# FINAL REGULATIONS Virginia Board of Dentistry Regulatory Review

#### 18 VAC 60-20-10. Definitions.

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"ADA" means the American Dental Association.

"Advertising" means a representation or other notice given to the public or members thereof, directly or indirectly, by a dentist on behalf of himself, his facility, his partner or associate, or any dentist affiliated with the dentist or his facility by any means or method for the purpose of inducing purchase, sale or use of dental methods, services, treatments, operations, procedures or products, or to promote continued or increased use of such dental methods, treatments, operations, procedures or products.

"Analgesia" means the diminution or elimination of pain in the conscious patient.

"Anxiolysis" means the diminution or elimination of anxiety through the use of pharmacological agents in a dosage that does not cause depression of consciousness.

"Approved schools" means those dental schools, colleges, departments of universities or colleges, or schools of dental hygiene *programs* currently accredited by the Commission on Dental Accreditation of the American Dental Association.

"Competent instructor" means any person appointed to the faculty of a dental school, college or department or a university or a college who holds a license or teacher's

license to practice dentistry or dental hygiene in the Commonwealth.

"Conscious sedation" means a minimally depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal commands, produced by a pharmacologic or nonpharmacologic method pharmacological or nonpharmacological methods, including inhalation, parenteral, transdermal or enteral, or a combination thereof.

"Deep sedation/general anesthesia" means an induced state of depressed consciousness or unconsciousness accompanied by a complete or partial loss of protective reflexes, including the inability to continually maintain an airway independently and/or respond purposefully to physical stimulation or verbal command and is produced by a pharmacological or nonpharmacological method or a combination thereof.

"Dental assistant" means any unlicensed person under the supervision of a dentist who renders assistance for services provided to the patient as authorized under this chapter but shall not include an individual serving in purely a secretarial or clerical capacity.

"Direction" means the presence of the dentist evaluates the patient and is present for the evaluation, observation, advice, and control over the performance of dental services.

"Enteral" is any technique of administration in which the agent is absorbed through the gastrointestinal tract or oral mucosa (i.e., oral, rectal, sublingual).

"General anesthesia" means a controlled state of unconsciousness accompanied by partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command, produced by a pharmacologic or nonpharmacologic method, or combination thereof.

"General supervision" means that the dentist has evaluated the patient and issued a written order for the specific, authorized services to be provided by a dental hygienist when the dentist is not present in the facility while the services are being provided.

"Inhalation" is a technique of administration in which a gaseous or volatile agent, including nitrous oxide, is introduced into the pulmonary tree and whose primary effect is due to absorption through the pulmonary bed.

"Inhalation analgesia" means the inhalation of nitrous oxide and oxygen to produce a state of reduced sensibility to pain without the loss of consciousness.

"Local anesthesia" means the loss of sensation or pain in the oral cavity or its contiguous the maxillofacial or adjacent and associated structures generally produced by a topically applied agent or injected agent without causing the loss depressing the level of consciousness.

"Monitoring general anesthesia and conscious sedation" includes the following: recording and reporting of blood pressure, pulse, respiration, and other vital signs to the

attending dentist during the conduct of these procedures and after the dentist has induced a patient and established a maintenance level.

"Monitoring nitrous oxide oxygen inhalation analgesia" means making the proper adjustments of nitrous oxide machines at the request of the dentist during the administration of the sedation, and observing the patient's vital signs.

"Nitrous exide exygen inhalation analgesia" means the utilization of nitrous exide and exygen to produce a state of reduced sensibility to pain designating particularly the relief of pain without the loss of consciousness.

"Parenteral" means a technique of administration in which the agent is injected into tissues, either subcutaneous, sublingual, submucosal, intramuscular or intravenous drug bypasses the gastrointestinal tract (i.e., intramuscular, intravenous, intranasal, submuscosal, subcutaneous, or intraocular).

"Radiographs" means intraoral and extraoral x-rays of the hard and soft oral structures tissues to be used for purposes of diagnosis.

#### 18 VAC 60-20-16. Address of record.

At all times, each licensed dentist shall provide the board with a current, primary business address, and each dental hygienist shall provide a current resident mailing address. No post office box numbers are accepted. All required notices mailed by the board to any such licensee shall be validly given when mailed to the latest address given by the licensee. All changes of address shall be furnished to the board in writing within 30 days of such changes.

