repealed and readopted to read:

12 AAC 28.060. Requirements for administering deep sedation, general anesthesia, moderate sedation, or minimal sedation for a patient younger than 13 years of age. (a) The document *Guidelines for the Use of Sedation and General Anesthesia by Dentists*, as adopted by the American Dental Association (ADA) House of Delegates, October 2016, is adopted by reference as the standards for administering deep sedation, general anesthesia, and moderate sedation to patients 13 years of age and older and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.

(b) The document *Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures*, developed and endorsed by the American Academy of Pediatrics and the American Academy of Pediatric Dentistry, adopted in 2006 and reaffirmed in 2011, is adopted by reference as the standards for

administering deep sedation, general anesthesia, moderate sedation, and minimal sedation to patients younger than 13 years of age and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.

(c) When a patient younger than 13 years of age requires sedation or anesthesia, a sedating medication may not be prescribed for or administered to that patient before the patient arrives at the dentist's facility.

(d) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years old is administered, the dentist

(1) shall record baseline vital signs before administration of a controlled substance and before discharge, unless the patient's behavior prevents this determination; in this paragraph "controlled substance" has the meaning given in AS 11.71.900;

(2) shall continually monitor a patient's heart rate, blood pressure, and respiration using electrocardiographic monitoring, pulse oximetry, a blood pressure monitoring device, and a respiration monitoring device;

(3) shall record sedation and anesthesia records in a timely manner; the records must include

(A) blood pressure;

(B) heart rate;

(C) respiration;

(D) blood oxygen saturation;

(E) drugs administered, including dosages, the time that drugs were administered, and the route of administration;

(F) the length of the procedure;

(G) the patient's temperature; if depolarizing medications or volatile anesthetics are administered, temperature must be monitored constantly; and

(H) any complications from anesthesia or sedation;

(4) shall stop the dental procedure if a patient enters a deeper level of sedation than the dentist is permitted to provide until the patient returns to, and is stable at, the intended level of sedation; while returning the patient to the intended level of sedation, the patient's pulse, respiration, blood pressure, and pulse oximetry must be monitored and recorded at least every five minutes;

(5) may not discharge a patient until the person who administered the sedation or anesthesia, or another practitioner qualified to administer the same level of sedation or anesthesia, determines that the patient's level of consciousness, oxygenation, ventilation, and circulation are satisfactory for discharge and vital signs have been taken and recorded;

(6) shall give postoperative instructions verbally and in writing; the written instructions must include a 24-hour emergency telephone number that directly calls the dental provider;

(7) shall discharge the patient to a responsible individual who has been instructed with regard to the patient's care; and

(8) shall make a discharge entry in the patient's record describing the patient's condition upon discharge and the responsible party to whom the patient was discharged.

(e) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years of age is administered, the dentist's facility shall

(1) have an operating table or chair that permits the patient to be positioned so the operating team can maintain the airway, quickly alter patient position in an emergency, and

provide a firm platform for the administration of basic life support;

(2) have a lighting system that is adequate to permit evaluation of the patient's skin and mucosal color, and a backup lighting system of sufficient intensity to permit conclusion of the operation when power fails;

(3) have suction equipment capable of aspirating gastric contents from the mouth and pharyngeal cavities, and a backup suction device that does not depend on power supply from the facility;

(4) have an oxygen delivery system with adequate full face masks and appropriate connectors that is capable of delivering high flow oxygen to the patient under positive pressure, and an adequate portable backup system;

(5) have a recovery area that has available oxygen, adequate lighting, suction, and electrical outlets, though the recovery area can be the operating area;

(6) have a defibrillator or automated external defibrillator (AED) available and in reach within 60 seconds from any area where anesthesia or sedation is administered;

(7) have written basic emergency procedures established and maintain a staff of supervised personnel capable of handling procedures, complications, and emergency incidents; all personnel involved in patient care must hold a certification in healthcare professional cardiopulmonary resuscitation (CPR);

(8) conduct a training exercise at least two times each calendar year and log each exercise; the log must be signed and dated and must include

(A) the names and positions of facility personnel or practitioners present;

(B) proof of current certification in cardiopulmonary resuscitation (CPR), advanced cardiac life support (ACLS), or pediatric advanced life support (PALS) for

each person involved in patient care; and

(C) a completed checklist provided by the board, or an equivalent, to establish competency in handling procedures, complications, and emergency incidents;

(9) maintain the following equipment and drugs in the facility and available for immediate use:

(A) oral and nasal airways of various sizes;

(B) a supra-glottic airway device;

