

1 21 NCAC 16O .0301 is amended as published in 30:1 NCR 2 with changes, as follows:

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3 **21 NCAC 16O .0301      NITROUS OXIDE CONSCIOUS SEDATION**

4 "~~Conscious Nitrous~~ **"Nitrous** oxide sedation" means the use of ~~drugs~~ nitrous oxide for controlling pain or  
5 apprehension without rendering the patient unconscious. A sedation permit ~~is not~~ shall not be required to  
6 administer nitrous oxide, without any other drugs, for the purpose of anxiolysis. A sedation permit ~~is~~ shall be  
7 required if nitrous oxide is administered in combination with other sedative agents.

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9 *History Note:*      *Authority G.S. 90-29(b)(6); 90-48; 90-223;*

10                              *Eff. July 16, 1980;*

11                              *Amended Eff. March 1, 2016; May 1, 1989.*

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1 21 NCAC 16O .0302 is amended as published in 30:1 NCR 2 with changes as follows:

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3 **21 NCAC 16O .0302      NITROUS OXIDE MONITORING**

4 "Monitoring" means observation of the patient during the flow of nitrous oxide ~~sedation agents~~ and includes  
5 reducing the flow of nitrous oxide ~~sedation~~ or shutting off equipment controlling such flow. Monitoring does not  
6 include starting or increasing the flow of ~~sedation agents~~, nitrous oxide.

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8 *History Note:*      *Authority G.S. 90-29(b)(6); 90-48; 90-223;*

9                              *Eff. July 16, 1980;*

10                             *Amended Eff. March 1, 2016; May 1, 1989.*

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1 21 NCAC 160 .0401 is amended as published in 30:1 NCR 2 as follows:

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3 **21 NCAC 160 .0401 NON-DELEGABLE FUNCTIONS**

4 ~~Conscious Nitrous oxide~~ sedation shall not be induced by anyone other than a dentist or a lawfully qualified nurse ~~or~~  
5 ~~anesthetist [anesthesiologist]~~ who does so under the supervision and direction of a ~~dentist or physician.~~ dentist.

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7 *History Note: Authority G.S. 90-29(b)(6); 90-48; 90-223;*

8 *Eff. July 16, 1980;*

9 *Amended Eff. March 1, 2016; May 1, 1989.*

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1 21 NCAC 160 .0402 is amended as published in 30:1 NCR 2 with changes as follows:

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3 **21 NCAC 160 .0402 EDUCATIONAL REQUIREMENTS**

4 A Dental Assistant ~~For a Dental Assistant~~ ~~if not otherwise qualified under G.S. 90-29(c)(13)~~ may aid and assist a  
5 licensed dentist in the ~~administration~~ monitoring of nitrous oxide-oxygen inhalant ~~conscious~~ sedation ~~after~~  
6 ~~completion of a~~ by completing a Board-approved course totaling at least seven hours ~~and directed by an individual~~  
7 ~~or individuals approved by the Board. Such course shall include:~~ that covers the following topics:

- 8 (1) ~~Definitions~~ definitions and descriptions of physiological and psychological aspects of pain and  
9 anxiety;
- 10 (2) ~~The~~ the states of drug-induced central nervous system depression through all levels of  
11 consciousness and unconsciousness, with special emphasis on the distinction between the  
12 conscious and unconscious state;
- 13 (3) ~~Respiratory~~ respiratory and circulatory ~~physiology~~ physiology, and related anatomy;
- 14 (4) ~~Pharmacology~~ pharmacology of agents used in the ~~conscious nitrous oxide sedation~~ techniques  
15 being taught, including drug interaction and incompatibility;
- 16 (5) ~~Patient~~ patient monitoring, with particular attention to vital signs and reflexes related to  
17 consciousness;
- 18 (6) ~~Prevention,~~ prevention, ~~recognition~~ recognition, and management of complications and life  
19 threatening situations that may occur during the use of the ~~conscious sedation~~ nitrous oxide  
20 techniques, including cardio pulmonary resuscitation;
- 21 (7) ~~Description~~ description and use of ventilation sedation equipment; and
- 22 (8) ~~Potential~~ potential health hazards of trace anesthetics, and proposed techniques for elimination of  
23 these potential health hazards.