#### 18 VAC 60-20-20. License renewal and reinstatement.

A. Renewal fees. Every person holding an active or inactive license, a full-time faculty license, or a restricted volunteer license to practice dentistry or dental hygiene shall, on or before March 31, renew his license. Every person holding a teacher's license or a temporary permit to practice dentistry or dental hygiene shall, on or before June 30, renew his license.

- 1. The fee for renewal of an active license or permit to practice or teach dentistry shall be \$150, and the fee for renewal of an active license or permit to practice or teach dental hygiene shall be \$50.
- 2. The fee for renewal of an inactive license shall be \$75 for dentists and \$25 for dental hygienists.
- The fee for renewal of a restricted volunteer license shall be \$15.
- B. Late fees. Any person who does not return the completed form and fee by the deadline required in subsection A of this section shall be required to pay an additional late fee of \$50 for dentists and \$20 for dental hygienists. The board shall renew a license if the renewal form, renewal fee, and late fee are received within one year of the deadline required in subsection A of this section.
- C. Reinstatement fees and procedures. The license of any person who does not return the completed renewal form and fees by the deadline required in subsection A of this section shall automatically expire and become invalid and his practice of dentistry/dental hygiene shall be illegal.
  - Any person whose license has expired for more than one year and who wishes to reinstate such license shall submit

to the board a reinstatement application, the renewal fee and the reinstatement fee of \$225 for dentists and \$135 for dental hygienists.

- Practicing in Virginia with an expired license may subject the licensee to disciplinary action and additional fines by the board.
- 3. The executive director may reinstate such expired license provided that the applicant can demonstrate continuing competence, that no grounds exist pursuant to § 54.1-2706 of the Code of Virginia and 18 VAC 60-20-170 to deny said reinstatement, and that the applicant has paid the unpaid renewal fee, the reinstatement fee and any fines or assessments. Evidence of continuing competence shall include hours of continuing education as required by subsection H of 18 VAC 60-20-50 and may also include evidence of active practice in another state or in federal service or current specialty board certification.
- D. Reinstatement of a license previously revoked or indefinitely suspended. Any person whose license has been revoked shall submit to the board for its approval a reinstatement application and fee of \$750 for dentists and \$500 for dental hygienists. Any person whose license has been indefinitely suspended shall submit to the board for its approval a reinstatement application and fee of \$350 for dentists and \$250 for dental hygienists.

## 18 VAC 60-20-50. Requirements for continuing education.

A. After April 1, 1995, a dentist or a dental hygienist shall be required to have completed a minimum of 15 hours of

approved continuing education for each annual renewal of licensure.

- 1. Effective (one year after the effective date of this regulation), a dentist or a dental hygienist shall be required to maintain evidence of successful completion of training in basic cardiopulmonary resuscitation.
- 2. Effective (one year after the effective date of this regulation), a dentist who administers or a dental hygienist who monitors patients under general anesthesia, deep sedation or conscious sedation shall complete four hours every two years of approved continuing education directly related to administration or monitoring of such anesthesia or sedation as part of the hours required for licensure renewal.
- 3. Continuing education hours for dentists in excess of the number required for renewal may be transferred or credited to another the next renewal year for a total of not more than 15 hours.
- B. An approved continuing dental education program shall be relevant to the treatment and care of patients and shall be:
  - 1. Clinical courses in dentistry and dental hygiene; or
  - 2. Nonclinical subjects that relate to the skills necessary to provide dental or dental hygiene services and are supportive of clinical services (i.e., patient management, legal and ethical responsibilities, stress management). Courses not acceptable for the purpose of this subsection include, but are not limited to, estate planning, financial planning, investments, and personal health.

- C. Continuing education credit may be earned for verifiable attendance at or participation in any courses, to include audio and video presentations, which meet the requirements in subdivision B 1 of this section and which are given by one of the following sponsors:
  - American Dental Association and National Dental Association, their constituent and component/branch associations;
  - American Dental Hygienists' Association and National Dental Hygienists Association, their constituent and component/branch associations;
  - American Dental Assisting Association, its constituent and component/branch associations;
  - 4. American Dental Association specialty organizations, their constituent and component/branch associations;
  - American Medical Association and National Medical Association, their specialty organizations, constituent, and component/branch associations;
  - Academy of General Dentistry, its constituent and component/branch associations;
  - 7. Community colleges with an accredited dental hygiene program if offered under the auspices of the dental hygienist program;
  - 8. A college ; or university ; or hospital service which that is accredited by an accrediting agency approved by the U.S.

