

**BOARD OF DENTISTRY
COUNCIL ON DENTAL HYGIENE
MEETING MINUTES**

**Call In Number (888) 585-9008, Participant Pass Code: 599-196-982
November 2, 2021
6:00 p.m. EST**

**Participants in this public meeting should be aware that these proceedings are being recorded
and that an audio file of the meeting will be posted to the board's website.**

I. CALL TO ORDER

MEMBERS PRESENT

Ms. Karyn Hill, RDH, Chair
Dr. Jose Mellado, DMD
Ms. Sophia Zapata, RDH
Ms. Danielle Driscoll, RDH
Ms. Candy Velez, RDH

STAFF PRESENT

Paulette Schofill, Program Administrator
Jessica Sapp, Executive Director

BOARD COUNSEL

Lawrence Harris, Esq.
Senior Assistant Attorney General

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II. DISCUSSION ITEMS

Ms. Hill introduced the agenda items which were brought forward by board member, Angela Johnson. Ms. Johnson gave a brief overview of the proposed changes.

- a. Nitrous Oxide Administration
 - i. Rule 64B5-14.002, F.A.C.

64B5-14.002 Prohibitions.

- (1) No Change.
- (2) Nitrous-oxide inhalation analgesia. No dentists or dental hygienist licensed in this State shall administer nitrous-oxide inhalation analgesia in the practice of dentistry until they have complied with the provisions of this rule chapter. No agents other than nitrous-oxide and oxygen shall be used for inhalation analgesia pursuant to Rule 64B5-14.003, F.A.C.
- (3) – (8) No Change.

- b. Training Requirements for Nitrous Oxide Administration
 - i. Rule 64B5-14.003, F.A.C.

64B5-14.003 Training, Education, Certification, and Requirements for Issuance of Permits.

- (1) - (3) No Change.
 - (4) Nitrous-Oxide Inhalation Analgesia.
 - (a) A dentist may employ or use and may authorize a dental hygienist to administer under indirect supervision, nitrous-oxide inhalation analgesia on an outpatient basis for dental patients, provided such dentist and dental hygienist
- Council on Dental Hygiene Minutes
November 2, 2021
Page 1 of 3

have:

1. Has eCompleted no less than 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 (eff. 10/16), which is hereby incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-11670> or available at <http://www.floridadentistry.gov>, or its equivalent, or

2. Has tTraining equivalent to that described above while a student in an accredited school of dentistry or dental hygiene; and,

3. Has a Adental nitrous-oxide delivery system with fail-safe features and a 30% minimum oxygen flow.

(b) A dentist utilizing nitrous-oxide inhalation analgesia and such dentist's assistantss and / dental hygienist personnel shall be certified in an American Heart Association or American Red Cross or equivalent Agency sponsored cardiopulmonary resuscitation course at the basic life support level to include one man CPR, two man CPR, infant resuscitation and obstructed airway with a periodic update not to exceed two years. A dentist and all assistant/dental hygienist personnel shall also be trained in the use of either an Automated External Defibrillator or a defibrillator and electrocardiograph as part of their cardiopulmonary resuscitation course at the basic life support level. In addition to CPR certification, a dentist utilizing pediatric moderate sedation must be currently trained in PALS (Pediatric Advanced Life Support).

(c) – (d) No Change

(e) 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 or dental assistant 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.

(5) No Change.

c. Remediable Tasks Delegable to a Dental Hygienist
i. Rule 64B5-16.006, F.A.C.

64B5-16.006 Remediable Tasks Delegable to a Dental Hygienist.

(1) – (5) No Change

(6) The following remediable tasks may be performed by a dental hygienist who has received training in these procedures in pre-licensure education or who has received formal training as defined by Rule 64B5-16.002, F.A.C., and who performs the tasks under Indirect supervision:

(a) – (f) No Change

(g) ~~Monitor the administration of the Administer nitrous-oxide oxygen making adjustments only during this administration and turning it off at the completion of the dental procedure provided the Dental Hygienist is in full compliance with the requirements of Rule 64B5-14.002(4)(b), F.A.C.~~; and,

(h) Using adjunctive oral cancer screening medical devices approved by the U.S. Food and Drug Administration.

(7) – (11) No Change.

Ms. Driscoll suggested that the rule language in Rule 64B5-14.002(6), F.A.C. may need to be changed to include dental hygienists. The council agreed to this oral amendment.

Dr. Tejera asked that the council consider including language which would limit American Society of Anesthesiologists (ASA) Physical Status Classification 4 patients and special needs patients to direct supervision and explained the different classifications.

The council agreed to this addition.

Dr. Joseph Calderone, liaison for the Florida Dental Association, spoke in support of the rule changes

Terri Beck, President of the Florida Dental Hygiene Association, spoke in support of the rule changes.

After discussion the following action was taken:

Motion: by Ms. Driscoll to accept the proposed rule language with the oral amendments.

Second: by Ms. Zapata

Vote: Unanimous

After additional discussion regarding limiting special needs patients to direct supervision, the following action was taken:

Motion: by Ms. Driscoll to remove the previous motion

Second: by Ms. Velez

Vote: Unanimous

Motion: by Ms. Driscoll to accept the prosed rule language, including the proposed oral amendment to 64B5-14.002(6), F.A.C. and to add language limiting ASA4 patients to direct supervision.

Second: by Dr. Mellado

Vote: Unanimous

Ms. Sapp noted as there were proposed changes to the anesthesia rules included in the language approved by the council, the proposed language would need to be included as an agenda item at the upcoming Anesthesia Committee Meeting before being presented to the full board.

III. NEW BUSINESS

IV. OLD BUSINESS

Ms. Hill provided an update on her report from the August 12, 2021, Board of Dentistry Meeting.

V. ADJOURNMENT

There being no further business, the meeting adjourned at 6:38 p.m.