

LCB File No. T015-99

**TEMPORARY REGULATION OF THE
BOARD OF DENTAL EXAMINERS OF NEVADA**

(Adopted February 10, 1999)

**NOTICE OF INTENT TO ACT UPON A REGULATION
Notice of Hearing for the Amendment
of Regulations of the Nevada State Board of Dental Examiners**

The Nevada State Board of Dental Examiners will hold a public hearing at 9:00 a.m. on Saturday, January 16, 1999, at Crown Plaza Hotel, Conference Room F, 4255 S. Paradise Road, Las Vegas, Nevada 89109. The purpose of the hearing is to receive comments from all interested persons regarding the amendment of regulations pertaining to chapter 631 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

1. The need for and purpose of the proposed amendment to regulations is the protection of the citizens of Nevada by assuring that practitioners who use conscious sedation and/or general anesthesia are qualified to perform the procedures.
2. The subjects and issues involved in the proposed amendments to regulations deal with administration of conscious sedation and/or general anesthesia in the office of a licensed dentist. The amendments clarify educational and facility requirements along with required equipment and continuing education credits.
3. There are no economic effects of the amendment are both immediate and long-term benefits in allowing the public to seek safe alternatives for treatment for certain dental problems in other than a hospital or out-patient surgery center. While the increased educational and equipment requirements may have an immediate short-term adverse economic effect on the practitioner, the long-term economic benefits include an increase in the number of patients served and a possible decrease in malpractice insurance rates covering these procedures.
4. The cost for enforcement of this regulations will not increase the current total cost for regulating the dental and dental hygiene professions.
5. To our knowledge, this amendment does not overlap or duplicate any other state, local or federal regulation or statute.
6. The amendment is not required pursuant to a federal law.
7. To our knowledge there are no federal regulations governing the practice of dentistry or dental hygiene.
8. No new fee or increases in fees are proposed in this amendment.

Persons wishing to comment upon the proposed action of the Nevada State Board of Dental Examiners may appear at the scheduled public hearing or may address their comments, data, views, or arguments in written form to the Nevada State Board of Dental Examiners, 2225 Renaissance Drive, Suite E, Las Vegas, Nevada 89119. Written submissions must be received by the Nevada State Board of Dental Examiners on or before January 11, 1999. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Nevada State Board of Dental Examiners may proceed immediately to act upon any written submissions.

A copy of this notice and the proposed regulation will be on file at the State Library, 100 Stewart Street, Carson City, Nevada for inspection by the public during business hours. Additional copies of this notice and the proposed regulation will be available at the Nevada State Board of Dental Examiners, 2225 Renaissance Drive, Suite E, Las Vegas, Nevada, and in all counties in which an office of the agency is not maintained, at the main public library, for inspection and copying by members of the public during business hours. This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653 and on the Internet at <http://www.leg.state.nv.us>. Copies of this notice and the proposed regulation will be mailed to members of the public upon request. A reasonable fee may be charged for copies if it is deemed necessary.

Upon adoption of any regulation, the agency, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice has been posted at the following locations:

Carson City County Courthouse, 198 N. Carson Street, Carson City, Nevada.
Clark County District Health Department, 625 Shadow Lane, Las Vegas, Nevada.
Elko County Courthouse, Room 106, Elko, Nevada.
Washoe County Courthouse, 75 Court Street, Reno, Nevada.
Office of the N.S.B.D.E., 2225-E Renaissance Drive, Las Vegas, Nevada.
Carson City Library, 900 N. Roop St., Carson City, Nevada.
Churchill County Library, 553 S. Main St., Fallon, Nevada.
Las Vegas Library, 833 Las Vegas Blvd, North, Las Vegas, Nevada.
Douglas County Library, 1625 Library Lane, Minden, Nevada.
Elko County Library, 720 Court St., Elko, Nevada.
Goldfield Public Library, Fourth & Crook St., Goldfield, Nevada.
Eureka Branch Library, 10190 Monroe St., Eureka, Nevada.
Humboldt County Library, 85 East 5th St., Winnemucca, Nevada.
Battle Mountain Branch Library, 625 Broad St., Battle Mountain, Nevada.
Lincoln County Library, 93 Main Street, Pioche, Nevada.
Lyon County Library, 20 Nevin Way, Yerington, Nevada.
Mineral County Library, First & A Street, Hawthorne, Nevada.
Tonopah Public Library, 171 Central St., Tonopah, Nevada.
Pershing County Library, 1125 Central Ave., Lovelock, Nevada.
Storey County Library, 95 South R. St., Virginia City, Nevada.

