

WAC 246-817-770 General anesthesia and deep sedation. (1) A licensed dentist is required to hold a permit of authorization to administer deep sedation or general anesthesia. A general anesthesia permit allows the holder to deliver moderate sedation with enteral or moderate sedation with parenteral agents without obtaining a separate permit.

(2) To obtain a general anesthesia permit, a licensed dentist shall:

(a) Comply with permitting and renewal requirements in WAC 246-817-774;

(b) Successfully complete two years of continuous full-time anesthesia training in at least one of the following:

(i) A dental anesthesiology program accredited by CODA at the time the training was completed; or

(ii) A dental anesthesiology program approved by the DQAC; or

(iii) An anesthesia residency training, with a minimum of two years full-time, at a medical program accredited by the Accreditation Council for Graduate Medical Education; or

(iv) An oral and maxillofacial surgery residency and obtain at least one of the following:

(A) Diplomate status of the American Board of Oral and Maxillofacial Surgery;

(B) Fellow status of the American Association of Oral and Maxillofacial Surgeons; or

(C) Diploma in an Oral and Maxillofacial Residency Program accredited by CODA at the time the training was completed.

(3) In addition to meeting one or more of the requirements in subsection (1) of this section, the licensed dentist shall have a current ACLS certification.

(4) A licensed dentist shall:

(a) Ensure a patient is evaluated for general anesthesia prior to the administration of any sedative.

(i) Review the patient's medical history, medication use, and NPO or nothing by mouth status.

(ii) Consult with the patient's primary care physician or consulting medical specialist for significant medical considerations whom have American Society of Anesthesiologists patient classification of III or IV.

(iii) A patient's body mass index must be assessed as part of a preprocedural workup.

(iv) A focused physical examination to include vital signs, evaluation of the airway, and auscultation of the heart and lungs is required before administration of any sedative or anesthesia agent.

(b) Ensure a patient receiving deep sedation or general anesthesia has continual monitoring of their heart rate, blood pressure, respiration, and expired CO₂.

(i) The licensed dentist shall utilize electrocardiographic monitoring, pulse oximetry, and end-tidal CO₂ monitoring.

(ii) Electrocardiograph monitoring must be continuously displayed from the beginning of general anesthesia and until the patient reaches the level of stage 1 anesthesia after treatment is completed.

(c) The patient's blood pressure, heart rate, and respiration rate shall be recorded every five minutes.

(d) To complete dental procedures under general anesthesia, the anesthesia permit holder, the anesthesia monitor, and the dental assistant shall all be present in the operating or treatment room. Dur-

ing deep sedation or general anesthesia, the anesthesia provider and the provider monitoring the patient may not leave the immediate area.

(e) During the recovery phase, the patient must be continually observed by the anesthesia provider or credentialed personnel acting within their scope of practice and trained in recovery phase of anesthesia.

(f) A discharge entry must be made in the patient's record indicating the patient's condition upon discharge and the responsible party to whom the patient was discharged.

(5) A licensed dentist who holds a valid general anesthesia permit shall document in the patient record appropriate medical history and patient evaluation. Anesthesia records must be recorded during the procedure in a timely manner and must include:

(a) Blood pressure;

(b) Heart rate;

(c) Respiration;

(d) Pulse oximetry;

(e) End-tidal CO₂;

(f) Drugs administered including amounts and time administered;

(g) Length of procedure; and

(h) Any complications of anesthesia.

(6) A licensed dentist shall comply with the following record-keeping, equipment, and emergency medication requirements:

(a) Equipment used for monitoring patients must be calibrated or performance verified according to manufacturer's instructions;

(b) An operating theater must be large enough to adequately 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;

(c) An operating table or chair must permit 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 administration of basic life support;

(d) A lighting system must be adequate to permit evaluation of the patient's skin and mucosal color and a backup lighting system of sufficient intensity to permit conclusion of any procedure underway at the time of general power failure;

(e) Suction equipment capable of aspirating gastric contents from the mouth and pharyngeal cavities. A backup suction device must be available;

(f) An oxygen delivery system with adequate full face masks and appropriate connectors that is capable of delivering high flow oxygen to the patient under positive pressure, together with an adequate portable backup system;

(g) A recovery area that has available oxygen, adequate lighting, suction, and electrical outlets. The recovery area can be the operating theater;

(h) Ancillary equipment must include the following:

(i) Laryngoscope complete with adequate selection of blades, spare batteries, and bulb;

(ii) Endotracheal tubes and appropriate connectors, and laryngeal mask airway and other appropriate equipment necessary to do an intubation;

(iii) Oral airways;

(iv) Tonsillar or pharyngeal suction tip adaptable to all office outlets;

- (v) Endotracheal tube forceps;
 - (vi) Sphygmomanometer and stethoscope;
 - (vii) Adequate equipment to establish an intravenous infusion;
 - (viii) Pulse oximeter or equivalent;
 - (ix) Electrocardiographic monitor;
 - (x) End-tidal CO₂ monitor; and
 - (xi) AED or defibrillator as defined in WAC 246-817-722.
- (i) Emergency drugs of the following types must be maintained:
- (i) Vasopressor or equivalent;
 - (ii) Corticosteroid or equivalent;
 - (iii) Bronchodilator including, but not limited to, albuterol;
 - (iv) Muscle relaxant;
 - (v) Intravenous medications for treatment of cardiac arrest;
 - (vi) Narcotic antagonist;
 - (vii) Benzodiazepine antagonist;
 - (viii) Antihistaminic including, but not limited to, diphenhydramine;
 - (ix) Anticholinergic;
 - (x) Antiarrhythmic;
 - (xi) Coronary artery vasodilator including, but not limited to, nitroglycerin;
 - (xii) Antihypertensive;
 - (xiii) Anticonvulsant; and
 - (xiv) ACLS or PALS emergency drugs.

(7) A licensed dentist who holds a valid general anesthesia permit and administers general anesthesia in another licensed dentist office, must have a contract in place that contains the provisions required in WAC 246-817-778 (1)(a) through (c).

(8) A licensed dentist who holds a valid general anesthesia permit shall complete 18 hours of continuing education every three years as required in WAC 246-817-773.

(9) A licensed dentist who holds a valid general anesthesia permit must hold a current and valid ACLS certification.

[Statutory Authority: RCW 18.32.0365 and 18.32.640. WSR 24-01-033, § 246-817-770, filed 12/11/23, effective 1/11/24. Statutory Authority: RCW 18.32.0365, 18.32.640 and 18.32.002. WSR 14-21-068, § 246-817-770, filed 10/10/14, effective 11/10/14. Statutory Authority: RCW 18.32.640 and 18.32.0365. WSR 09-04-042, § 246-817-770, filed 1/30/09, effective 3/2/09. Statutory Authority: RCW 18.32.035. WSR 95-21-041, § 246-817-770, filed 10/10/95, effective 11/10/95.]