

Significant Legislative Rule Analysis
WAC 246-817-724, 246-817-740, 246-817-745, 246-817-755, 246-817-760, and
246-817-772, changing monitoring and equipment requirements when
dentists administer anesthetic agents for dental procedures
August 31, 2015

Describe the proposed rule, including a brief history of the issue, and explain why the proposed rule is needed.

The Dental Quality Assurance Commission (commission) is proposing modifications to chapter 246-817 WAC to update the monitoring and equipment requirements to align with the American Dental Association (ADA) and the American Association of Oral and Maxillofacial Surgeons (AAOMS) national standards. The proposed rule sets minimum patient safety standards while administering minimal and moderate sedation.

Monitoring patients' vital signs enhances dentists' ability to monitor patients' safety and take appropriate action. Changes in heart rate, blood pressure, and respiration are all indications that there may be a problem with a patient under sedation.

Lastly, the commission proposes changes to monitoring and equipment requirements to ensure patient safety and to remain consistent with the recognized standard of care while administering minimal and moderate sedation.

The commission held a hearing on October 24, 2014 to adopt an earlier version of these rules. The Washington State Academy of Pediatric Dentistry (WSAPD) expressed concerns with requirement to obtain vitals prior to sedating children and end-tidal carbon dioxide (CO₂) monitoring for moderate sedation with parenteral agents. The commission considered the concerns and determined additional modifications were necessary. The commission has agreed to re-open the dental anesthetic rules after equipment, monitoring, and record keeping changes have been completed to address WSAPD concerns consider revising the complete section for administration of anesthetic agents for dental procedures.

Is a Significant Analysis required for this rule?

Yes, the proposed rule meets the definition of a legislatively significant rule in RCW 34.05.328, and therefore requires a significant analysis.

Clearly state in detail the general goals and specific objectives of the statute that the rule implements.

As stated in RCW 18.32.002, the commission's purpose is to regulate the competency and quality of professional healthcare providers under its jurisdiction by establishing, monitoring, and enforcing qualifications for licensure, continuing education, consistent standards of practice, continuing competency mechanisms, and discipline. Rules, policies, and procedures developed by the commission must promote the delivery of quality health care to the residents of the state.

RCW 18.32.640 authorizes the commission to adopt rules governing administration of sedation and general anesthesia by persons licensed under this chapter, including necessary training; education; equipment; and the issuance of any permits, certificates, or registration as required.

Explain how the department determined that the rule is needed to achieve these general goals and specific objectives. Analyze alternatives to rulemaking and the consequences of not adopting the rule.

The commission proposes changes to monitoring and equipment requirements for patients receiving minimal and moderate sedation to ensure patient safety and to remain consistent with the recognized standard of care. Requiring that all dentists administering minimal or moderate sedation monitor appropriate patient vital signs is consistent with practice standards. Proposed changes to monitoring and equipment requirements ensure patient safety and remain consistent with the recognized standard of care.

Explain how the department determined that the probable benefits of the rule are greater than the probable costs, taking into account both the qualitative and quantitative benefits and costs and the specific directives of the statute being implemented.

In order to gauge the impact of the proposed rule, Department of Health staff and the commission asked stakeholders specific questions about the proposed changes. Feedback about the potential impact of the rule is included in the sectional analysis below.

WAC 246-817-724 Recordkeeping, equipment and emergency medications or drugs required in all sites where anesthetic agents of any kind are administered.

Rule Overview

The proposed rule adds a new requirement for dentists to measure and record pre-sedation vital signs including blood pressure and heart rate. The proposed rule provides an exception when a patient's level of cooperation or other circumstances do not allow for vital sign measures to be obtained.

Rule Cost/Benefit Analysis

Dentists responded that it would only take a nominal amount of time (e.g. less than 2 minutes per procedure) to measure and record vital signs prior to administering any type of anesthetic. The benefit of the proposed rule is that it will help safeguard patients by ensuring the dentist is knows patient vitals. The proposed change will also make the rules consistent with the recognized standard of care when dentists administer anesthetic agents, including sedation, for dental procedures.

WAC 246-817-740 Minimal sedation by inhalation (to include but not limited to nitrous oxide).

Rule Overview

The proposed rule clarifies dentists whom administer minimal sedation by inhalation must take healthcare provider basic life support or advanced cardiac life support certification as part of their continuing education (CE) requirement. These hours are in addition to the already-listed seven hours of sedation related continuing education hours. The rule does not, however, change the total required CE hours dentists must take every renewal cycle.