Washoe County Library, 301 S. Center St., Reno, Nevada.

**TEMPORARY REGULATION OF THE
BOARD OF DENTAL EXAMINERS OF NEVADA**

(Adopted February 10, 1999)

Deletions designated by []

Additions designated by *italics*

**PERMITS TO ADMINISTER GENERAL ANESTHESIA/DEEP SEDATION
AND/OR CONSCIOUS SEDATION**

631.2211 Scope. NAC 631.2213 to [631.2241]631.2256, inclusive, do not apply to the administration of local anesthesia [.] *and/or nitrous oxide analgesia as long as the nitrous oxide delivery system contains a fail-safe mechanism which guarantees a minimum delivery of 25% oxygen at all times. Oral premedication administered for anxiety relief is generally not within the scope of NAC 631.2213 through 631.2256. However, if any medication(s) are given in such dosages that would place the patient in a state of conscious sedation, deep sedation, or under general anesthesia as defined in NRS 631.055 and NRS 631.265, then the licensee will be required to obtain the appropriate anesthesia permit.*

631.2212 Definitions. *As set forth in NRS 631.055 and NRS 631.265 the following definitions shall apply to NAC 631.2213 through 631.230:*

1. *"General Anesthesia" means a controlled state of unconsciousness, produced by a pharmacologic or nonpharmacologic method or a combination thereof, and accompanied by partial or complete loss of protective reflexes and the inability independently to maintain an airway and respond purposefully to physical stimulation or verbal commands.*
2. *"Deep sedation" means a controlled state of depressed consciousness, produced by a pharmacologic or nonpharmacologic method or a combination thereof, and accompanied by a partial loss of protective reflexes and the inability to respond purposefully to verbal commands.*
3. *"Conscious Sedation" means a minimally depressed level of consciousness, produced by a pharmacologic or nonpharmacologic method or combination thereof, in which the patient retains the ability independently and continuously to maintain an airway and to respond appropriately to physical stimulation and verbal commands.*
4. *Presumption of level of consciousness: In any hearing as to the degree of sedation or level of consciousness a licensee is providing, the board shall base its findings on the*

types and dosages of drugs administered to patients and what reasonable resulting level of consciousness would be expected when such drugs are administered in those dosages.

631.2213 Permit required; qualifications of applicants.

1. Except as otherwise set forth in NAC 631.2211 to [631.2241] 631.2256, inclusive, no dentist may use general anesthesia, *deep sedation, or conscious sedation* for dental patients, except in a facility accredited by the Joint Commission on [Hospital] Accreditation *of Healthcare Organizations*, unless he first obtains a permit to administer general anesthesia/*deep sedation or conscious sedation* issued by the board. *A permit is required for each location at which the licensee administers general anesthesia/deep sedation and/or conscious sedation.*
 2. To obtain a permit to administer or supervise directly the administration of general anesthesia/*deep sedation or conscious sedation*, or to have general [anesthetic] *anesthesia/deep sedation or conscious sedation* administered in his office, a dentist must apply to the board on a form prescribed by the board, submit the statutory fee, and produce evidence showing that he is a licensed dentist in this state and:
 - (a) *For a conscious sedation permit, the applicant must:*
 - (1) *Show evidence of completion of a course of study which is subject to approval by the board, and which is exclusively dedicated to conscious sedation of no less than sixty (60) hours, and*
 - (2) *Show evidence of successful management of no less than twenty (20) conscious sedation patients, or*
 - (3) *Show evidence of satisfactory completion of an accredited specialty training program which included conscious sedation training equivalent to paragraphs (1) one and (2) two of this regulation and hold a current certificate for Advanced Cardiac Life Support as sponsored by the American Heart Association, or, if licensed as a Pediatric Dentistry specialist, hold a current certificate for Pediatric Advanced Life Support as sponsored by the American Heart Association.*
 - (4) *A person who holds a current general anesthesia//deep sedation permit may administer conscious sedation without having to obtain a separate conscious sedation permit.*
 - (b) *For a general anesthesia/deep sedation permit, the applicant must hold a current certificate for Advanced Cardiac Life Support as sponsored by the American Heart Association, and show evidence of one of the following requirements;*
- [(a)](1) *Has completed [a minimum of one year of] an advanced training program in anesthesiology and related academic subjects beyond the level of undergraduate dental school in a training program as described in Part Two of the "Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry," published by the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611, [at no charge] and which is subject to approval by the board.*

