ADOPTED REGULATION OF THE
BOARD OF DENTAL EXAMINERS OF NEVADA

LCB File No. R005-99

Effective September 7, 2000

EXPLANATION – Matter in italics is new; matter in brackets [omitted material] is material to be omitted.

AUTHORITY: §§1-28, 30 and 31, NRS 631.190 and 631.265; §29, NRS 631.190, 631.265 and 631.349.

Section 1. Chapter 631 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 10, inclusive, of this regulation.

Sec. 2. As used in this chapter, unless the context otherwise requires, the words and terms defined in sections 3 to 8, inclusive, of this regulation and section 1 of LCB File No. R003-99, which was adopted by the board of dental examiners of Nevada and was filed with the secretary of state on April 3, 2000, have the meanings ascribed to them in those sections.

Sec. 3. “Certificate of site approval” means a certificate issued by the board pursuant to section 10 of this regulation.

Sec. 4. “Conscious sedation” has the meaning ascribed to it in NRS 631.265.

Sec. 5. “Conscious sedation permit” means a permit that:

1. Is issued by the board pursuant to NAC 631.2213; and

2. Authorizes the holder to administer conscious sedation to a patient.

Sec. 6. “Deep sedation” has the meaning ascribed to it in NRS 631.265.

Sec. 7. “General anesthesia” has the meaning ascribed to it in NRS 631.055.

Sec. 8. “General anesthesia permit” means a permit that:

1. Is issued by the board pursuant to NAC 631.2213; and
2. Authorizes the holder to administer general anesthesia, deep sedation and conscious sedation to a patient.

Sec. 9. In a proceeding of the board at which the board must determine the degree of sedation or level of consciousness of a patient, the board will base its findings on:

1. The type and dosage of medication that was administered or is proposed for administration to the patient; and

2. The degree of sedation or level of consciousness that should reasonably be expected to result from that type and dosage of medication.

Sec. 10. 1. A dentist who is licensed in this state may employ:

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

(b) A dentist who is licensed in this state and who holds a general anesthesia permit or conscious sedation permit,

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

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

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

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

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

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

4. If the person conducting the inspection determines that the office of the applicant complies with the requirements of NAC 631.2227, 631.2229 and 631.2231 and the applicant has otherwise met the requirements of this section, the executive director of the board shall issue a certificate of site approval to the applicant.

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

6. Each certificate of site approval issued by the board must be renewed annually.

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

Sec. 11. NAC 631.2211 is hereby amended to read as follows:

631.2211 NAC 631.2213 to 631.2241, inclusive, and sections 9 and 10 of this regulation do not apply to the administration of:

1. Local anesthesia;

2. Nitrous oxide-oxygen analgesia, if the delivery system for the nitrous oxide-oxygen contains a mechanism which guarantees that an oxygen concentration of at least 25 percent
3. Oral medication that is administered to a patient to relieve anxiety in the patient, if the medication is not given in a dosage that is sufficient to induce in a patient a controlled state of depressed consciousness or unconsciousness similar to the state produced pursuant to the administration of general anesthesia, deep sedation or conscious sedation.

Sec. 12. NAC 631.2213 is hereby amended to read as follows:

631.2213  1. Except as otherwise set forth in NAC 631.2211 to 631.2241, inclusive, no dentist may:

   (a) Use general anesthesia or deep sedation for dental patients, except in a facility accredited by the Joint Commission on Accreditation of Healthcare Organizations, unless he first obtains a general anesthesia permit or conscious sedation permit; or

   (b) Use conscious sedation for dental patients, except in a facility accredited by the Joint Commission on Accreditation of Healthcare Organizations, unless he first obtains a general anesthesia permit or conscious sedation permit.

A separate general anesthesia permit or conscious sedation permit, as appropriate, is required for each location at which a dentist administers general anesthesia, deep sedation or conscious sedation.

