

64B5-14 Anesthesia Rules

Below is a list of changes the Board of Dentistry recently approved to 64B5-14, the Anesthesia Rules. These changes are effective March 10, 2020. Please note, while this list is extensive, it is not meant to be exhaustive. Please make sure to read the rules in their entirety. The new, updated rules can be found [here](#).

- Require the team approach for all types of sedation, which includes the operating dentist, a person responsible for monitoring the patient and a person to assist the operating dentist.
- Clarify that a dentist utilizing general anesthesia, deep sedation, moderate sedation or pediatric moderate sedation in the dental office may only have one patient at a time induced. A second patient shall not be induced until the first patient is awake, alert, conscious, spontaneously breathing, has stable vital signs, is under the care of a responsible adult and that portion of the procedure required in the participation of the dentist is complete. In an office setting where two or more permit holders are present simultaneously, each may sedate one patient provided that the office has the necessary staff and equipment for each sedated patient.
- Effective March 1, 2022:
 - General Anesthesia Permit Holder: If treating a patient under the age of 7, a dentist utilizing any level of sedation must be currently trained in PALS (Pediatric Advanced Life Support).
 - Moderate Sedation Permit Holder: If treating a patient under the age of 7, a dentist utilizing moderate sedation must be currently trained in PALS.
 - However, if the intent for administering nitrous is for mild sedation, then PALS is not required if treating a patient under 7.
- Routine inspections shall be conducted at a minimum of every three years. And any additional location shall be subject to a routine inspection no later than one year from the date the location was added.
- During the initial inspection, a dental procedure utilizing general anesthesia/deep sedation, moderate sedation and pediatric moderate sedation must be observed and evaluated.
 - The only time demonstration of placement of an intravenous catheter is required is upon initial inspection for general anesthesia and moderate sedation permit holders. This is NOT a requirement for pediatric moderate sedation permit holders.
- All rooms where sedation is being performed must accommodate the patient on a table or in an operating chair and permit an operating team consisting of at least three individuals to freely move about the patient. An operating table or chair which permits the patient to be positioned so the operating team can maintain the airway quickly alter patient position in an emergency and provide a firm platform for the management of CPR.
- The anesthesia record must include the duration of the procedure, including the start and finish time of the procedure.
- Clarification on the definition of a physician anesthesiologist
 - Any physician licensed pursuant to Chapter 458 or 459, F.S., who is currently board certified or board eligible by the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology, or currently holds anesthesia

clinical privileges in a hospital or ambulatory surgical facility licensed pursuant to Chapter 395 and such privileges are commensurate with the anesthesia being provided in a dental office (e.g., pediatric anesthesia privileges if pediatric patients are being treated in the dental office). ~~is credentialed to administer anesthesia in a hospital or ambulatory surgical facility licensed pursuant to Chapter 395, F.S~~

- Applying for a pediatric moderate sedation permit:

3) Pediatric Moderate Sedation Permit.

(a) To be eligible for a permit to authorize the use of pediatric moderate sedation at a specified practice location or locations on an outpatient basis for dental patients, the dentist shall comply with Rules 64B5-14.0025, F.A.C., and:

1. Complete formal training in the use of pediatric moderate sedation through a Commission on Dental Accreditation accredited dental school or program, or through an accredited teaching hospital, or through an accredited pediatric residency program. Clinical training must take place at the accredited dental school or accredited teaching hospital and,

2. Is certified by the institution where the formal training was received to be competent in the administration of pediatric moderate sedation and is competent to handle all emergencies relating to pediatric moderate sedation.

(b) This certification shall specify the type, the number of hours, the number of patients treated and the length of training. The minimum number of didactic hours shall be sixty (60), which must include four (4) hours of airway management. Clinical training shall include personal administration for at least twenty (20) patients including supervised training, management of sedation, clinical experience and demonstrated competence in airway management of the compromised airway. The program must certify that three (3) hours of clinical training was dedicated to hands-on simulated training in emergency airway management of the compromised airway;

- Nitrous change
 - Must have a dental nitrous-oxide delivery system with fail-safe features and a 30% minimum oxygen flow. Previously this was a 25% minimum oxygen flow.
 - Dental assistants and dental hygienists may monitor nitrous-oxide inhalation analgesia under the indirect supervision of a dentist if the dental assistant or dental hygienist has complied with the training requirements in paragraph 64B5-14.003(4)(b), F.A.C., and has completed, at a minimum, a two-day course of training as described in the American Dental Association's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" or its equivalent. After the dentist has induced a patient and established the maintenance level, the assistant or hygienist may monitor the administration of the nitrous-oxide oxygen making only diminishing adjustments during this administration and turning it off at the completion of the dental procedure.

- Reminders:
 - No dentist licensed in this state shall administer or employ the use of general anesthesia, deep sedation, moderate sedation, and pediatric moderate sedation until they have obtained a permit as required by the provision of this chapter, unless specifically authorized otherwise by this chapter. The permit requirements of this chapter do not apply when treating patients at hospitals or ambulatory surgery centers licensed pursuant to Chapter 395, F.S
 - No dentist shall administer, supervise or permit another health care practitioner, as defined in Section 456.001, F.S., or perform the administration of general anesthesia, deep sedation, moderate sedation or pediatric moderate sedation in a dental office for dental patients, unless such dentist possesses a permit issued by the Board. *A permit is required even when another health care practitioner, as defined in Section 456.001, F.S., administers general anesthesia, deep sedation, moderate sedation, or pediatric moderate sedation in a dental office for a dental patient.* The dentist holding such a permit shall be subject to review and such permit must be renewed biennially. Each dentist in a practice who performs the administration of general anesthesia, deep sedation, moderate sedation or pediatric moderate sedation shall each possess an individual permit. Nothing in this paragraph shall be construed to prohibit administration of anesthetics as part of a program authorized by Rule 64B5-14.003, F.A.C., for training in the anesthetic being administered, or pursuant to a demonstration for inspectors pursuant to Rule 64B5-14.007, F.A.C.
- Itinerate physician anesthesiologist
 - As long as the permit holder's dental office meets the supply, equipment, and facility requirements as mandated in Rule 64B5-14.008, F.A.C., nothing in the rules shall be interpreted to prevent a physician anesthesiologist from utilizing their non-fixed mobile equipment when providing anesthesia services in the permit holder's dental office.