- (b) Is a diplomat 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 fellow 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)(2) [Has completed] *Holds a certificate of completion from* a graduate program in Oral and Maxillofacial Surgery which has been approved by the Commission on 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.]

[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.]

631.2217 Review of holder of permit; annual renewal of permit.

1. The holder of a permit to administer general anesthesia/*deep sedation and/or conscious sedation* is subject to review by the board at any time.
2. Each permit *for general anesthesia/deep sedation and/or conscious sedation* issued by the board must be renewed annually.

631.2219 Inspection and evaluation; reevaluation.

1. The board will require an inspection and evaluation of the facility, equipment, personnel, *patient records*, and the procedures used by every dentist who seeks or holds a permit to administer general anesthesia/*deep sedation and/or conscious sedation*, and of the dentist himself, before issuing an original permit to administer general anesthesia/*deep sedation and/or conscious sedation* to the dentist, and at least once every 5-year period thereafter.
2. The board will renew permits to administer general anesthesia/*deep sedation and/or conscious sedation* 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, personnel, the procedures, *and patient records* used by the holder and an examination of his qualifications.

631.2221 Inspectors and evaluators; participation of members of the board.

1. When an inspection or evaluation is required to issue or renew a permit to administer general anesthesia/*deep sedation and/or conscious sedation*, the board will designate two or more persons, each of whom [meets one or more of the criteria set forth in paragraphs (a) to (h), inclusive, of subsection 2 of NAC 631.2213] *holds a current general anesthesia/deep sedation and/or conscious sedation permit* and has practiced general anesthesia/*deep sedation and/or conscious sedation* for a minimum of 3 years preceding his appointment, exclusive of his training in [general] anesthesia. At least one of the inspectors or evaluators must have had experience in the evaluation of dentists using general anesthesia/*deep sedation and/or conscious sedation*. 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 hold a current anesthesia permit that is the same 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.

631.2223 Inspections and evaluations: General requirements. An inspection or evaluation by the board must be conducted in all offices where general anesthesia/*deep sedation and/or conscious sedation* is to be administered and 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] *an anesthetic of the type for which the dentist is applying* to [each of two patients who are] *a patient who is* receiving dental treatment;
 - (b) Simulated emergencies in the surgical area of the dental office with participation of the staff who are trained to handle emergencies;
 - (c) A dental procedure utilizing [general anesthesia] *the type of anesthesia for which the dentist is applying*.
 - (d) Any anesthesia technique that is routinely employed;
 - (e) The *appropriate* monitoring of the patient during anesthesia[, including the monitoring of the heart or pulse and of respiration]; and
 - (f) The observation of a patient during recovery and the time allowed for recovery.

631.2225 Inspections and evaluations; Simulated emergencies. A dentist's office inspected or evaluated *for a general anesthesia/deep sedation and/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. *Airway obstruction*/Laryngospasm;
2. Bronchospasm;
3. Emesis and aspiration of foreign material under anesthesia;
4. Angina pectoris;
5. [Myocardial] *Myocardial* infarction;
6. Hypotension;
7. Hypertension;
8. Cardiac arrest;
9. Allergic reaction; [and]
10. Convulsions;
11. *Hypoglycemia*;
12. *Asthma*;
13. *Respiratory depression*;
14. *Local anesthesia allergy or overdose*;
15. *Hyperventilation syndrome*; and
16. *Syncope*