2. To obtain a general anesthesia permit or conscious sedation permit, a dentist must apply to the board for such a permit on a form prescribed by the board, submit any fees that are set by the board pursuant
to NRS 631.345 and produce evidence showing that he is a licensed dentist who is licensed in this state, and:

(a) [Has completed a minimum of 1 year] For a conscious sedation permit, the applicant must show evidence of:

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

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

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

(1) The completion of a program, subject to the approval of the board, of advanced training in anesthesiology and related academic subjects beyond the level of undergraduate dental school in a training program as described in Part II of the “Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry,” published by the Council on Dental Education and available from the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611 at no charge;
—(b) Is a diplomate of the American Board of Oral and Maxillofacial Surgery;
—(c) Is eligible for examination by the American Board of Oral and Maxillofacial Surgery;
—(d) Is a member of the American Association of Oral and Maxillofacial Surgeons;
—(e) Is a fellow of the American Dental Society of Anesthesiology;
—(f) Has completed a residency program in general anesthesia of not less than 1 calendar year that is approved by the board of directors of the American Dental Society of Anesthesiology for eligibility for the fellowship in general anesthesia;
—(g) Has completed a]; or

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

] or
—(h) Has been using general anesthesia in a competent and effective manner for the 3-year period preceding October 21, 1983.

Sec. 13. NAC 631.2217 is hereby amended to read as follows:

631.2217 1. The holder of a general anesthesia permit or conscious sedation permit [to administer general anesthesia] is subject to review by the board at any time.

2. Each general anesthesia permit and conscious sedation permit [issued by the board] must be renewed annually.

Sec. 14. NAC 631.2219 is hereby amended to read as follows:

631.2219 1. The board will require an inspection and evaluation of the facility, equipment, personnel, records of patients and the procedures used by every dentist who seeks or holds a general anesthesia permit or conscious sedation permit, [to administer general anesthesia,]
and of the dentist himself, before issuing **such** an original permit to administer general anesthesia to the dentist, and at least once in every 5-year period thereafter.

2. The board will renew general anesthesia permits and conscious sedation permits to administer general anesthesia annually, on the anniversary of the issuance of the original permit, **unless** the holder is informed in writing, 60 days before the date for renewal, that a reevaluation of his credentials is required. In determining whether reevaluation is necessary, the board will consider, among other factors, complaints by patients and reports of adverse occurrences. A reevaluation will, if appropriate, include an inspection of the facility, equipment, personnel, records of patients and the procedures used by the holder, and an examination of his qualifications.

**Sec. 15.** NAC 631.2221 is hereby amended to read as follows:

631.2221 1. When an inspection or evaluation is required to issue or renew a general anesthesia permit or conscious sedation permit, the board will designate two or more persons, each of whom holds a general anesthesia permit or conscious sedation permit and has practiced dental general anesthesia, deep sedation or conscious sedation, as applicable, for a minimum of 3 years preceding his appointment, exclusive of his training in the administration of anesthesia or sedation. At least one of the inspectors or evaluators must have had experience in the evaluation of dentists using general anesthesia, deep sedation or conscious sedation, as applicable. At least one member of the inspection or evaluation team must have had substantial experience in the administration of the type of anesthesia contemplated for use by the dentist being evaluated and must hold the type of permit for which the dentist is applying.
2. Any member of the board who is a dentist may observe or consult in any inspection or evaluation. A member of the board who is not a dentist may be present at an observation but may not participate in any grading or evaluation resulting from the inspection or evaluation.