    Office Department of Education or a hospital or health care institution accredited by the Joint Commission on Accreditation of Health Care Organizations;

- The American Heart Association, the American Red Cross, the American Safety and Health Institute and the American Cancer Society;
- 10. A medical school which is accredited by the American Medical Association's Liaison Committee for Medical Education or a dental school or dental specialty residency program accredited by the Commission on Dental Accreditation of the American Dental Association;
- State or federal government agencies (i.e., military dental division, Veteran's Administration, etc.);
- 12. The Commonwealth Dental Hygienists' Society; or
- 13. The MCV Orthodontic and Research Foundation;
- 14. The Dental Assisting National Board; or
- 43. 15. Any other board-approved programs A regional testing agency (i.e., Central Regional Dental Testing Service, Northeast Regional Board of Dental Examiners, Southern Regional Testing Agency, or Western Regional Examining Board) when serving as an examiner.
- D. A licensee is exempt from completing continuing education requirements and considered in compliance on the first renewal date following his the licensee's initial licensure.
- E. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee, such as temporary disability, mandatory military service, or officially declared disasters.
- F. A licensee is required to provide information on compliance with continuing education requirements in his annual license

- renewal. Following the renewal period, the board may conduct an audit of licensees to verify compliance. Licensees selected for audit must provide original documents certifying that they have fulfilled their continuing education requirements by the deadline date as specified by the board.
- G. All licensees are required to maintain original documents verifying the date and subject of the program or activity. Documentation must be maintained for a period of four years following renewal.
- H. A licensee who has allowed his license to lapse, or who has had his license suspended or revoked, must submit evidence of completion of continuing education equal to the requirements for the number of years in which his license has not been active, not to exceed a total of 45 hours. Of the required hours, at least 15 must be earned in the most recent 12 months and the remainder within the 36 months preceding an application for reinstatement.
- I. Continuing education hours required by disciplinary board order shall not be used to satisfy the continuing education requirement for license renewal or reinstatement.
- J. Failure to comply with continuing education requirements may subject the licensee to disciplinary action by the board.

#### 18 VAC 60-20-60. Education.

A. Dental licensure. An applicant for dental licensure shall be a graduate and a holder of a diploma or a certificate from an accredited or approved a dental school program recognized accredited by the Commission on Dental Accreditation of the American Dental Association, which consists of either a predoctoral dental education program or at least a 12-month post-

doctoral advanced general dentistry program or a post-doctoral dental education program in any other specialty.

B. Dental hygiene licensure. An applicant for dental hygiene licensure shall have graduated from or have been issued a certificate by an accredited school or a program of dental hygiene recognized accredited by the Commission on Dental Accreditation of the American Dental Association.

#### 18 VAC 60-20-70. Licensure examinations.

#### A. Dental examinations.

- All applicants shall have successfully completed Part I and Part II of the examinations of the Joint Commission on National Dental Examinations prior to making application to this board.
- 2. All applicants to practice dentistry shall satisfactorily pass the complete board-approved examinations in dentistry. Applicants who successfully completed the board-approved examinations five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake the examinations or take board-approved continuing education unless they demonstrate that they have maintained continuous clinical, ethical and legal practice since passing the board-approved examinations for 48 of the past 60 months immediately prior to submission of an application for licensure.
- 3. If the candidate has failed any section of the a boardapproved examination three times, he the candidate shall complete a minimum of 14 hours of additional clinical training in each section of the examination to be retested in

order to be approved by the board to sit for the examination a fourth time.