631.2227 Inspections and evaluations; Physical facilities and equipment. A dentist's office inspected or evaluated *for a general anesthesia/deep sedation and/or conscious sedation permit* 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] *a dental* chair and to permit an operating team consisting of at least three persons to move freely about the patient.
2. The operating table or *dental* chair must:
 - (a) Permit 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 permit 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 [operation] *procedure* underway at the time of general power failure.
4. Suction equipment must be available that permits aspiration of the oral and pharyngeal cavities. An alternate suction device must be available [.]*which will function effectively in a general power failure.*
5. [The] *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 equipment must include:
 - (a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs (*not required for a conscious sedation permit*);
 - (b) Endotracheal tubes and appropriate connectors (*not required for a conscious sedation permit*);
 - (c) Oral airways
 - (d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;
 - (e) An endotracheal tube type forceps (*not required for a conscious sedation permit*);
 - (f) A sphygmomanometer and stethoscope;
 - (g) An electrocardioscope and defibrillator (*not required for a conscious sedation permit*); [and]
 - (h) Adequate equipment for establishment of an intravenous infusion; and
 - (i) *A pulse oximeter.*

631.2229 Inspection and evaluations. Records of patients. A dentist's office inspected or evaluated *for a general anesthesia/deep sedation and/or conscious sedation permit* must meet the following minimum standards with regard to 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.

631.2231 Inspections and evaluations: Emergency drugs. A dentist's office inspected or evaluated *for a general anesthesia/deep sedation and/or conscious sedation permit* must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. [Corticosteroid] Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant (*not required for a conscious sedation permit*);
5. Intravenous medication for the treatment of cardiopulmonary arrest (*not required for a conscious sedation permit*);
6. Appropriate [narcotic] drug [antagonistic] antagonist;
7. Antihistaminic;

8. Anticholinergic;
9. Antiarrhythmic (*not required for a conscious sedation permit*);
10. Coronary artery vasodilator;
11. Antihypertensive (*not required for a conscious sedation permit*); and
12. Anti-convulsive.

631.2233 Inspections and evaluations; Recommendations of the inspectors or evaluators; decision of the board.

1. The persons performing an inspection or evaluation shall grade the applicant as passing or failing. Each inspector or evaluator shall report his recommendation for passing or failing to the board *within 10 days following the inspection*, setting forth the details supporting his conclusion. The board is not bound by these recommendations.
2. The board must make the final determination whether the applicant has passed or failed the inspection or evaluation and will notify the applicant, in writing, of its findings *within 30 days of receipt of the evaluators or inspectors recommendations*.

631.2235 Inspections and evaluations: Failure to pass; requests for reevaluations.

1. An applicant who the board determines has failed the inspection or evaluation is not entitled to have a permit to administer general anesthesia/*deep sedation and/or conscious sedation* issued or renewed.
2. An applicant 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 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 who has received a notice of failing an inspection or evaluation from the board may request more than one reevaluation within any period of twelve months.

631.2237 Procedures required before administration of *general* [anesthetic.] *anesthesia/deep sedation and/or conscious sedation*.

1. Written consent of the patient must be obtained before the administration of a general anesthetic/*deep sedation and/or conscious sedation unless an emergency exists wherein delaying an anesthesia procedure or other treatment could have an adverse permanent effect on the patient*. In the case of 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 and/or conscious sedation. Patients should be asked to describe any current treatments *and medical conditions*, including [drugs] *medications, drug allergies*, impending *or past* operations, [and pregnancies] *pregnancy status*, and to give other information that may be helpful to the person administering the anesthetic. The dentist is not required to make a *complete* medical evaluation of the patient and draw medical diagnostic conclusions; therefore, 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 [the] 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 and/or conscious sedation* and this record [is] *must be* a permanent part of the patient's record of treatment.

631.2239 Properly equipped facility required; qualifications of auxiliary personnel.

1. A dentist using general anesthetic/*deep sedation and/or conscious sedation* shall maintain a properly equipped facility for the administration of general anesthetic/*deep sedation and/or conscious 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/*deep sedation and/or conscious sedation* [and] *must insure that* his auxiliary personnel [must be proficient] *are currently certified in basic cardiopulmonary resuscitation as sponsored by the American Heart Association*.

631.224 Employment of certified registered nurse anesthetist[.], *physician anesthesiologist, or dental anesthesiologist*.

