FINAL BILL REPORT E2SSB 5620

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Synopsis as Enacted

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).

Senate Committee on Health & Long-Term Care House Committee on Health Care & Wellness

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 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.

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 person 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: No person may practice or represent himself or herself as a certified dental anesthesia assistant (CDAA) without being certified by DQAC. A CDAA may work only under the supervision of an oral and maxillofacial surgeon or a dental anesthesiologist. CDAAs may not represent themselves as dental assistants unless they meet the standards for registration under chapter 18.260 RCW.

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Under close supervision, a CDAA may initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation, or general anesthesia and may adjust the rate of intravenous fluid infusion only to maintain and keep the line open. Under direct visual supervision, a CDAA may draw up and prepare medications, follow instructions to deliver medication into an intravenous line upon verbal command, adjust an intravenous line beyond a keep open rate, adjust an electronic device to provide medications, and administer emergency medications. 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 and maxillofacial surgeon or dental anesthesiologist.

In order to qualify for certification, a CDAA must complete a DQAC-approved dental anesthesia assistant training course, including intravenous access or phlebotomy; be trained on starting and maintaining intravenous lines; complete a DQAC-approved basic life support/cardiac pulmonary resuscitation course; and provide proof that the office where the dentist will work possesses a valid general anesthesia permit.

CDAAs are subject to the Uniform Disciplinary Act and are under the authority of DQAC.

Votes on Final Passage:

Senate 46 2 House 97 0

Effective: June 7, 2012