#### B. Dental hygiene examinations.

- All applicants are required to successfully complete the dental hygiene examination of the Joint Commission on National Dental Examinations prior to making application to this board for licensure.
- 2. All applicants to practice dental hygiene shall successfully complete the board-approved examinations in dental hygiene, except those persons eligible for licensure pursuant to 18 VAC 60-20-80.
- 3. If the candidate has failed any section of the a board-approved examination three times, he the candidate shall complete a minimum of seven hours of additional clinical training in each section of the examination to be retested in order to be approved by the board to sit for the examination a fourth time.
- C. All applicants who successfully complete the board-approved examinations five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake the board-approved examinations or take board-approved continuing education unless they demonstrate that they have maintained continuous clinical, ethical, and legal practice since passing the board-approved examinations for 48 of the past 60 months immediately prior to submission of an application for licensure.
- D. All applicants for licensure by examination shall be required to pass an examination on attest that they have read and understand and will remain current with the applicable

Virginia dental and dental hygiene laws and the regulations of this board.

18 VAC 60-20-80. Licensure by endorsement for dental hygienists.

An applicant for dental hygiene endorsement licensure shall:

- 1. Be a graduate or be issued a certificate from an accredited dental hygiene school/program of dental hygiene recognized by the Commission on Dental Accreditation of the American Dental Association:
- 2. Be currently licensed to practice dental hygiene in another state, territory, District of Columbia, or possession of the United States, and have continuous clinical, ethical, and legal practice for 24 out of the past 48 months immediately preceding application for licensure. Active patient care in armed forces dental corps, state or federal agency, volunteer practice in a public clinic, and intern or residency programs, may substitute for required clinical practice;
- Be certified to be in good standing from each state in which he is currently licensed or has ever held a license;
- Have successfully completed a clinical licensing examination substantially equivalent to that required by Virginia;
- Not have failed the clinical examination accepted by the board within the last five years;
- 6. Be of good moral character;
- 7. Not have committed any act which would constitute a violation of § 54.1-2706 of the Code of Virginia;

- 8. Have successfully completed the dental hygiene examination of the Joint Commission on National Dental Examinations prior to making application to this board; and
- 9. Pass an examination on Attest to having read and understand and to remain current with the laws and the regulations governing the practice of dentistry and dental hygiene in Virginia; and
- 10. Submit a current report from the Healthcare Integrity and Protection Data Bank (HIPDB).

18 VAC 60-20-90. Temporary permit, teacher's license, and full-time faculty license.

- A. A temporary permit shall be issued only for the purpose of allowing dental and dental hygiene practice as limited by §§ 54.1-2715 and 54.1-2726 of the Code of Virginia.
- B. A temporary permit will not be renewed unless the permittee shows that extraordinary circumstances prevented the permittee from taking the licensure examination during the term of the temporary permit.
- C. A full-time faculty license shall be issued to any dentist who meets the entry requirements of § 54.1-2713 of the Code of Virginia, who is certified by the dean of a dental school in the Commonwealth and who is serving full time on the faculty of a dental school or its affiliated clinics intramurally in the Commonwealth.
  - 1. A full-time faculty license shall remain valid only while the license holder is serving full time on the faculty of a dental school in the Commonwealth. When any such license holder ceases to continue serving full time on the faculty of the dental school for which the license was

issued, the licensee shall surrender the license, which shall be null and void upon termination of full-time employment. The dean of the dental school shall notify the board within five working days of such termination of full-time employment.

- 2. A full-time faculty licensee working in a faculty intramural clinic in affiliated with a dental school may accept a fee for service.
- D. A temporary permit, a teacher's license and a full-time faculty license may be revoked for any grounds for which the license of a regularly licensed dentist or dental hygienist may be revoked and for any act indicating the inability of the permittee or licensee to practice dentistry that is consistent with the protection of the public health and safety as determined by the generally accepted standards of dental practice in Virginia.
- E. Applicants for a full-time faculty license or temporary permit shall be required to pass an examination on attest to having read and understand and to remaining current with the laws and the regulations governing the practice of dentistry in Virginia.

## 18 VAC 60-20-100. Other application requirements.

All applications for any license or permit issued by the board shall include:

 A final certified transcript of the grades from the college from which the applicant received the dental degree, dental hygiene degree or certificate, or post-doctoral degree or certificate; and

- An original grade card issued by the Joint Commission on National Dental Examinations: ; and
- 3. A current report from the Healthcare Integrity and Protection Data Bank (HIPDB).