1. Any dentist who [receives] *holds a current* permit to administer general anesthesia/*deep sedation* pursuant to provisions of NAC 631.2211 to [631.2241]631.2256, inclusive, may employ a certified registered nurse anesthetist *or physician anesthesiologist or dental anesthesiologist* to administer the general anesthetic/*deep sedation and/or conscious sedation* to a patient if the dentist is physically present and directly supervises the administration of the general anesthetic/*deep sedation and/or conscious sedation* to the patient. *The permit holder must maintain written certification that the certified registered nurse anesthetist or physician anesthesiologist or dental anesthesiologist 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. *A dentist who holds a current conscious sedation permit, or any dentist not holding an anesthesia permit, may not allow a certified registered nurse anesthetist or physician or dentist to administer any type of anesthesia to his patients except when treatment is rendered within a facility approved by the Joint Commission on Accreditation of Healthcare Organizations*.

3. *Any licensed dentist may employ a physician anesthesiologist or dental anesthesiologist or a dentist who holds a current general anesthesia permit to administer general anesthesia/deep sedation and/or conscious sedation to his patients at his office of record only if the licensee complies with all the following requirements:*
 - a. *Submits an application to the board on a form approved by the board and submits the statutory fee for site inspection.*
 - b. *The dentist's office of record must be inspected by a board member, or a representative of the board, to certify that the facility is in compliance with NAC 631.2227 through 631.2231.*
 - c. *If the inspecting board member, or a representative of the board completing the inspection finds the site to be in compliance with the requirements as set forth in NAC 631.2227 through 631.2231, the executive director of the board will issue a site certificate to the licensee.*
 - d. *The site certification must be renewed annually; and the board, or its representative, may reinspect the premises at any time to insure compliance with those requirements set forth.*
 - e. *The licensee must maintain written certification that the physician anesthesiologist or dental anesthesiologist administering the anesthesia is licensed in the state of Nevada; and that any physician 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.*

631.2241 Report of injuries to patients. Each holder of a permit to administer general anesthesia/deep sedation and/or conscious sedation and any licensed dentist who is employing a physician anesthesiologist or dental anesthesiologist to administer general anesthesia/deep sedation and/or conscious sedation 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 and/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 required by this section, his permit [will] may be revoked.

[PERMITS TO ADMINISTER CONSCIOUS SEDATION]

[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 requirements set forth in paragraph (b) of subsection 1.

(Added to NAC by Bd. of Dental Exam'rs, eff. 11-28-90)]

[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 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.

(Added to NAC by Bd of Dental Exam'rs, eff. 11-28-90)]

631.2254 Temporary permits.

1. The board may grant a temporary permit to administer *general anesthesia/deep sedation and/or* conscious sedation to an applicant who [has completed a course of study in that subject that has been approved by the board] *has the qualifications for a permit as set forth under NAC 631.2213.*
2. A temporary permit is valid for not more than [1 year] *90 days*, but the board may, in any case it deems appropriate, grant a [1-year] *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 one year] *in accordance with the procedures set forth in NAC 631.2235.*

631.2256 Continuing education required. Every [2] *two* years, the holder of a permit to administer *general anesthesia/deep sedation or* conscious sedation must complete at least [3]

three hours in courses of study *specifically relating to anesthesia [that have been approved by the board]* before his permit may be renewed. This training will be credited toward any continuing education required by NAC 631.173.

(Added to NAC by Bd. of Dental Exam'rs, eff 11-28-90)

[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.

(Added to NAC by Bd of Dental Exam'rs, eff. 11-28-90)]