Sec. 16. NAC 631.2223 is hereby amended to read as follows:

631.2223 An inspection or evaluation ordered by the board must be conducted in all offices where general anesthesia, deep sedation or conscious sedation is to be administered and, except as otherwise required in section 10 of this regulation, must consist of:

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

2. A demonstration of:

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

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

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

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

(e) The appropriate monitoring of a patient during anesthesia; including the monitoring of the heart or pulse and of respiration; or sedation; and

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

Sec. 17. NAC 631.2225 is hereby amended to read as follows:
A dentist’s office inspected or evaluated for the issuance or renewal of a general anesthesia permit or conscious sedation permit must meet the following minimum standards with regard to simulated emergencies. The dentist and his staff must demonstrate a knowledge of and a method of treatment for the following types of emergencies:

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

**Sec. 18.** NAC 631.2227 is hereby amended to read as follows:
631.2227 A dentist’s office inspected or evaluated for the issuance or renewal of a general anesthesia permit, conscious sedation permit or certificate of site approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in an operating[dental] chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:
   (a) Allow the patient to be placed in a position such that the operating team can maintain the airway;
   (b) Allow the operating team to alter the patient’s position quickly in an emergency; and
   (c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient’s skin and mucosal color. An alternate lighting system should derive its power from batteries and must be sufficiently intense to permit completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that permits aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.
6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. **Ancillary** Except as otherwise provided in this subsection, ancillary equipment must include:

   (a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;
   
   (b) Endotracheal tubes and appropriate connectors;
   
   (c) Oral airways;
   
   (d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;
   
   (e) An endotracheal tube type forcep;
   
   (f) A sphygmomanometer and stethoscope;
   
   (g) An electrocardioscope and defibrillator; and

   (h) Adequate equipment for the establishment of an intravenous infusion;

   (i) A pulse oximeter.

*A dentist’s office inspected or evaluated for the issuance or renewal of a conscious sedation permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e) and (g).*

**Sec. 19.** NAC 631.2229 is hereby amended to read as follows:

631.2229 A dentist’s office inspected or evaluated *for the issuance or renewal of a general anesthesia permit, conscious sedation permit or certificate of site approval* must meet the following minimum standards with regard to the records of patients:

1. Adequate medical history and records of physical evaluation.
2. Records of the administration of anesthesia must include:

(a) The patient’s blood pressure and pulse;
(b) The names of the drugs and the amounts administered;
(c) The length of the procedure; and
(d) Any complications of anesthesia.

Sec. 20. NAC 631.2231 is hereby amended to read as follows:

631.2231 Except as otherwise provided in this section, a dentist’s office inspected or evaluated for the issuance or renewal of a general anesthesia permit, conscious sedation permit or certificate of site approval must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Cordicosteroid; Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Narcotic antagonist; Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
A dentist’s office that is inspected or evaluated for the issuance or renewal of a conscious sedation permit is not required to maintain the emergency drugs described in subsections 4, 5, 9 and 11.

Sec. 21. NAC 631.2233 is hereby amended to read as follows:

631.2233 1. The persons performing an inspection or evaluation of a dentist’s office for the issuance or renewal of a general anesthesia permit or conscious sedation permit shall grade the applicant office as passing or failing. Each Within 10 days after completing the inspection or evaluation, each inspector or evaluator shall report his recommendation for passing or failing to the board, setting forth the details supporting his conclusion. The board is not bound by these recommendations.

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

Sec. 22. NAC 631.2235 is hereby amended to read as follows:

631.2235 1. An applicant who A dentist whose office the board determines has failed the inspection or evaluation is not entitled to have a general anesthesia permit or conscious sedation permit to administer general anesthesia issued or renewed.

2. An applicant, A dentist who has received a notice of failure from the board may, within 15 days after receiving the notice, request the board in writing for a reevaluation. The request for a reevaluation must state specific grounds supporting it.
3. If the reevaluation is granted by the board, it will be conducted by different persons in the manner set forth by NAC 631.2219 to 631.2233, inclusive, for an original evaluation.

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

Sec. 23. NAC 631.2237 is hereby amended to read as follows:

631.2237 1. Written consent of the patient must be obtained before the administration of a general anesthetic, deep sedation or conscious sedation, unless the dentist determines that an emergency situation exists in which delaying the procedure to obtain the consent would likely cause permanent injury to the patient. If the patient is a minor, the consent must be obtained from his parent or legal guardian.

