
Health Care & Wellness Committee

E2SSB 5620

Brief Description: Requiring the certification of dental anesthesia assistants.

Sponsors: Senate Committee on Health & Long-Term Care (originally sponsored by Senators Becker, Keiser and Parlette).

Brief Summary of Engrossed Second Substitute Bill

- Creates a new credential for certified dental anesthesia assistants.

Hearing Date: 2/16/12

Staff: Jim Morishima (786-7191).

Background:

Dentists are licensed and subject to discipline by the Dental Quality Assurance Commission (DQAC). The practice of dentistry includes the performance of maxillofacial surgery, which is a specialty that includes the diagnosis and surgical and adjunctive treatment of diseases, injuries, and defects of the hard and soft tissues of the oral and maxillofacial region.

Licensed dentists may also perform conscious sedation and general anesthesia under certain circumstances. For example, to administer moderate or general anesthesia, a dentist must obtain a permit of authorization from the DQAC. In order to obtain a permit, the dentist must meet education and training requirements that vary depending on the type of anesthesia involved.

When a dentist administers an anesthetic to a patient, a trained individual must be present to monitor the patient's cardiac and respiratory functions (for deep sedation and general anesthesia, the dentist may serve as the monitor). A monitor must have at least 14 hours of training in the use of certain equipment, basic sciences, evaluation and preparation of patients with systemic diseases, anesthetic drugs and techniques, anesthesia equipment and monitoring, and office anesthesia emergencies.

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If the dentist does not have an anesthesia permit, another licensed dentist, a certified nurse anesthetist, or a physician anesthesiologist may provide the anesthesia services. The provider who provides the services is responsible for the anesthetic management of the patient. Dental assistants and expanded function dental auxiliaries may not administer any general or local anesthetic.

Summary of Bill:

No person may practice or represent himself or herself as a certified dental anesthesia assistant (CDAA) without being certified by the DQAC. A CDAA may not represent himself or herself as a dental assistant unless he or she meets the standards for registered dental assistants.

A CDAA may perform the following services delegated by, and under the supervision of, an oral and maxillofacial surgeon, or a dental anesthesiologist:

- Under close supervision, the CDAA may: (a) initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation, or general anesthesia; and (b) adjust the rate of intravenous fluids infusion only to keep the line patent or open.
- Under direct visual supervision the CDAA may: (a) draw up and prepare medications; (b) follow instructions to deliver medication into an intravenous line upon verbal command; (c) adjust the rate of intravenous fluids infusion beyond a keep open rate; (d) adjust an electronic device to provide medications, such as an infusion pump; and (e) administer emergency medications to assist the oral and maxillofacial surgeon or dental anesthesiologist in an emergency.

The responsibility for monitoring a patient and determining the selection of the drug, dosage, and timing of all anesthetic medications rests solely with the oral maxillofacial surgeon or dental anesthesiologist. If the CDAA does not possess advanced cardiac life support training, the oral and maxillofacial surgeon or dental anesthesiologist must be current in such training.

A person may be certified as a CDAA if he or she:

- completes a DQAC-approved dental anesthesia assistant training course, including intravenous access or phlebotomy and experience starting and maintaining intravenous lines;
- completes a DQAC-approved basic life support/cardiac pulmonary resuscitation course; and
- provides the valid general anesthesia permit of the oral and maxillofacial surgeon or dental anesthesiologist where the CDAA will be performing his or her services.

Appropriation: None.

Fiscal Note: Requested on February 14, 2012.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.