(C) a blood pressure cuff of appropriate size and stethoscope, or equivalent monitoring devices;

(D) a pulse oximeter;

(E) a respiratory monitoring device;

(F) adequate equipment to establish an intravenous infusion, including hardware and fluids;

(G) a narcotic antagonist;

(H) a corticosteroid;

(I) a bronchodilator;

(J) an anticholinergic;

(K) an antiarrhythmic;

(L) an antihistamine;

(M) a coronary artery vasodilator;

(N) a benzodiazepine antagonist;

(O) sterile needles, syringes, tourniquets, and tape;

(P) epinephrine;

(Q) an antiemetic; and

(R) 50 percent dextrose or other anti-hypoglycemic; and

(10) display a permit for moderate sedation, deep sedation, or general anesthesia and current dental license in a conspicuous place where the dentist practices. (Eff. 4/10/70, Register 34; am 6/24/2012, Register 202; am 12/15/2013, Register 208; am 4/14/2018, Register 226)

Authority: AS 08.36.070

Editor's note: A copy of the *Guidelines for the Use of Sedation and General Anesthesia by Dentists*, adopted by reference in 12 AAC 28.060, or an electronic equivalent may be obtained by contacting the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611-2678; Internet address:

http://www.ada.org/~media/ADA/Education%20and%20Careers/Files/anesthesia_use_guidelines.pdf

An electronic copy of the *Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures*, adopted by reference in 12 AAC 28.060, may be obtained from the American Academy of Pediatric Dentistry; Internet address: http://www.aapd.org/media/Policies_Guidelines/G_Sedation.pdf

12 AAC 28 is amended by adding new sections to read:

12 AAC 28.061. Additional requirements for administering deep sedation or general anesthesia. In addition to meeting the requirements of 12 AAC 28.060, when deep sedation or general anesthesia is administered,

(1) the dentist's facility must have an operating area large enough to adequately

accommodate the patient on a table or in an operating chair and permit an operating team consisting of at least three individuals to freely move about the patient;

(2) the dentist's facility must have a laryngoscope complete with an adequate selection of blades, spare batteries, and bulbs;

(3) the dentist's facility must have endotracheal tubes and appropriate connectors, a supra-glottic airway device, and other appropriate equipment necessary to do an intubation;

(4) the dentist's facility must have a tonsillar or pharyngeal suction tip adaptable to all outlets;

(5) the dentist's facility must have endotracheal tube forceps;

(6) the dentist's facility must have an electrocardiographic monitor;

(7) the dentist shall use an end-tidal carbon dioxide monitor to monitor respiration;

(8) the dentist's facility must have the following emergency equipment and drugs in the facility and available for immediate use:

(A) a vasopressor;

(B) a muscle relaxant;

(C) intravenous medications for treatment of cardiac arrest;

(D) an antihypertensive;

(E) an anticonvulsant; and

(F) dantrolene sodium or its equivalent if administering general anesthesia by means of inhalation;

(9) the provider administering deep sedation or general anesthesia shall establish and maintain a secured intravenous line throughout the procedure, unless poor patient

cooperation prevents placement or the ability to maintain the line;

(10) the provider administering deep sedation or general anesthesia shall remain in the operatory room to monitor the patient continuously until the patient is responsive and recovery care can be transferred to a staff member capable of handling procedures, complications, and emergency incidents related to the type of sedation or anesthesia used;

(11) the provider who administered deep sedation or general anesthesia, or another licensed practitioner qualified to administer the same level of sedation or anesthesia, shall remain on the premises of the dentist's facility until the patient has regained consciousness and is discharged; and

(12) if the deep sedation or general anesthesia provider is the treating dentist, the treatment team shall include a second trained person to monitor and observe the patient at all times during the procedure, and a third person to assist the dentist. (Eff. 4/14/2018, Register 226)

Authority: AS 08.36.070

12 AAC 28.062. Additional requirements for administering moderate sedation, or minimal sedation for a patient younger than 13 years of age. In addition to meeting the requirements of 12 AAC 28.060, when moderate sedation is administered to a patient of any age, or minimal sedation is administered to a patient younger than 13 years of age,

(1) the dentist's facility must have an operating area of size and design to permit access of emergency equipment and personnel and to permit effective emergency management;

(2) the dentist shall use an end-tidal carbon dioxide monitor or a pre-cordial stethoscope to monitor respiration; and

(3) the treatment team shall consist of the treating dentist and a second person to assist, monitor, and observe the patient; both the treating dentist and the second person shall be in the operating area with the patient throughout the dental procedure. (Eff. 4/14/2018, Register 226)