#### 18 VAC 60-20-105. Inactive license.

A. Any dentist or dental hygienist who holds a current, unrestricted license in Virginia may, upon a request on the renewal application and submission of the required fee, be issued an inactive license. The holder of an inactive license shall not be entitled to perform any act requiring a license to practice dentistry or dental hygiene in Virginia.

B. An inactive license may be reactivated upon submission of the required application, payment of the current renewal fee, and documentation of having completed continuing education hours equal to the requirement for the period of time number of years in which the license has been inactive, not to exceed a total of 45 hours. Of the required hours, at least 15 must be earned in the most recent 12 months and the remainder within the 36 months immediately preceding the application for activation. In no event shall more than three years 45 hours of continuing education be required. The board reserves the right to deny a request for reactivation to any licensee who has been determined to have committed an act in violation of § 54.1-2706 of the Code of Virginia.

## PART IV.

# GENERAL ANESTHESIA AND CONSCIOUS, SEDATION AND ANALGESIA.

### 18 VAC 60-20-106. General provisions.

A. This part (18 VAC 60-20-106 et seq.) shall not apply to:

- The administration of local anesthesia in dental offices;
   or
- 2. The administration of anesthesia in (i) a licensed hospital as defined in § 32.1-123 of the Code of Virginia or state-operated hospitals or (ii) a facility directly maintained or operated by the federal government.
- B. Appropriateness of administration of general anesthesia or sedation in a dental office.
  - 1. Anesthesia and sedation may be provided in a dental office for patients who are Class I and II as classified by the American Society of Anesthesiologists (ASA).
  - 2. Conscious sedation, deep sedation or general anesthesia shall not be provided in a dental office for patients in ASA risk categories of Class IV and V, as classified by the American Society of Anesthesiologists (ASA).
  - 3. Patients in ASA risk category Class III shall only be provided general anesthesia or sedation by:
    - a. A dentist after consultation with their primary care physician or other medical specialist regarding potential risk and special monitoring requirements that may be necessary; or
    - b. An oral and maxillofacial surgeon after performing an evaluation and documenting the ASA risk assessment category of the patient and any special monitoring requirements that may be necessary.
- C. Prior to administration of sedation or general anesthesia, the dentist shall discuss the nature and objectives of the anesthesia or sedation planned along with the risks, benefits

and alternatives and shall obtain informed, written consent from the patient or other responsible party.

D. The determinant for the application of these rules shall be the degree of sedation or consciousness level of a patient that should reasonably be expected to result from the type and dosage of medication, the method of administration and the individual characteristics of the patient as documented in the patient's record.

E. A dentist who is administering anesthesia or sedation to patients prior to (insert effective date of regulations) shall have one year from that date to comply with the educational requirements set forth in this chapter for the administration of anesthesia or sedation.

# 18 VAC60-20-107. Administration of anxiolysis or inhalation analgesia.

- A. Education and training requirements. A dentist who utilizes anxiolysis or inhalation analgesia shall have training in and knowledge of:
  - 1. Medications used, the appropriate dosages and the potential complications of administration.
  - Physiological effects of nitrous oxide and potential complications of administration.
- B. Equipment requirements. A dentist who utilizes anxiolysis or inhalation analgesia shall maintain the following equipment in his office and be trained in its use:
  - 1. Blood pressure monitoring equipment.
  - 2. Positive pressure oxygen.
  - 3. Mechanical (hand) respiratory bag.

#### C. Monitoring requirements.

- 1. The treatment team for anxiolysis or inhalation analgesia shall consist of the dentist and a second person in the operatory with the patient to assist, monitor and observe the patient. One member of the team shall be in the operatory monitoring the patient at all times once the administration has begun.
- 2. A dentist who utilizes anxiolysis or inhalation analgesia shall ensure that a beginning and ending blood pressure has been taken and that there is continuous visual monitoring of the patient to determine the level of consciousness.
- 3. If inhalation analysis is used, monitoring shall include making the proper adjustments of nitrous oxide machines at the request of the dentist during administration of the sedation and observing the patient's vital signs.
- D. Discharge requirement. The dentist shall ensure that the patient is not discharged to his own care until he exhibits normal responses.