2. A medical history must be taken before the administration of a general anesthetic, deep sedation or conscious sedation. A patient should be asked to describe any current medical conditions or treatments, including medications, drug allergies, impending or past operations, and pregnancy, and to give other information that may be helpful to the person administering the anesthetic or sedation. The dentist is not required to make a complete medical examination of the patient and draw medical diagnostic conclusions. If a dentist suspects a medical problem and calls in a physician for an examination and evaluation, he may then rely upon that conclusion and diagnosis. Questions asked of and answers received from the patient must be permanently recorded and signed by the patient before the administration of any general anesthetic, deep sedation or conscious sedation, and this record must be a permanent part of the patient’s record of treatment.

Sec. 24. NAC 631.2239 is hereby amended to read as follows:
631.2239 1. A dentist using general anesthesia, deep sedation or conscious sedation shall maintain a properly equipped facility for the administration of general anesthesia or sedation which is staffed with supervised auxiliary personnel who are capable of reasonably handling procedures, problems and emergencies incident thereto.

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

Sec. 25. NAC 631.224 is hereby amended to read as follows:

631.224 1. Any dentist who receives holds a general anesthesia permit to administer general anesthesia pursuant to the provisions of NAC 631.2211 to 631.2241, inclusive, may employ a certified registered nurse anesthetist to administer the general anesthesia, deep sedation or conscious sedation to a patient if the dentist is physically present and directly supervises the administration of the general anesthesia, deep sedation or conscious sedation to the patient. The holder of the permit must maintain at his office evidence in writing that the certified registered nurse anesthetist is licensed to practice in the State of Nevada and maintains unrestricted active staff privileges within the department of anesthesiology at a hospital or surgical center which is certified by the Joint Commission on Accreditation of Healthcare Organizations.

2. Except as otherwise provided in section 10 of this regulation, a dentist who does not hold a general anesthesia permit may not allow any person to administer general anesthesia, deep sedation or conscious sedation to his patients unless the treatment is rendered within a facility approved by the Joint Commission on Accreditation of Healthcare Organizations.

Sec. 26. NAC 631.2241 is hereby amended to read as follows:
631.2241 Each holder of a general anesthesia permit, conscious sedation permit or certificate of site approval shall submit to the board a complete report regarding any mortality or unusual incident which occurs outside a facility accredited by the Joint Commission on Hospital Accreditation of Healthcare Organizations and produces permanent injury to a patient or requires the hospitalization of a patient, as a direct result of the administration of general anesthesia, deep sedation or conscious sedation. The report must be submitted within 30 days after the date of the incident. If a dentist fails to report any incident as required by this section, his permit may be revoked.

Sec. 27. NAC 631.2254 is hereby amended to read as follows:

631.2254 1. The board may grant a temporary permit to administer general anesthesia and deep sedation or a temporary permit to administer conscious sedation to an applicant who has completed a course of study in that subject that has been approved by the board and meets the qualifications for a permit to administer that type of anesthesia or sedation pursuant to NAC 631.2213.

2. A temporary permit is valid for not more than 1 year, but the board may, in any case it deems appropriate, grant a 90-day extension of the permit.

3. The board may require the holder of a temporary permit to pass an on-site inspection as a condition of retaining the permit. If the holder fails the inspection, his permit will be revoked. In case of revocation, the holder of a temporary permit may apply to be reinspected after waiting 1 year in accordance with the procedures set forth in NAC 631.2235.

Sec. 28. NAC 631.2256 is hereby amended to read as follows:

631.2256 Every 2 years, the holder of a general anesthesia permit or conscious sedation permit to administer conscious sedation must complete at least 3 hours in courses
of study that have been approved by the board specifically relate to anesthesia or sedation, as applicable, before his permit may be renewed. This training will be credited toward any continuing education required by NAC 631.173.