Authority: AS 08.36.070

12 AAC 28.065. Exceptions to permit requirements under 12 AAC 28.010 - 12 AAC 28.080. The requirement to obtain a permit under 12 AAC 28.010 or 12 AAC 28.015 does not apply to

(1) the administration of local anesthesia;

(2) the administration of nitrous oxide sedation to patients of any age if the delivery system for the nitrous oxide-oxygen contains a mechanism that 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;

(3) the administration of an oral medication to achieve minimal sedation if

(A) the patient is 13 years of age or older;

(B) the dose of the administered drug is within the United States Food and Drug Administration's (FDA) recommended dose as printed in that agency's approved labeling for unmonitored home use; the dentist may not use a second drug without obtaining a permit under 12 AAC 28.010 or 12 AAC 28.015, as applicable;

(C) the dose of the administered drug is used in combination with nitrous oxide or oxygen and does not exceed minimal sedation; and

(D) the patient is re-appointed if the intended level of minimal sedation is

not achieved; or

(4) the administration of deep sedation, general anesthesia, moderate sedation, or minimal sedation in a licensed hospital, a state-operated hospital, or a facility directly maintained or operated by the federal government. (Eff. 4/14/2018, Register 226)

Authority: AS 08.36.070 AS 08.36.315 AS 08.36.360

12 AAC 28.068. Inspections. (a) The board may require an on-site inspection of the dentist's facility where deep sedation, general anesthesia, or moderate sedation is administered.

(b) A dentist will be notified in writing if an on-site inspection is required and will be provided with information about how the board conducts an on-site inspection. A dentist shall cooperate in scheduling a timely inspection not later than 90 days after receiving notice of an inspection.

(c) A designee of the board or the board's investigator shall carry out the inspection.

(d) An inspection shall be conducted according to the guidelines provided in the *Office Anesthesia Evaluation Manual*, Eighth Edition, 2012, adopted by reference, and may include the evaluation of equipment, medications, patient records, documentation of personnel training, and other items as determined necessary by the board, the designee of the board, or the board's investigator.

(e) If a dentist maintains membership in the American Association of Oral and Maxillofacial Surgeons (AAOMS) and receives notification from the board that an on-site inspection is required, the board may accept reports that result from the periodic office examinations required by that association.

(f) If the equipment, facilities, or personnel training are inadequate to assure safe use of

sedation or anesthesia, the board will notify the dentist in writing and will conduct a follow-up inspection. If the board finds that the equipment, facilities, or trained personnel are still inadequate to assure safe use of sedation or anesthesia, the board will deny issuance of a permit under 12 AAC 28.010 or 12 AAC 28.015, immediately suspend a permit issued under 12 AAC 28.010 or 12 AAC 28.015, or order the dentist to immediately cease sedation or anesthesia services provided under 12 AAC 28.030.

(g) This section does not apply to investigations by the board, a designee of the board, or the board's investigator upon an allegation that a licensee has violated a provision of AS 08.32, AS 08.36, or this chapter. (Eff. 4/14/2018, Register 226)

Authority: AS 08.01.075 AS 08.01.087 AS 08.36.070

Editor's note: A copy of the *Office Anesthesia Evaluation Manual*, adopted by reference in 12 AAC 28.068, can be obtained by contacting the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611-2678.

12 AAC 28.070 is repealed and readopted to read:

12 AAC 28.070. Suspension or revocation of permit. The board will automatically suspend or revoke a permit under 12 AAC 28.010 or 12 AAC 28.015 upon the suspension or revocation of the holder's license to practice dentistry in the state. (Eff. 4/10/70, Register 34; am 4/14/2018, Register 226)

Authority: AS 08.36.070 AS 08.36.315 AS 08.36.320

12 AAC 28.080 is repealed and readopted to read:

12 AAC 28.080. Mandatory reporting. (a) If a dental patient dies or experiences

sedation or anesthesia complications that require hospitalization or emergency room care during or immediately after receiving sedation or general anesthesia, the dentist who treated the patient shall submit a written or electronic report of the incident to the board not later than 48 hours after learning of the death or hospitalization. The report must include

- (1) the name, age, and address of the patient;
- (2) the names of the dentist and of other personnel or providers present during the treatment;
- (3) the address of the facility where the treatment took place;
- (4) the medical history of the patient;
- (5) a description of the type of sedation or anesthetic that was used and the dosages of drugs administered to the patient;
- (6) a narrative description of the incident including approximate times and evolution of symptoms; and
- (7) as requested by the board, a designee of the board, or the board's investigator, additional information that is relevant to investigating the incident.