Rule Cost/Benefit Analysis

This rule does not impose compliance costs for dentists (i.e., they must continue to take the same total CE hours, with one of the courses being either healthcare provider basic life support or advanced cardiac life support certification.) The benefit of the proposed change is that each practitioner will gain skills and knowledge in taking healthcare provider basic life support or advanced cardiac life support certification which may enable them to save a patient that is under duress.

WAC 246-817-745 Minimal sedation.

Rule Overview

The proposed rule requires dentists that administer minimal sedation to record “time administered” in the patient’s record. The proposed rule also clarifies continuing education (CE) language that dentists must take either healthcare provider basic life support or advanced cardiac life support training. These hours are in addition to the already-listed seven hours of sedation related CE hours. The rule, however, does not change the total required CE hours dentists must take every renewal cycle.

Rule Cost/Benefit Analysis

Dentists indicated that the requirement to record time that minimal sedation was administered would only result in a nominal increase in time of the procedure (e.g. less than 2 minutes per procedure). The proposed rule will help safeguard patients and will be consistent with the recognized standard of care. Regarding the required CE classes, this rule does not impose compliance costs for dentists (i.e., they must continue to take the same total CE hours, with one of the courses being either healthcare provider basic life support or advanced cardiac life support certification.) The benefit of the proposed change is that each practitioner will gain

skills and knowledge in taking healthcare provider basic life support or advanced cardiac life support certification which may enable them to save a patient that is under duress.

WAC 246-817-755 Moderate sedation.

Rule Overview

The proposed rule clarifies when dentists renew their permit to perform moderate sedation they must take healthcare provider basic life support or advanced cardiac life support certification as part of their continuing education (CE) requirement. These hours are in addition to the already-listed seven hours of sedation related CE hours. The rule, however, does not change the total required CE hours dentists must take every renewal cycle.

Rule Cost/Benefit Analysis

This rule does not impose compliance costs for dentists (i.e., they must continue to take the same total CE hours, with one of the courses being either healthcare provider basic life support or advanced cardiac life support or pediatric advanced life support certification.) The benefit of the proposed change is that each practitioner will gain skills and knowledge in taking healthcare provider basic life support or advanced cardiac life support certification which may enable them to save a patient that is under duress.

WAC 246-817-760 Moderate sedation with parenteral agents.

Rule Overview

The proposed rule adds new requirements for dentists to monitor and record results for heart rate, blood pressure, and pulse oximetry every five minutes. Dentists must monitor and record a patient's respiration every fifteen minutes while administering moderate sedation with parenteral agents. The proposed rule clarifies when dentists renew their permit to administer moderate sedation with parenteral agents to take either healthcare provider basic life support or advanced cardiac life support or pediatric advanced life support training. These hours are in addition to the already-listed seven hours of sedation continuing education (CE) hours. The rule, however, does not change the total required CE hours dentists must take every renewal cycle.

Rule Cost/Benefit Analysis

Dentists will be required to use pulse oximetry monitors while administering moderate sedation with parenteral agents. Only a nominal amount of time (e.g. less than 2 minutes per procedure) is required to record pulse oximetry vital. A dentist must hold an active dental-moderate-sedation-with-parenteral-agent permit to administer moderate sedation by intravenous line. Currently, there are 247 dentists who hold a moderate sedation with parenteral agent permit. These providers routinely administer moderate sedation during dental procedures in either a dental office or an office-based surgery setting. A patient placed under moderate sedation can easily and unintentionally slip into deep sedation. The cost of a pulse oximetry monitor range from \$20 to over \$200 depending on the model. Training in use of the

monitor is typically provided during the dentist's initial purchase of the pulse oximetry monitor.

This rule does not impose additional continuing education costs for dentists (i.e., they must continue to take the same total CE hours, with one of the courses being either healthcare provider basic life support or advanced cardiac life support or pediatric advanced life support certification.) The benefit of the proposed change is that each practitioner will gain skills and knowledge in taking healthcare provider basic life support or advanced cardiac life support certification which may enable them to save a patient that is under duress.

WAC 246-817-772 Training requirements for anesthesia monitor.