Sec. 29. NAC 631.230 is hereby amended to read as follows:

631.230 1. In addition to those specified by statute and subsection 3 of NAC 631.177, the following acts among others constitute unprofessional conduct:

(a) The falsification of records of health care or medical records.
(b) Writing prescriptions for controlled substances in such excessive amounts as to constitute a departure from prevailing standards of acceptable dental practice.
(c) The consistent use of dental procedures, services or treatments which constitute a departure from prevailing standards of acceptable dental practice even though the use does not constitute malpractice or gross malpractice.
(d) The acquisition of any controlled substances from any pharmacy or other source by misrepresentation, fraud, deception or subterfuge.
(e) Making an unreasonable additional charge for laboratory tests, radiology services or other testing services which are ordered by the dentist and performed outside his own office.
(f) The failure to report to the board as required in NAC 631.155 or to sign any affidavit required by the board.
(g) Employing any person in violation of NAC 631.260 or failing to report to the board as required by that section.
(h) The failure of a dentist who is administering or directly supervising the administration of general anesthesia, deep sedation or conscious sedation to be physically present while a patient is under general anesthesia, deep sedation or conscious sedation.
(i) Administering conscious sedation to more than one patient at a time, unless each patient is monitored continuously directly supervised by a person authorized by the board to administer conscious sedation.

(j) The failure to have any patient who is recovering from conscious sedation monitored closely by a licensed health professional. Administering general anesthesia or deep sedation to more than one patient at a time.

(k) The failure to have any patient who is undergoing general anesthesia, deep sedation or conscious sedation monitored with a pulse oximeter or similar equipment required by the board.

(l) Allowing a person who is not certified in basic cardiopulmonary resuscitation to care for any patient who is undergoing general anesthesia, deep sedation or conscious sedation.

(m) The failure to obtain a patient’s written, informed consent before administering general anesthesia, deep sedation or conscious sedation to the patient or, if the patient is a minor, the failure to obtain his parent’s or guardian’s consent unless the dentist determines that an emergency situation exists in which delaying the procedure to obtain the consent would likely cause permanent injury to the patient.

(n) The failure to maintain a record of all written, informed consents given for the administration of general anesthesia, deep sedation or conscious sedation.

(o) The failure to report to the board, in writing, the death or emergency hospitalization of any patient to whom general anesthesia, deep sedation or conscious sedation was administered. The report must be made within 30 days after the event.
(p) Allowing a person to administer general anesthesia, deep sedation or conscious sedation to a patient if the person does not hold a permit to administer such anesthesia or sedation unless the anesthesia or sedation is administered:

(1) In a facility approved by the Joint Commission on Accreditation of Healthcare Organizations; or

(2) By an anesthesiologist in an office for which a certificate of site approval has been issued.

2. For purposes of NRS 631.347, a plan or practice requiring a patient to select a dentist from a specific group does not provide the patient with a reasonable opportunity to select a dentist of his own choice, and constitutes unprofessional conduct on the part of any dentist participating in such a plan or practice, unless it, or another plan concurrently available to the patient, allows the patient to:

(a) Have an annual opportunity lasting for a minimum of 30 days within which to select a dentist of his own choice for all dental work to be performed during the subsequent 12 months. Any new patient added to the plan or practice must immediately be given an initial opportunity lasting at least 30 days to select the coverage supplied by the plan or practice or a dentist of his own choice.

(b) Receive the allowance for a procedure performed by a dentist of his own choice in substantially the same amount as he would if he used the services of one of the group of dentists specified by the plan or practice.

Sec. 30. Section 1 of LCB File No. R003-99, which was adopted by the board of dental examiners of Nevada and was filed with the secretary of state on April 3, 2000, is hereby amended to read as follows:
Section 1. Chapter 631 of NAC is hereby amended by adding thereto a new section to read as follows:

[As used in this chapter, unless the context otherwise requires, “board”] “Board” means the board of dental examiners of Nevada.

Sec. 31. NAC 631.2215, 631.225, 631.2252 and 631.2258 are hereby repealed.