(b) Not later than 30 days after the receipt of a report required under (a) of this section, the board investigator may review the report, consult with a member of the board who is a dentist licensed under AS 08.36, and make a recommendation in writing as to whether further investigation by the board or the board's investigator should be made. The department will make a report of recommendations under this subsection at the next board meeting. If a recommendation by the department is that further investigation is not warranted, the department will make only a summary report. The board may accept the recommendation or request the department to make further investigations. (Eff. 4/10/70, Register 34; am 11/10/2001, Register

160; am 4/14/2018, Register 226)

Authority: AS 08.01.087 AS 08.36.070 AS 08.36.315

The article heading of 12 AAC 28, Article 3 is changed to read:

**Article 3. Administration of Local Anesthetic Agents and Nitrous Oxide Sedation
by Dental Hygienists.**

12 AAC 28 is amended by adding a new section to read:

12 AAC 28.325. Application for certification to administer nitrous oxide sedation.

The board will issue a certification to administer nitrous oxide sedation under direct or indirect supervision to a dental hygienist licensed in this state if the hygienist

- (1) submits a completed, notarized application on the form provided by the department;
- (2) pays the applicable fee required in 12 AAC 02.190; and
- (3) provides written verification of successful completion of an accredited college or university course of instruction in the administration of nitrous oxide, approved by the board under 12 AAC 28.345. (Eff. 4/14/2018, Register 226)

Authority: AS 08.01.065 AS 08.32.110 AS 08.36.070

12 AAC 28.330(3) is amended to read:

- (3) a course outline that verifies inclusion of the subjects and procedures required under
 - (A) 12 AAC 28.340 if certification to administer local anesthesia is

sought; or

(B) 12 AAC 28.345, if certification to administer nitrous oxide sedation is

sought; and

(Eff. 5/31/81, Register 78; am 8/1/82, Register 83; am 12/15/2013, Register 208; am 4/14/2018,

Register 226)

Authority: AS 08.32.110 AS 08.36.070

12 AAC 28 is amended by adding a new section to read:

12 AAC 28.345. Requirements for course of instruction for administering nitrous oxide. (a) To satisfy the requirements for a certification under 12 AAC 28.325, a course of instruction for administering nitrous oxide must be provided by an organization accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association or approved by the board.

(b) To satisfy the requirements for certification under 12 AAC 28.325, a course of instruction for administering nitrous oxide must include

(1) a minimum of three hours of clinical instruction sufficient to establish the ability to

(A) inspect, operate, and decontaminate nitrous oxide delivery and scavenging systems;

(B) properly induce nitrous oxide sedation; and

(C) recognize and counteract complications;

(2) a minimum of three hours of didactic instruction, including

(A) sedation techniques;

- (B) physiology of respiration and pharmacology of nitrous oxide;
- (C) nitrous oxide machines;
- (D) induction techniques; and
- (E) complications and their management; and

(3) procedures for determining whether the dental hygienist has acquired the necessary knowledge and proficiency to administer nitrous oxide sedation. (Eff. 4/14/2018, Register 226)

Authority: AS 08.32.110 AS 08.36.070

12 AAC 28.350 is repealed and readopted to read:

12 AAC 28.350. Expiration of certification. (a) A certification to administer local anesthetic agents or nitrous oxide sedation expires on the date the dental hygienist's license expires or is revoked or suspended.

(b) A certification to administer local anesthesia or nitrous oxide sedation remains active as long as the holder's dental hygiene license is active and in good standing.

(c) The board will notify a dental hygienist of initial certification to provide local anesthesia or nitrous oxide sedation and thereafter certification will be listed on the dental hygiene license. (Eff. 5/31/81, Register 78; am 4/14/2018, Register 226)

Authority: AS 08.32.110 AS 08.36.070 AS 08.36.315

12 AAC 28.360 is amended to read:

12 AAC 28.360. Registry. The board will maintain a registry of all board approved courses of instruction and all dental hygienists certified to administer local anesthetic agents or

nitrous oxide sedation. (Eff. 5/31/81, Register 78; am 4/14/2018, Register 226)

Authority: AS 08.32.110 AS 08.36.070

Article 6. Parenteral Sedation.