Rule Overview

The proposed rule removes the statement requiring that a trained individual be present to monitor cardiac and respiratory functions in addition to individuals necessary to assist in the dental procedure. The proposed rule also removes training from the title of the rule. An anesthesia monitor may or may not be necessary when specific conditions apply:

- When a dentist is administering general anesthesia or moderate sedation with parenteral agents and providing the dental treatment.
- When a dentist is only administering general anesthesia or moderate sedation with parenteral agents, the dentist may act as the anesthesia monitor, a separate anesthesia monitor is not required.

Rule Cost/Benefit Analysis

The rule is intended to define appropriate training for an anesthesia monitor. The proposed deletion does not reduce patient safety because WAC 246-817-770 identifies when a trained anesthesia monitor is required during a procedure.

Overall Cost/Benefit summary

The proposed rules make several changes to equipment, monitoring, and record keeping when dentists administer anesthetic agents for dental procedures. Although there are some costs to comply with the proposed changes, the benefit of improved patient safety outweigh these costs. Therefore the total probable benefits of the rule exceed the total probable costs.

Identify alternative versions of the rule that were considered, and explain how the department determined that the rule being adopted is the least burdensome alternative for those required to comply with it that will achieve the general goals and specific objectives state previously.

WAC 246-817-724

Descriptions of alternatives considered

The commission considered alternative rule language that included pre-sedation vital signs when administering minimal sedation by inhalation. The commission changed to exclude pre-sedation vital signs when administering minimal sedation by inhalation because standard of care is an objective measurement based on individual patient care.

The commission considered alternative rule language that had pre-sedation vitals as last paragraph. The commission moved the paragraph to #2 in list of requirements improve the order of requirements.

Least burdensome determination

The proposed rule is the least burdensome option as it provides a clear requirement of when a dentist must measure pre-sedation vital signs.

WAC 246-817-740

Descriptions of alternatives considered

The commission considered an alternative requirement that included measuring and recording a beginning and ending blood pressure vital sign when administering minimal sedation by inhalation. Additionally, an alternative considered did not include changes to clarification of continuing education requirements.

Least burdensome determination

The proposed rule is the least burdensome option as it lists pre-sedation vital signs in WAC 246-817-724 (although it excludes pre-sedation vital signs when administering minimal sedation by inhalation).

WAC 246-817-745

Descriptions of alternatives considered

The commission considered an alternative requirement that included measuring and recording a beginning and ending blood pressure vital sign when administering minimal sedation. Additionally, an alternative considered did not include changes to clarification of continuing education requirements.

Least burdensome determination

The proposed rule is the least burdensome option as it lists pre-sedation vital signs in the WAC 246-817-724.

WAC 246-817-755

The proposed rule is the only means of achieving clear continuing education requirements. No alternative version was considered.

WAC 246-817-760

Descriptions of alternatives considered

The commission considered an alternative requirement that included monitoring and recording expired carbon dioxide (CO₂) and to have an electrocardiographic monitor when administering moderate sedation with parenteral agents. Additionally, an alternative considered did not include changes to clarification of continuing education requirements.

Least burdensome determination

The proposed rule is the least burdensome option as it does not include the additional equipment, monitoring, and record keeping requirements. The commission will reevaluate this standard when it updates the entire administration of anesthetic agents rule section in the near future.

WAC 246-817-772

Descriptions of alternatives considered

The commission considered an alternative that included training in the title of the rule. The commission determined to delete the term training from the title to better express the rule includes more than just training. An anesthesia monitor may or may not be necessary when specific conditions apply:

- When a dentist is administering general anesthesia or moderate sedation with parenteral agents and providing the dental treatment.
- When a dentist is only administering general anesthesia or moderate sedation with parenteral agents, the dentist may act as the anesthesia monitor, a separate anesthesia monitor is not required.

Least burdensome determination

The proposed rule is the only option to clarify the unnecessary statement in the rule and ensures the rule title includes all requirements of rule.

Determine that the rule does not require those to whom it applies to take an action that violates requirements of another federal or state law.

The rule does not require those to whom it applies to take an action that violates requirements of federal or state law.

Determine that the rule does not impose more stringent performance requirements on private entities than on public entities unless required to do so by federal or state law.

The rule does not impose more stringent performance requirements on private entities than on public entities.

Determine if the rule differs from any federal regulation or statute applicable to the same activity or subject matter and, if so, determine that the difference is justified by an explicit state statute or by substantial evidence that the difference is necessary.

The rule does not differ from any applicable federal regulation or statute.

Demonstrate that the rule has been coordinated, to the maximum extent practicable, with other federal, state, and local laws applicable to the same activity or subject matter.

There are no other applicable laws.