DISCIPLINARY ACTION

631.230 Unprofessional conduct.

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 to be physically present while a patient is under *general anesthesia/deep sedation and/or* conscious sedation.
 - (i) Administering *general anesthesia/deep sedation* [**conscious sedation**] to more than one patient at a time. [**unless each patient is monitored closely 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 conscious sedation to more than one patient at a time unless each patient is directly supervised by a person authorized by the board to administer conscious sedation.*
 - (k) The failure to have any patient who is undergoing *general anesthesia/deep sedation and/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 and/or* conscious sedation.
 - (m) The failure to obtain a patient's written, informed consent before administering *general anesthesia/deep sedation and/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 an emergency exists wherein delaying an anesthesia procedure or other treatment could have an adverse permanent effect on the patient.*
 - (n) The failure to maintain a record of all written, informed consents given for the administration of *general anesthesia/deep sedation and/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 and/or* conscious sedation was administered [*within the previous 24 hours*]. The report must be made within [*7*] *30* days of the event.
 - (p) *Allowing a person who does not hold a permit to administer general anesthesia/deep sedation and/or conscious sedation to administer general anesthesia/deep sedation and/or conscious sedation to a patient other than in a facility approved by the Joint Commission on Accreditation of Healthcare Organizations unless the anesthesia is administered by a physician anesthesiologist in a facility which has been certified by the board as set forth in NAC 631.224.*
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 have 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.
(Bd of Dental Exam'rs, XXVII, eff, 7-21-92)--(NAC a 10-21-83; 7-30-84; 9-13-85; 4-3-89; 11-28-90)

Informational Statement

The following statement is submitted for adopted temporary regulations to Nevada Administrative Code NAC 631.

1. A description of how public comment was solicited, a summary of public response, and an explanation how other interested persons may obtain a copy of the summary.

Notice of the November 13, 1998, public hearing was posted on October 13, 1998, at the following locations: Carson City, Clark, Elko, Washoe, and White Pine County Courthouses; Carson City County, Churchill County, Clark County, Douglas County, Elko County, Esmeralda County, Eureka County, Humboldt County, Lander County, Lincoln County, Lyon County, Mineral County, Nye County, Pershing County, Storey County, Washoe County, and White Pine County Public Libraries; Las Vegas Office of the Attorney General; Reno City Hall; Clark County District Health Department; and Office of the Nevada State Board of Dental Examiners in Las Vegas, Nevada.

A mailing list of approximately fifty (50) individuals and organizations who have requested notification of the Board's public meetings was also notified at this time.

Comments from the public were limited to clarification of certain sections of the amended regulations.

A copy of the transcript of the public hearing may be obtained by writing to the Nevada State Board of Dental Examiners, 2225-E Renaissance Drive, Las Vegas, NV 89119.

2. The number of persons who:

(a) Attended each hearing:	25
(b) Testified at each hearing:	4
(c) Submitted to the agency written comments:	2

3. A description of how comment was solicited from affected businesses, a summary of their response, and an explanation of how other interested persons may obtain a copy of the summary.

Comments were solicited from licensed dentists and dental hygienists in the State of Nevada through notices to individuals, to the Nevada Dental Association, the Clark County Dental Society, and officers of the Nevada Dental Hygiene Association. As indicated above, notices were posted in all county libraries and in several county courthouses. Other than the aforementioned inquires regarding clarification of sections of the amendments, no other comments were received either in writing or orally. A copy of the transcript of the public hearing may be obtained by writing to the Nevada

State Board of Dental Examiners, 2225-E Renaissance Drive, Las Vegas, NV 89119.

- 4. If the regulation was adopted without changes in any part of the proposed regulation, a summary of the reasons for adopting the regulation without change.**

The regulations were discussed at a public workshop held on November 13, 1998. All requirements and changes were discussed and drafted at this meeting. Therefore, the public hearing was a review of LCB language with no changes requested. One correction was noted and approved by LCB.

- 5. The estimated economic effect of the adopted regulation on the business which it is to regulate and on the public.**

- (a) Both adverse and beneficial effects; and
(b) Both immediate and long-term effects.

See Item #3 of the Notice of Intent to Act

- 6. The estimated cost of the agency for enforcement of the adopted regulations.**

No additional cost is anticipated for the enforcement of these regulations.

- 7. A description of any regulations of other state or government agencies which the proposed regulations overlap or duplicate, and a statement explaining why the duplication or overlapping is necessary. If the regulations overlap or duplicate a federal regulation, the name of the regulating federal agency.**

To our knowledge, there are no other state or government agency regulations which the proposed regulations will overlap or duplicate.

- 8. If the regulations include provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions.**

Each state regulates its own license-holders. Therefore, the federal government has no regulations which directly effect the practice of dentistry and dental hygiene.

- 9. If the regulation provides a new fee or increase an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used.**

No new or increased fees will be instituted by these regulations.