Section

600. Repealed

610. Repealed

620. Repealed

630. Repealed

640. Repealed

12 AAC 28.600 is repealed:

12 AAC 28.600. Administration of parenteral sedation. Repealed. (Eff. 4/13/91, Register 118; am 6/24/2012, Register 202; repealed 4/14/2018, Register 226)

12 AAC 28.610 is repealed:

12 AAC 28.610. Parenteral sedation permit. Repealed. (Eff. 4/13/91, Register 118; am 12/5/2009, Register 192; readopt 12/15/2013, Register 208; repealed 4/14/2018, Register 226)

12 AAC 28.620 is repealed:

12 AAC 28.620. Education, training, and certification requirements. Repealed. (Eff. 4/13/91, Register 118; am 4/18/2002, Register 162; repealed 4/14/2018, Register 226)

12 AAC 28.630 is repealed:

12 AAC 28.630. Equipment, facilities, and staff standards. Repealed. (Eff. 4/13/91, Register 118; am 6/24/2012, Register 202; am 3/11/2016, Register 217; repealed 4/14/2018, Register 226)

12 AAC 28.640 is repealed:

12 AAC 28.640. Mandatory reporting. Repealed. (Eff. 4/13/91, Register 118; am 11/10/2001, Register 160; readopt 12/15/2013, Register 208; repealed 4/14/2018, Register 226)

12 AAC 28.720 is repealed:

12 AAC 28.720. Administration of nitrous oxide. Repealed. (Eff. 6/17/98, Register 146; am 1/28/2000, Register 153; repealed 4/14/2018, Register 226)

12 AAC 28.990(a) is repealed and readopted to read:

(a) In this chapter,

(1) "administer local anesthetic agents" means to administer an agent that induces local anesthesia and to administer that agent by injection, both infiltration and block, limited to the oral cavity, for the purposes of pain control;

(2) "American Association of Dental Examiners Clearinghouse for Board Actions" means the American Association of Dental Examiners information source described in AS 08.36.110(a)(1)(F);

(3) "board" means the Board of Dental Examiners;

(4) "coronal polishing," within the meaning given in AS 08.36.370, means

removal of supragingival plaque and stains from teeth without calculus, including the removal of soft deposits, such as materia alba, plaque, and stains from the anatomical crowns of the teeth;

(5) "deep sedation" means a drug-induced depression of consciousness during which

(A) patients cannot be easily aroused but respond purposefully following repeated or painful stimulation;

(B) the ability to independently maintain ventilatory function may be impaired;

(C) patients may require assistance in maintaining a patent airway, and spontaneous ventilation may be inadequate; and

(D) cardiovascular function is usually maintained;

(6) "department" means the Department of Commerce, Community, and Economic Development;

(7) "facility" means a dental practice, office, or clinic that is subject to the requirements of AS 08.36.367;

(8) "general anesthesia" means a drug-induced loss of consciousness during which

(A) patients are not arousable, even by painful stimulation;

(B) the ability to independently maintain ventilatory function is often impaired;

(C) patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function; and

(D) cardiovascular function may be impaired;

(9) "local anesthesia" means the elimination of sensation, especially pain, in one part of the body by the topical application or regional injection of a drug;

(10) "minimal sedation" means a minimally depressed level of consciousness, produced by a pharmacological method, in which

(A) the patient retains the ability to independently and continuously maintain an airway and respond normally to tactile stimulation and verbal command; and

(B) although cognitive function and coordination may be modestly impaired, ventilatory and cardiovascular functions are unaffected;

(11) "moderate sedation" means a drug-induced depression of consciousness, during which

(A) a patient responds purposefully to verbal commands, either alone or accompanied by light tactile stimulation;

(B) no interventions are required to maintain a patent airway, and spontaneous ventilation is adequate; and

(C) cardiovascular function is usually maintained;

(12) "nitrous oxide sedation" means an induced, controlled state of minimal sedation, produced solely by the inhalation of a combination of nitrous oxide and oxygen in which the patient retains the ability to independently and continuously maintain an airway and to respond purposefully to physical stimulation and to verbal command;

(13) "radiological equipment" means a control panel and associated radiological tubeheads capable of exposing a dental patient to x-rays;

(14) "restorative function" means under the direct supervision of a licensed dentist, to place restorations into a cavity prepared by the licensed dentist and thereafter carve,

contour, and adjust contacts and occlusion of the restoration.

(Eff. 5/31/81, Register 78; am 4/13/91, Register 118; am 11/7/99, Register 152; am 3/30/2001, Register 157; am 1/15/2003, Register 165; am 7/25/2010, Register 195; am 3/18/2011, Register 197; am 12/15/2013, Register 208; am 4/14/2018, Register 226)

Authority: AS 08.32.085 AS 08.36.342 AS 08.36.346
 AS 08.36.070 AS 08.36.344