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25 *History Note:* Authority G.S. 90-29(b)(6); 90-29(c)(13); 90-48; 90-223;

26 *Eff. July 16, 1980;*

27 *Amended Eff. March 1, 2016; May 1, 1989.*

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1 21 NCAC 16Q .0101 is amended as published in 30:1 NCR 2 with changes as follows:

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**21 NCAC 16Q .0101 GENERAL ANESTHESIA AND SEDATION DEFINITIONS**

For the purpose of these Rules relative to the administration of ~~minimal conscious sedation~~, moderate conscious sedation, ~~moderate conscious sedation limited to oral routes or nitrous oxide inhalation~~, moderate pediatric conscious ~~sedation~~ sedation, or general anesthesia by or under the direction of a dentist, the following definitions shall apply:

- (1) "Analgesia" – the diminution or elimination of pain.
- (2) "Anti-anxiety sedative" – a sedative agent administered in a dosage intended to reduce anxiety without diminishing consciousness or protective reflexes.
- (3) "Anxiolysis" – pharmacological reduction of anxiety through the administration of a single dose of a any minor anti-anxiety drug psychosedative, within a 24 hour period, or nitrous oxide ~~possibly in combination with nitrous oxide~~, to children or adults prior to commencement of treatment on the day of the appointment which that allows for uninterrupted interactive ability in a totally an awake patient with no compromise in the ability to maintain a patent airway continuously and without assistance. ~~Nitrous oxide may be administered in addition to the minor psychosedative without constituting multiple dosing for purpose of these Rules.~~ The patient [must] shall be able to respond [normally] to tactile stimulation and verbal commands and walk, if applicable. [walk normally.] A dentist may perform anxiolysis without obtaining a permit from the Dental Board.
- (4) "ACLS" – Advanced cardiac life support.
- (5) "Administer"—to direct, manage, supervise, ~~[control]~~ control, and have charge of all aspects of selection, dosage, ~~[timing]~~ timing, and method of delivery to the patient of any pharmacologic agent intended to reduce anxiety or depress consciousness.
- (17) ~~[(6) "Anti Anxiety Drug"]~~ Minor psychosedative/Minor tranquilizer" – pharmacological agents which allow for uninterrupted interactive ability in a patient with no compromise in the ability to maintain a patent airway continuously and without assistance and carry a margin of safety wide enough to render unintended loss of consciousness unlikely. [The patient must be able to respond normally to tactile stimulation and verbal commands and walk normally.]
- ~~[(7)]~~ (6) "ASA" – American Society of Anesthesiologists.
- ~~[(8)]~~ (7) "Auxiliaries" – non-dentist staff members [directly] involved in general anesthesia or sedation procedures.
- ~~[(9)]~~ (8) "BLS" – Basic life support.
- (4) ~~[(10)]~~ (9) "Behavior control" – the use of pharmacological techniques to control behavior to a level [at which] that dental treatment can may be performed without injury to the patient or dentist. effectively and efficiently.

