



STAKEHOLDER MEETING

22 TEX. ADMIN. CODE 110

October 4, 2016

At the September 12, 2016, meeting of the Anesthesia Committee (AC) of the Board, the AC identified the following five topics on which it would appreciate stakeholder feedback:

- 1. Sedation/anesthesia education program providers**
- 2. Initial requirements for sedation/anesthesia permitting**
- 3. Continuing education requirements**
- 4. Pediatric designation**
- 5. Permit level definitions and allowed acts**

Staff outlines specific concepts of interest below, but stakeholders are invited to raise other issues for discussion. Staff anticipates a second sedation/anesthesia stakeholder meeting to be held in the weeks following the October 10, 2016, AC meeting.

1. Sedation/Anesthesia Education Program Providers

- Current rules do not require Board approval of initial education program or initial education program providers. On the other hand, continuing education must be provided by a Board-approved provider or a provider that is endorsed by a Board-approved provider.
- Stakeholder input requested on:
 - Establishing standards to approve sedation/anesthesia initial education program providers
 - Establishing standards to approve specific sedation/anesthesia initial education programs/courses
 - Providing information regarding education program providers' supervision of students' "live cases" in initial education program

2. Initial Requirements for Sedation/Anesthesia Permitting

- Current rules do not specify coursework requirements for sedation/anesthesia permitting. Current rules require completion of curriculum consistent with ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students.
 - Level 1 – "16 hours didactic instruction" in enteral and/or combined inhalation/enteral
 - Level 2 – "24 hours of instruction" and 10 case experiences (at least three live in groups no larger than 5; seven may be simulations or video)
 - Level 3 – "60 hours didactic training and instruction" and 20 case experiences using IV sedation
 - Level 4 – CODA-accredited advanced education program

- Stakeholder input requested on:
 - Specifying coursework in initial education programs, e.g. patient selection, patient evaluation, diagnosis, preparation
 - Increasing training hours required to obtain initial permit
 - Increasing live case experiences required to obtain initial permit

3. Continuing Education Requirements

- Current rules require the “completion of the following hours of continuing education every two years on the administration of or medical emergencies associated with the permitted level of sedation”:
 - Level 1 – six hours
 - Levels 2 and 3 – eight hours
 - Level 4 – 12 hours
- Stakeholder input requested on:
 - Specifying CE coursework
 - Increasing CE hours required to renew permits
 - Distinguishing approval of sedation/anesthesia CE providers from standard CE providers

4. Pediatric Designation

- Current rules do not provide a pediatric designation. Current rules require Levels 2, 3, and 4 permit holders who treat patients under 12 years old to maintain current completion of PALS course.
- Stakeholder input requested on:
 - Implementing “designation” – additional permit or modifier on current
 - Specifying initial education requirements to obtain designation
 - Specifying CE requirements to renew designation
 - Defining age limits for designation
 - Setting minimum guidelines for GA in dental office
 - Setting minimum guidelines for N2O and pediatric patients
 - Establishing emergency preparedness guidelines for pediatric patients

5. Permit Level Definitions and Allowed Acts

- Stakeholder input requested on:
 - Providing information related to recommended clinical/technical requirements
 - Instituting an exam-based permitting process
 - Redefining permit levels. The following options may be discussed:
 - Reducing training for N2O and Level 1 permits
 - Combining Level 2 and 3 and imposing same emergency preparedness requirements
 - Revising Level 4 rules to comport with AAPD guidelines
 - Specifying dosages
 - Limiting N2O to concentrations less than 50%
 - Specifying MRD for pediatric/geriatric patients
 - Specifying other drug-specific requirements
 - Specifying use of capnography and/or precordial stethoscope and other requirements