

## Draft guidelines for consultation

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### Guidelines on Conscious Sedation Area of Practice Endorsement

Date: 10 August 2011

#### Introduction to the consultation draft

Under the *Health Practitioner Regulation National Law Act 2009* (the National Law), the Dental Board of Australia (the Board) is empowered to develop and approve guidelines to provide guidance to registered dental practitioners.

The proposed *Guidelines on Conscious Sedation Area of Practice Endorsement* have been drafted to supplement the requirements set out in the Board's *Registration standard for endorsement in relation to conscious sedation* (the Standard) which was approved by Ministerial Council on 31 March 2010. The Board has been assisted in drafting the guidelines by an expert Working Group. The Working Group has been established to advise the Board on a range of matters relating to the education, qualifications, assessment, pathways to registration and ongoing requirements for endorsement for the conscious sedation area of practice. The membership of the Working Group includes practitioners co-opted from outside the Board who have expertise about education and the regulatory requirements for conscious sedation area of practice endorsement.

The Board has currently released guidelines on the **transition** for dentists to the endorsement for conscious sedation - *Registration Guideline Conscious Sedation Area of Practice Endorsement* (which can be found on the Board's website at <http://www.dentalboard.gov.au/Codes-and-Guidelines.aspx>) The transition phase for dentists to meet the requirements of the Standard ends on 18 October 2011 (which is 12 months after Western Australia joined the national registration and accreditation scheme).

#### Your comments invited

The Board now invites interested stakeholders to provide their written comments on the draft Guidelines. Your feedback can be emailed or posted:

**To:** The Executive Officer  
Dental Board of Australia  
**Email:** [dentalboardconsultation@ahpra.gov.au](mailto:dentalboardconsultation@ahpra.gov.au) or  
**Post:** GPO Box 9958  
MELBOURNE VIC 3001

**Due date:** Close of business **Friday 07 October 2011**.

## Publication of submissions

The Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the reference. Before publication, we may remove personally identifying information from submissions.

The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Board.

The Board also accepts submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982 (Cth)*, which has provisions designed to protect personal information and information given in confidence. Please let us know if you do not want us to publish your submission, or want us to treat all or part of it as confidential.

## GUIDELINE

### Conscious Sedation Area of Practice Endorsement

#### Authority

This Guideline has been developed by the Dental Board of Australia (the Board) under section 39 of the *Health Practitioner Regulation National Law Act* (National Law) as in force in each state and territory.

#### Purpose

A Registration Standard for *Endorsement in relation to conscious sedation* (the Standard) was developed by the Board and approved by Ministerial Council on 31 March 2010. The Standard establishes the requirements of the Board in relation to an endorsement in relation to conscious sedation for dentists. This Guideline provides further detail for dental practitioners in relation to the specific practice, education and exemptions from the requirements of the Standard.

#### Background

The Standard for the first time establishes a nationally consistent set of requirements for dentists who practice conscious sedation. The Standard defines the dentists who need to be endorsed in order to practise in this area and this Guideline clarifies additional issues which have been raised following consultation on the Standard and set out exemptions as allowed by the Standard.

#### Summary of Guideline

The Board has developed this Guideline to give guidance on:

1. the designation, qualifications, skills and competence of the 'registered person' under the Standard to assist the endorsed dentist;
2. the ongoing education and training requirements for both the endorsed dentist and the 'registered person' assisting the endorsed dentist; and
3. the routes of administration of sedation to which the Standard applies.

#### 1. Registered person assisting the endorsed dentist

It is the endorsed dentist's responsibility under the Standard to ensure that all the requirements of the Standard are met. So that the endorsed dentist may also perform the dental procedure, the Standard states that the endorsed dentist, when administering conscious sedation by the intravenous route, must be assisted by another person in attendance for the entire operation who is either:

- a) a **registered nurse who has received training in intensive care or anaesthesia**; or
- b) a **registered dentist, appropriately trained** in the observation and monitoring of sedated patients and in resuscitation, whose sole responsibility in assisting is to monitor the level of consciousness and cardio respiratory function of the patient.

The term **registered nurse who has received training in intensive care or anaesthesia** used in the Standard may also include an Enrolled nurse (Division 2), who is:

1. registered in that division of the Register of Nurses by the Nursing and Midwifery Board of Australia who is educated and competent in the administration of intravenous medications venipuncture and cannulation; and also
2. has successfully completed post graduate qualifications in anaesthetic nursing at an advanced diploma level or equivalent courses (with appropriate supporting documentation) and has extensive experience in operating theatre and/or anaesthetic nursing.

## 2. Education and training requirements

**For the endorsed dentist:** The Centre for Resuscitation Education and Simulation Training (Incorporated) (CREST) course is the course the Board has currently approved for the endorsed dentist to attend each 12-month period. The Board will publish any additional courses it considers equivalent to the CREST course.

**For the assistant to the endorsed dentist:** The Board recommends that the assistant to the endorsed dentist should in each 12 months attend and successfully participate in an advance life support course to maintain competency. This recommendation meets the Australian Resuscitation Council standard.

## 3. Routes of administration

The Standard states that:

*this endorsement applies to conscious sedation only and does not include general anaesthesia or anxiolysis techniques. Relative analgesia using nitrous oxide on its own is excluded from this standard for all dental practitioners.*

Anxiolysis may include oral or inhalation-type medications not combined, in minimal doses for treating anxious patients or providing analgesia, but not inducing a state of conscious sedation.

Therefore the Standard does not apply to dentists using nitrous oxide on its own and does not apply to nitrous oxide when used in combination with local anaesthetic. Therefore dentists are not required to be endorsed by the Board under the *Health Practitioner Regulation National Law Act*, as in force in each state and territory, for use of nitrous oxide and local anaesthetic.

The Standard also states that general anaesthetic must only be administered by a registered medical practitioner. General anaesthesia does not include conscious sedation in the Standard.

The endorsement in relation to *conscious sedation* is only for that **limited area of practice**. The administration of medication may be by any accepted route approved for that specific use by relevant authorities, such as oral, inhalation and intravenous inductions. The prescription and use of medications are regulated by a number of government authorities. The Australian and New Zealand College of Anaesthetist's Professional Standards document PS9 (2010) does not define the requirements to be endorsed under the Standard.

**To note:**

1. An **endorsed dentist** must ensure that he or she adheres to State and Territory jurisdictional requirements in addition to all relevant professional standards, guidelines and requirements approved by the Board.
2. **All dentists**, including those not endorsed for this Standard, when prescribing, authorising the use and administering medications, must follow appropriate legislation and guidelines for the use and administration of medications.

## Definitions

**Conscious sedation** – means a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by tactile stimulation. No interventions are required to maintain a patent airway and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

**Professional Standards document PS9** – Document published by the Australian and New Zealand College of Anaesthetists (ANZCA) and the Royal Australasian College of Dental Surgeons (RACDS).

**General anaesthesia** means a drug-induced loss of consciousness during which patients are not arousable, even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function. Cardiovascular function may be impaired.

**Anxiolysis** means a drug-induced state during which patients respond normally to verbal commands.

## Review

The Board will review this Guideline at least every three years.

Date of issue: XXXX 2011  
Date of review: XXXX 2014  
Last reviewed: