

**APPLICATION FOR PERMIT TO ADMINISTER DEEP SEDATION/
GENERAL ANESTHESIA AND MODERATE SEDATION**

Access this form via website at: cca.hawaii.gov/pvl/boards/dentist

Instructions for Filing:

- 1) Complete on-line fillable application or print legibly in dark ink, sign and date.
- 2) **ATTACH** a non-refundable application fee of **\$100.00** made payable to: **COMMERCE AND CONSUMER AFFAIRS**. (check must be in U.S. dollars and be from a U.S. financial institution.)
Note: A \$25.00 service charge will be assessed for payments that are dishonored for any reason.
- 3) **ATTACH** appropriate documentary evidence showing that you have met the educational/training requirements.
- 4) Mail to: Board of Dentistry
DCCA, PVL Licensing Branch
P. O. Box 3469
Honolulu, HI 96801 Phone: (808) 586-3000

FOR OFFICIAL USE ONLY

APPROVED: <input type="checkbox"/>	Date:
Effective Date:	License No. DT -
Deep Sedation/General Anesthesia - A	
Moderate Sedation - B	

I, _____, am applying for authorization to administer: *(check all that apply)*
(Full Legal Name of Dentist)

- Deep Sedation/General Anesthesia;
- Moderate Sedation;

on an outpatient basis in my dental practice. I understand that in order to receive such written authorization from the Board of Dentistry, I must first complete this application, pay a \$100.00 application fee made payable to: **COMMERCE AND CONSUMER AFFAIRS**, and **submit** documentary evidence showing that I have met the following educational/training requirements:

For Deep Sedation/General Anesthesia:

- Provide the following documents: 1) proof of completion of an advanced dental education program accredited by the American Dental Association ("CODA") and approved by the Hawaii Board of Dentistry ("Board") that provides comprehensive training necessary to administer deep sedation or general anesthesia. Evidence of that comprehensive training shall include but not be limited to: being a Diplomate of the American Board of Oral and Maxillofacial Surgery, a Fellow/Member of the American Association of Oral and Maxillofacial Surgery or completion of an American Dental Association ("ADA") accredited residency in Oral and Maxillofacial Surgery or Dental Anesthesiology; **AND** 2) proof of completion of a current Basic Life Support ("BLS") for the Healthcare Provider course and Advanced Cardiac Life Support ("ACLS") course as required pursuant to Hawaii Administrative Rules ("HAR") §16-79-141(a)(2). If treating pediatric patients and minors thirteen (13) years or older, you will also need to provide proof of completion of a current Pediatric Advanced Life Support ("PALS") course.

In lieu of the above-mentioned requirements:

- If the applicant employs or works in conjunction with the MD anesthesiologist, applicant must provide: 1) a certified letter from a trained MD anesthesiologist, with documentation that the MD anesthesiologist is actively practicing and in good standing, provided that the anesthesiologist shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility; **AND** 2) proof of current certification in Advanced Cardiac Life Support ("ACLS") course or if treating pediatric patients, the Pediatric Advanced Life Support ("PALS") course; provided that proof of current certification of both courses shall be completed if the dentist is treating pediatric patients and minors thirteen (13) years or older.

OR

- If the applicant employs or works in conjunction with a licensed certified registered nurse anesthetist ("CRNA"), applicant must provide: 1) a certified letter from the CRNA with documentation that the CRNA is actively practicing and in good standing, provided that the CRNA shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility; **AND** 2) proof of current certification in Advanced Cardiac Life Support ("ACLS") course or if treating pediatric patients, the Pediatric Advanced Life Support ("PALS") course; provided that proof of current certification of both courses shall be completed if the dentist is treating pediatric patients and minors thirteen (13) years or older.

(CONTINUED ON PAGE 2)

Print Name of Applicant: _____

Date: _____

For Moderate Sedation:

- Provide the following documents: 1) proof of completion of a comprehensive training program at the postgraduate level that meets the moderate (conscious) sedation program objectives and content as outlined in the current ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students. The training program shall be a minimum of sixty (60) hours of instruction, including supervised management of at least twenty (20) moderate (conscious) sedation patients with clinical experience in managing the compromised airway and establishment of intravenous access; AND 2) proof of completion of a current Basic Life Support ("BLS") for the Healthcare Provider course and Advanced Cardiac Life Support ("ACLS") course as required pursuant to Hawaii Administrative Rules ("HAR") §16-79-141(a)(2). If treating pediatric patients and minors thirteen (13) years or older, you will also need to provide proof of completion of a current Pediatric Advanced Life Support ("PALS") course.

In lieu of the above-mentioned requirements:

- If the applicant employs or works in conjunction with a physician ("MD") anesthesiologist, applicant must provide: 1) a certified letter from a trained MD anesthesiologist, with documentation that the MD anesthesiologist is actively practicing and in good standing, provided that the anesthesiologist shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility; AND 2) proof of current certification in Advanced Cardiac Life Support ("ACLS") course or if treating pediatric patients, the Pediatric Advanced Life Support ("PALS") course; provided that proof of current certification of both courses shall be completed if the dentist is treating pediatric patients and minors thirteen (13) years or older.

OR

- If the applicant employs or works in conjunction with a licensed certified registered nurse anesthetist ("CRNA"), applicant must provide: 1) a certified letter from the CRNA with documentation that the CRNA is actively practicing and in good standing, provided that the CRNA shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility; AND 2) proof of current certification in Advanced Cardiac Life Support ("ACLS") course or if treating pediatric patients, the Pediatric Advanced Life Support ("PALS") course; provided that proof of current certification of both courses shall be completed if the dentist is treating pediatric patients and minors thirteen (13) years or older.

NOTES: If treating pediatric patients follow the guidelines and recommendations of the American Academy of Pediatrics and the American Academy of Pediatric Dentistry Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures.

Dental facility* is located at: _____
Street Address Suite No.

 City, State, Zip Code

***A dentist must submit a separate application (including all required supporting documentation and fees) for each facility.**

Dentist's Phone Numbers: Days: _____ Evenings: _____

I understand that my facility must be inspected and approved by a team of consultants selected by the Board. I further understand that I will contact the Board when my facility is ready for inspection.

 Signature Date DT - License No.

If employing or working in conjunction with an MD anesthesiologist or CRNA:

I hereby certify that I hold a current Hawaii license as an MD anesthesiologist or CRNA that is in good standing and I am actively practicing that profession. I understand that I must be present during the dental facility inspection. I further understand that I shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility.

 Print Full Legal Name of MD Anesthesiologist or CRNA

 Signature of MD Anesthesiologist or CRNA Date License No.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

BOARD OF DENTISTRY
335 Merchant St., 3rd Floor Honolulu,
HI 96813

§448-28 Notice to consumers. Every dentist who:

- (1) Is engaged in the practice of dentistry; and
- (2) Administers general anesthesia, deep sedation, or moderate (conscious) sedation, shall display and keep in a conspicuous place at the dentist's place of business a notice no smaller than eight and one-half inches by eleven inches. The notice shall explain that any person may contact the consumer resource center of the department of commerce and consumer affairs' regulated industries complaints office to verify that the dentist is licensed and holds a current and valid written authorization or permit to administer anesthesia or perform sedation, request prior complaint history on a dentist, or file a complaint against a dentist, and that information on the special privilege accorded to a dentist to administer general anesthesia, deep sedation, or moderate (conscious) sedation is reported by the consumer resource center upon request. The notice shall include all available contact information for the consumer resource center, including a telephone number. The text of all information contained in the notice shall be in a font size no smaller than one-half inch. A dentist who fails to ensure the continuous display of such a notice shall be subject to the penalties provided in this chapter.

§448-29 Administration of general anesthesia and sedation; requirements. (a) A licensed dentist shall administer general anesthesia and sedation consistent with the current guidelines and recommendations of the American Dental Association Guidelines for the Use Of Sedation and General Anesthesia by Dentists; provided that for pediatric patients, a licensed dentist shall follow the American Academy of Pediatrics and American Academy of Pediatric Dentistry Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures.

b) No licensed dentist shall administer or employ another person, such as a physician or nurse anesthetist, who is otherwise qualified in this State to administer general anesthesia, deep sedation, or moderate (conscious) sedation for dental patients, unless the licensed dentist possesses a written authorization or permit from the board.

(c) A licensed dentist intending to produce a given level of sedation shall have the capability to rescue patients whose level of sedation becomes deeper than initially intended.

(d) Prior to receiving a written authorization or permit from the board to administer general anesthesia, deep sedation, or moderate (conscious) sedation, a licensed dentist shall apply to the board, pay an application fee, and submit the following:

- (1) Proof of completion of the following educational training requirements:

(A) For general anesthesia and deep sedation:

(i) The applicant has completed an advanced dental education program, accredited by the Commission on Dental Accreditation and approved by the board, that provides comprehensive training necessary to administer deep sedation or general anesthesia and includes documented proficiency in Basic Life Support for Healthcare Providers and Advanced Cardiac Life Support or Pediatric Advanced Life Support as required pursuant to rules adopted by the board; and (ii) Evidence of the comprehensive training required under clause (i) includes but is not limited to: being a diplomate of the American Board of Oral and Maxillofacial Surgery; a fellow or member of the American Association of Oral and Maxillofacial Surgeons; or completion of an American Dental Association-accredited residency in Oral and Maxillofacial Surgery or Dental Anesthesiology, and practicing in compliance with that training;

(B) For moderate (conscious) sedation:

(i) The applicant has completed a comprehensive training program at the postgraduate level that meets the moderate (conscious) sedation program objectives and content as outlined in the current American Dental Association Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students; and

(ii) The training program required under clause (i) shall be a minimum of sixty hours of instruction, include supervised management of at least twenty moderate (conscious) sedation patients with clinical experience in managing the compromised airway and establishment of intravenous access, and provide current documented proficiency in Basic Life Support for Healthcare Providers and Advanced Cardiac Life Support or Pediatric Advanced Life Support as required pursuant to rules adopted by the board; and

(C) A dentist administering general anesthesia or moderate sedation shall be required to complete the Advanced Cardiac Life Support course or, if treating pediatric patients, the Pediatric Advanced Life Support course; provided that both courses shall be completed if the dentist is treating pediatric patients and minors thirteen years or older;

(2) In lieu of the requirements of paragraph (1)(A) and (B), proof that the licensed dentist employs or works in conjunction with a physician who specializes in anesthesiology and is licensed pursuant to chapter 453, or a certified registered nurse anesthetist, who holds a license in good standing pursuant to chapter 457; provided that the physician who specializes in anesthesiology or certified registered nurse anesthetist shall remain on the premises of the dental facility until the patient is fully recovered and discharged from the facility; and

(3) Proof of the following facility and staff requirements: The applicant has a properly equipped facility for the administration of general anesthesia, deep sedation, or moderate (conscious) sedation staffed with a supervised team of auxiliary personnel capable of reasonably handling anesthesia procedures, problems, and emergencies incident to the administration of general anesthesia, deep sedation, or moderate (conscious) sedation; provided that the current version of the American Dental Association's Guidelines for the Use of Sedation and General Anesthesia by Dentists and the most current edition of the American Association of Oral and Maxillofacial Surgeons' Office Anesthesia Evaluation Manual are

referenced as minimum standards of care; provided further that adequacy of the facility and competence of the anesthesia team may be determined by the consultants appointed by the board pursuant to sections 448- C (a), and as provided in rules adopted by the board. (e) A licensed dentist who has received a written authorization or permit pursuant to this section to administer or employ a qualified person to administer general anesthesia, deep sedation, or moderate (conscious) sedation shall renew the authorization or permit biennially and pay a biennial fee. As a condition of renewal, the licensed dentist shall show proof of the dentist's written authorization or permit issued pursuant to this section and resuscitation plan.

(f) The board may, at any time, reevaluate the credentials, facilities, equipment, personnel, and procedures of a licensed dentist who has previously received a written authorization or permit from the board to determine if the dentist is still qualified to have a written authorization or permit. If the board determines that the licensed dentist is no longer qualified to have a written authorization or permit, it may revoke or refuse to renew the authorization or permit, after an opportunity for a hearing is given to the licensed dentist.

§448-30 Inspection of facilities, equipment, and personnel. (a) Prior to the issuance or renewal of a written authorization or permit pursuant to section 448-B, the board shall, in addition to other requirements established by statute or administrative rule, require an on-site inspection of the facility, equipment, and personnel to determine whether the facility and staff requirements pursuant to section 448-B(d) have been met. The inspection to determine whether the facility is adequate and properly equipped may be carried out in a manner that generally follows the guidelines, standards, requirements, and basic principles as described in the most current edition of the American Association of Oral and Maxillofacial Surgeons' Office

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