

West Virginia Board of Dental Examiners

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# Anesthesia Update

# CHANGES TO ANESTHESIA PROVISIONS OF THE DENTAL PRACTICE ACT—EFFECTIVE JULY 12, 2013

#### **Qualified Monitors**

Individuals acting as a qualified monitor shall apply annually to the board for a qualified monitor certificate, on a form provided by the board, and accompanied by appropriate application or renewal fees, none of which is refundable.

All monitors, regardless of the level of sedation, shall have received training and be competent in the recognition and treatment of medical emergencies, monitoring vital signs, the operation of nitrous oxide delivery systems and the use of the sphyghmomanometer and stethoscope.

Class 2 permit, the qualified monitor shall possess a Health Care Provider BLS/CPR certification and Nitrous Oxide Monitor certificate.

For Class 3 and 4 permits, the qualified monitor shall possess in addition to the above, certification of successful completion of the AAOMS or AAPD Anesthesia Assistants Certification Program or equivalent training. Equivalent training includes registered or licensed practical nurses, paramedics, emergency medical techs or those who have successfully completed ACLS or PALS, as long as certifications and licenses are current.

A licensed physician or CRNA who is only administering anesthesia during a procedure may act as a qualified monitor without a qualified monitor certificate. A licensed dentist acting as a dentist anesthesiologist, who has a permit to induce any level of anesthesia, who is only administering anesthesia during a dental procedure may act as a qualified monitor without a qualified monitor certificate.

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#### Dr. Craig Meadows

#### A BIG THANK

YOU from the Board and the Anesthesia Committee for your hard work and dedication to the protection of the public as Chair of the Anesthesia Committee.



Changes to the Anesthesia Law become effective July 12, 2013.

# **Changes Continued....**

### Equipment & Emergency Drugs

An automatic external defibrillator (AED) device is required for Class 2 anesthesia permits (Anxiolysis). Previously only general anesthesia and conscious sedation permits required a defibrillator device.

An emergency drug kit is required as developed, updated and published by the Board appropriate for the level of anesthesia induced.

All medications and equipment must be appropriate for height, weight and age of the patient undergoing sedation.

Monitoring of breathing, respiration and airway management shall be described by ASA Standards, Guidelines and Statements for the practice of Anesthesiology, the AAOMS Office Anesthesia Evaluation Manual, or the AAPD Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic or Therapeutic Purposes.

## **Facilities**

When anesthesia services are provided by an MD or DO physician anesthesiologist, or dentist anesthesiologist, the facility shall be inspected and approved for a Class 4 permit, and the treating dentist shall have at least a Class 2 permit.

When anesthesia services are provided by a CRNA, the facility shall be inspected and approved for a Class 4 permit, and the treating dentist shall have a permit of the same class as the anesthesia being provided by the CRNA.

**Familiarize yourself** with the provisions of the Dental Practice Act, SB 580, enacted during the 2013 Legislative Session. Emergency Rules to complement this law will be filed with the Secretary of State in the near future. Electronic copies of SB 580 can be obtained through the Legislative website — www.legis.state.wv.us, click on Bill Status, search for "580", click on Enrolled Committee Substitute. The updated laws and rules will be posted to the Board's website when they become fully effective.