# 18 VAC 60-20-110. Requirements to administer *deep* sedation/general anesthesia.

A. Educational requirements. A dentist may employ or use deep sedation/general anesthesia on an outpatient basis by meeting one of the following educational criteria and by posting the educational certificate, in plain view of the patient, which verifies completion of the advanced training as required in subdivision 1 or 2 of this subsection. The foregoing These requirements shall not apply nor interfere with requirements for obtaining hospital staff privileges.

- 1. Has completed a minimum of one calendar year of advanced training in anesthesiology and related academic subjects beyond the undergraduate dental school level in a training program in conformity with published guidelines by the American Dental Association (Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry, effective October 1999), which are incorporated by reference in this chapter in effect at the time the training occurred; or
- 2. Completion of an American Dental Association approved residency in any dental specialty which incorporates into its curriculum a minimum of one calendar year of full-time training in clinical anesthesia and related clinical medical subjects (i.e. medical evaluation and management of patients), the standards of teaching comparable to those set forth in published guidelines by the American Dental Association (Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry, effective October 1999), which are incorporated by reference in this chapter for Graduate and Postgraduate Training in Anesthesia in effect at the time the training occurred.
- B. Additional training required. After March 31, 2005 (one year from the effective date of this regulation), dentists who administer deep sedation/general anesthesia shall hold current certification in advanced resuscitative techniques, such as courses in Advanced Cardiac Life Support or Pediatric Advanced Life Support from the American Heart Association, and current Drug Enforcement Administration registration, and training to the level consistent with Part I

and Part II of the ADA guidelines for the use of conscious sedation, deep sedation and general anesthesia for dentists.

- B. Exemptions Exceptions.
  - 1. A dentist who has not met the requirements specified in subsection A of this section may treat patients under *deep* sedation/general anesthesia in his practice if a qualified anesthesiologist, or a dentist who fulfills the requirements specified in subsection A of this section, is present and is responsible for the administration of the anesthetic.
  - 2. If a dentist fulfills the requirements himself to use general anesthesia and conscious sedation specified in subsection A and B of this section, he may employ the services of a certified nurse anesthetist.
- D. C. Posting. Any dentist who utilizes deep sedation/general anesthesia shall post with the dental license and current registration with the Drug Enforcement Administration, the certificate of education required under subsections subsection A and B of this section.
- E. D. Emergency equipment and techniques. A dentist who administers deep sedation/general anesthesia shall be proficient in handling emergencies and complications related to pain control procedures, including the maintenance of respiration and circulation, immediate establishment of an airway and cardiopulmonary resuscitation, and shall maintain the following emergency equipment in the dental facility:
  - Full face mask for children or adults, as appropriate for the patient being treated;
  - 2. Oral and nasopharyngeal airways;

- 3. Endotracheal tubes for children or adults, or both, with appropriate connectors;
- 4. A laryngoscope with reserve batteries and bulbs and appropriately sized laryngoscope blades for children or adults, or both;
- Source of delivery of oxygen under controlled positive pressure;
- 6. Mechanical (hand) respiratory bag;
- 7. Pulse oximetry and blood pressure monitoring equipment available and used in the treatment room;
- Appropriate emergency drugs for patient resuscitation;
- EKG monitoring equipment and temperature measuring devices -;
- 10. Pharmacologic antagonist agents;
- 11. External defibrillator (manual or automatic); and
- 12. For intubated patients, an End-Tidal CO<sup>2</sup> monitor.
- F. E. Monitoring requirements.
  - 1. The anesthesia treatment team for deep sedation/general anesthesia shall consist of the operating dentist, a second person to monitor and observe the patient and a third person to assist the operating dentist, all of whom shall be in the operatory with the patient during the dental procedure.
  - 2. Monitoring of the patient under deep sedation/general anesthesia, including direct, visual observation of the patient by a member of the team, is to begin immediately after the

patient has been induced and a maintenance level has been established prior to induction of anesthesia and shall take place continuously during the dental procedure and recovery from anesthesia. The person who administered the anesthesia or another licensed practitioner qualified to administer the same level of anesthesia must remain on the premises of the dental facility until the patient has regained consciousness and is discharged.

3. Monitoring deep sedation/general anesthesia shall include the following: recording and reporting of blood pressure, pulse, respiration and other vital signs to the attending dentist.

# 18 VAC 60-20-120. Requirements to administer conscious sedation; intravenous and intramuscular.

A. Automatic qualification. Dentists qualified to administer deep sedation/general anesthesia may administer conscious sedation.