TEXT OF REPEALED SECTIONS

631.2215 Applications of dentists currently administering anesthesia. Each dentist who has been using general anesthesia before October 21, 1983, must apply to the board for a permit to administer general anesthesia by January 1, 1984, if he desires to continue to use general anesthesia.

631.225 Application for permit.

1. An application for a permit to administer conscious sedation must be made on a form prescribed by the board. The application must be accompanied by:

   (a) The statutory application fee;

   (b) Except as otherwise provided in subsection 2, evidence that the applicant has completed successfully a course of training in conscious sedation that has been approved by the board; and

   (c) Certification that the equipment and drugs required by the board are available at the office of the applicant.
2. If an applicant has been administering conscious sedation for at least 3 years before January 1, 1990, he may submit evidence of at least 10 administrations of conscious sedation during that period in lieu of the requirement set forth in paragraph (b) of subsection 1.

631.2252 On-site inspections as condition of receiving or retaining permit.

1. The board may require an applicant or the holder of a permit to administer conscious sedation to pass an on-site inspection as a condition of receiving or retaining the permit. Following the initial inspection, the board may require a holder of a permit to pass an on-site inspection at least once every 5 years.

2. If the holder fails this inspection, his permit will be revoked 30 days after he receives notice that he failed, unless he has retaken and passed a subsequent inspection before the 30-day period has ended. If an applicant fails the inspection, his application will be denied. If a permit is denied or revoked, the applicant or holder of the permit may apply to be reinspected after waiting 1 year.

3. If a person refuses to allow the board to conduct an inspection, his permit may be revoked or, if he is an applicant, his application may be denied.

631.2258 Physical evaluation and medical history of patients required; maintenance of records. A physical evaluation and medical history of the patient must be taken before conscious sedation is administered to a patient. The holder of the permit to administer conscious sedation shall maintain records of the physical evaluation and medical history and the procedure used for the conscious sedation of the patient.
NOTICE OF ADOPTION OF REGULATION

The enclosed amended regulation was adopted by the Nevada State Board of Dental Examiners at a duly noticed public hearing on June 1, 2000. This regulation addressing the qualification and issuance of permits for the administration of conscious sedation, deep sedation, and/or general anesthesia in the dental office, is designated as LCB File No. R005-99 using the April 11, 2000, draft of the regulations. Also enclosed is a completed Notice of Filing for transmittal to the Secretary of State.

INFORMATIONAL STATEMENT

LEGISLATIVE REVIEW OF ADOPTED REGULATIONS AS REQUIRED BY ADMINISTRATIVE PROCEDURES ACT, NRS 233B.066  
LCB FILE R005-99

The following statement is submitted for adopted amendments to Nevada Administrative Code (NAC) 445A:

1. Public comment was solicited by statutory posting of the proposal to adopt at least thirty days prior to each hearing. In addition to the list of required postings, a copy of the proposals and dates for hearings were mailed to a list of approximately fifty (50) individuals and organizations that have indicated an interest in receiving such information.

There was no written response to the solicitations.

2. The number of people who:
   (a) Attended the hearings: 40
   (b) Testified at the hearings: 5
   (c) Submitted written comments: No written comments were received.

3. Comments were solicited from affected individuals and organizations by the notices as outlined in #1, and by direct mail to interested persons subscribing to the Board's mailing list. No written comments were received.

4. The language was adopted as supplied by the LCB on April 11, 2000.

5. There will be no beneficial or adverse economic benefits to the profession or to the public.

6. There is no additional cost to the Board for enforcement of this regulation.

7. There are no other state or government agency regulations that the proposed amendments duplicate.

8. To our knowledge, the proposed regulation addresses no areas regulated by the Federal Government.
9. This regulation does involve a new fee which was approved by the legislature in the 1998 session (NRS 631.345). The fee covers inspection and reinspection of facilities in which anesthesia is administered. The anticipated collections are estimated at approximately $3000 annually.