- B. Educational requirements for administration of conscious sedation by any method.
  - A dentist may employ or use any method of conscious sedation by meeting one of the following criteria:
    - 1. A dentist may administer conscious sedation upon a. Completion of training for this treatment modality according to guidelines published by the American Dental Association (Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry, effective October 1999) and incorporated by reference in this chapter in effect at the time the training occurred, while enrolled at an approved accredited dental school

program or while enrolled in a post-doctoral university or teaching hospital program-; or

- 2. b. Completion of an approved continuing education course consisting of 60 hours of didactic instruction plus the management of at least 20 patients per participant, demonstrating competency and clinical experience in parenteral conscious sedation and management of a compromised airway. The course content shall be consistent with guidelines published by the American Dental Association (Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry) in effect at the time the training occurred.
- 2. A dentist who was self-certified in anesthesia and conscious sedation prior to January 1989 may continue to administer only conscious sedation if he completes 12 hours of approved continuing education directly related to administration of conscious sedation by March 31, 2005.

  A dentist qualified to administer conscious sedation by a certificate issued by the board shall maintain documentation of the required continuing education.
- C. Educational requirement for enteral administration of conscious sedation only. A dentist may administer conscious sedation by an enteral method if he has completed a an approved continuing education program of not less than 40 18 hours of elinical training for this treatment modality according to didactic instruction plus 20 clinically-oriented experiences in enteral and/or combination inhalation-enteral conscious sedation techniques. The course content shall be consistent with the guidelines published by the American Dental Association (Guidelines for Teaching the Comprehensive

Control of Anxiety and Pain in Dentistry) in effect at the time the training occurred.

- D. Additional training required. After March 31, 2005 (one year from the effective date of this regulation), dentists who administer conscious sedation shall hold current certification in advanced resuscitation techniques, such as Advanced Cardiac Life Support from the American Heart Association as evidenced by a certificate of completion posted with the dental license, and current registration with the Drug Enforcement Administration.
- E. Emergency equipment and techniques. A dentist who administers conscious sedation shall be proficient in handling emergencies and complications related to pain control procedures, including the maintenance of respiration and circulation, immediate establishment of an airway and cardiopulmonary resuscitation, and shall maintain the following emergency airway equipment in the dental facility:
  - Full face mask for children or adults, as appropriate for the patient being treated;
  - 2. Oral and nasopharyngeal airways;
  - 3. Endotracheal tubes for children or adults, or both, with appropriate connectors;—4. and a laryngoscope with reserve batteries and bulbs and appropriately sized laryngoscope blades for children or adults, or both. In lieu of a laryngoscope and endotracheal tubes, a dentist may maintain airway adjuncts designed for the maintenance of a patent airway and the direct delivery of positive pressure oxygen;
  - 4. Pulse oximetry;

- 5. Blood pressure monitoring equipment;
- 6. Pharmacologic antagonist agents;
- 5. 7. Source of delivery of oxygen under controlled positive pressure;
- 6. 8. Mechanical (hand) respiratory bag; and
- 7. 9. Appropriate emergency drugs for patient resuscitation.

#### F. Monitoring requirements.

- 1. The treatment administration team for conscious sedation shall consist of the operating dentist and a second person to assist, monitor and observe the patient.
- 2. Monitoring of the patient under conscious sedation, including direct, visual observation of the patient by a member of the team, is to begin prior to administration of sedation, or if medication is self-administered by the patient, when the patient arrives at the dental office and shall take place continuously during the dental procedure and recovery from sedation. The person who administers the sedation or another licensed practitioner qualified to administer the same level of sedation must remain on the premises of the dental facility until the patient is responsive and is discharged.

#### 18 VAC 60-20-130. General information. (Repealed.)

A. Emergency equipment and techniques. A dentist who administers general anesthesia and conscious sedation (excluding nitrous oxide) shall be proficient in handling emergencies and complications related to pain control procedures, including the maintenance of respiration and circulation, immediate establishment of an airway and

cardiopulmonary resuscitation, and shall maintain the following emergency airway equipment in the dental facility:

- 1. Full face mask for children or adults, or both;
- 2. Oral and nasopharyngeal airways;
- 3. Endotracheal tubes for children or adults, or both, with appropriate connectors;
- 4. A laryngoscope with reserve batteries and bulbs and appropriately sized laryngoscope blades for children or adults, or both;
- Source of delivery of oxygen under controlled pressure;
- 6. Mechanical (hand) respiratory bag.
- B. Posting requirements. Any dentist who utilizes general anesthesia or conscious sedation shall post in each facility the certificate of education required under 18 VAC 60-20-110 A and 18 VAC 60-20-120 B or a certificate issued by the board.

## C. Other.

- 1. The team for general anesthesia shall consist of the operating dentist, a second person to monitor and observe the patient, and a third person to assist the operating dentist.
- 2. The person in charge of the anesthesia must remain on the premises of the dental facility until the patient has regained consciousness and is discharged.
- D. Scope of regulation. Part IV (18 VAC 60-20-110 et seq.) of this chapter shall not apply to administration of general

anesthesia and conscious sedation in hospitals and surgicenters.

### 18 VAC 60-20-135. Ancillary personnel.

After March 31, 2005 (one year from the effective date of this regulation), dentists who employ ancillary personnel to assist in the administration and monitoring of any form of conscious sedation or deep sedation/general anesthesia shall maintain documentation that such personnel have:

- 1. Minimal training resulting in current certification in basic resuscitation techniques, such as Basic Cardiac Life Support from the American Heart Association and or an approved, clinically oriented course devoted primarily to responding to clinical emergencies offered by an approved provider of continuing education as set forth in 18 VAC 60-20-50 C; or
- 2. Current certification as a certified anesthesia assistant (CAA) by the American Association of Oral and Maxillofacial Surgeons or the American Dental Society of Anesthesiology (ADSA).

# 18 VAC 60-20-190. Nondelegable duties; dentists.

Only licensed dentists shall perform the following duties:

- 1. Final diagnosis and treatment planning;
- Performing surgical or cutting procedures on hard or soft tissue;
- Prescribing or parenterally administering drugs or medicaments;

- 4. Authorization of work orders for any appliance or prosthetic device or restoration to be inserted into a patient's mouth;
- 5. Operation of high speed rotary instruments in the mouth;
- 6. Performing pulp capping procedures;
- 7. Administering and monitoring general anesthetics and conscious sedation except as provided for in § 54.1-2701 of the Code of Virginia and 18 VAC 60-20-107 C, 18 VAC 60-20-110 F, and 18 VAC 60-20-120 F;
- 8. Administering nitrous oxide or oxygen inhalation analgesia;
- Condensing, contouring or adjusting any final, fixed or removable prosthodontic appliance or restoration in the mouth;
- 10. Final positioning and attachment of orthodontic bonds and bands:
- 11. Taking impressions for master casts to be used for prosthetic restoration of teeth or oral structures;
- 12. Final cementation of crowns and bridges; and
- 13. Placement of retraction cord.

### 18 VAC 60-20-195. Radiation certification.

No person not otherwise licensed by this board shall place or expose dental x-ray film unless he has (i) satisfactorily completed a course or examination recognized by the Commission on Dental Accreditation of the American Dental Association, (ii) been certified by the American Registry of Radiologic Technologists, (iii) satisfactorily completed a course and passed an examination in compliance with

guidelines provided by the board, or (iv) passed the board's examination in radiation safety and hygiene followed by onthe job training. Any individual not able to successfully complete the board's examination after two attempts may be certified only by completing (i), (ii) or (iii) of this provision satisfactorily completed a radiation course and passed an examination given by the Dental Assisting National Board. Any certificate issued pursuant to satisfying the requirements of this section shall be posted in plain view of the patient.

#### DOCUMENTS INCORPORATED BY REFERENCE

Guidelines for Teaching the Comprehensive Control of

Anxiety and Pain in Dentistry (October 1999), American

Dental Association.

1995 Current Dental Terminology, Second Edition, 1995-2000, Code on Dental Procedures and Nomenclature,American Dental Association.

Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists, October 1995, American Dental Association.

# Certification

I	certify	that	this	regulation	is	full,	true,	and
correctly dated.								

Sandra K. Reen

Executive Director
Board of Dentistry

Date:\_\_\_\_\_