- 1 (5) ~~[(14)]~~ (10) "Behavioral management" – the use of pharmacological or psychological techniques,  
2 singly or in combination, to modify behavior to a level that [at which] dental treatment can may be  
3 performed effectively and efficiently, without injury to the patient or dentist.
- 4 (6) ~~[(12)]~~ (11) "Competent" – displaying special skill or knowledge derived from training and experience.
- 5 (7) ~~[(13)]~~ (12) "Conscious sedation" - an induced state of a depressed level of consciousness that retains the  
6 patient's ability to independently and continuously maintain an airway without assistance and  
7 respond appropriately to physical stimulation and obey verbal command, commands, and that is  
8 produced by pharmacologic or non-pharmacologic agents, or a combination thereof. ~~In~~  
9 accordance with this particular definition, the drugs or techniques used shall carry a margin of  
10 safety wide enough to render unintended loss of consciousness unlikely. All dentists who  
11 perform conscious sedation shall have an unexpired [a current] sedation permit from the Dental  
12 Board.
- 13 ~~[(14)]~~ (13) "CRNA" – certified registered nurse anesthetist.
- 14 (8) ~~[(15)]~~ (14) "Deep sedation" – an induced state of a depressed level of consciousness accompanied by  
15 partial loss of protective reflexes, including the ability to continually maintain an airway  
16 independently without assistance or respond purposefully to verbal command, ~~and is~~ produced by  
17 pharmacological agents. All dentists who perform deep sedation shall have an unexpired [a  
18 current] general anesthesia permit from the Dental Board.
- 19 ~~[(16)]~~ (15) "Deliver" – to assist a [properly qualified] permitted dentist in administering sedation or  
20 anesthesia drugs by providing the drugs [directly] to the patient pursuant to a direct order from the  
21 dentist and while under the dentist's direct supervision.
- 22 (9) ~~[(17)]~~ (16) "Direct supervision" – the dentist responsible for the ~~sedation/anesthesia~~ sedation or  
23 anesthesia procedure shall be physically present in the facility immediately available and shall be  
24 continuously aware of the patient's physical status and well being- being at all times.
- 25 ~~[(18)]~~ (17) "Emergencies manual" – a written [or digital] manual that documents 1) the location of all  
26 emergency equipment and medications in each facility; [dental office,] 2) each staff member's role  
27 during medical [emergencies] emergencies; and 3) the appropriate treatment for laryngospasm,  
28 bronchospasm, emesis and aspiration, respiratory depression and arrest, angina pectoris,  
29 myocardial infarction, hypertension, hypotension, allergic reactions, convulsions, syncope,  
30 bradycardia, insulin shock, cardiac [arrest] arrest, and airway obstruction.
- 31 ~~[(19)]~~ (18) "ET CO2" —end tidal carbon dioxide.
- 32 (10) ~~[(20)]~~ (19) "Facility" – the location where a permit holder practices dentistry and provides  
33 ~~anesthesia/sedation~~ anesthesia or sedation services.
- 34 (11) ~~[(21)]~~ (20) "Facility inspection" - an on-site inspection to determine if a facility where the applicant  
35 proposes to provide ~~anesthesia/sedation~~ anesthesia or sedation is supplied, equipped, staffed  
36 staffed, and maintained in a condition to support provision of ~~anesthesia/sedation~~ anesthesia or

1 sedation services ~~that meet the minimum standard of care.~~ in compliance with the Dental Practice  
2 Act set forth in Article 2 of G.S. 90 and the Board's rules of this Chapter.

3 (12) ~~[(22)]~~ (21) "General anesthesia" - the intended controlled state of a depressed level of consciousness  
4 that is produced by pharmacologic agents and accompanied by a partial or complete loss of  
5 protective reflexes, including the ability to maintain an airway and respond purposefully to  
6 physical stimulation and obey ~~or~~ verbal commands.

7 ~~[(23)]~~ (22) "Good standing" – a licensee whose license is not suspended or revoked and who is not subject  
8 to a current disciplinary order imposing probationary terms.

9 (13) ~~[(24)]~~ (23) "Immediately available" – on-site in the facility and available for immediate use- use  
10 without delay.

11 ~~[(25)]~~ (24) ~~[Itinerant]~~ "Itinerant general ~~[dentist anesthesiologist]~~ anesthesia provider"- a [licensee]  
12 permittee who has complied with Rule .0206 of this [Section] Subchapter and who administers  
13 general anesthesia at another practitioner's facility.

14 (14) ~~[(26)]~~ (25) "Local anesthesia" – the elimination of sensations, especially including pain, in one part of  
15 the body by the regional application or injection of a drug.

16 (15) ~~[(27)]~~ "May" – indicates freedom or liberty to follow a reasonable alternative.

17 (16) "Minimal conscious sedation" – ~~conscious sedation characterized by a minimally depressed level of~~  
18 ~~consciousness, in which patient retains the ability to independently and continuously maintain an~~  
19 ~~airway and respond normally to tactile stimulation and verbal command, provided to patients 13~~  
20 ~~years or older, by oral or rectal routes of administration of a single pharmacological agent, in one~~  
21 ~~or more doses, not to exceed the manufacturer's maximum recommended dose, at the time of~~  
22 ~~treatment, possibly in combination with nitrous oxide. Minimal conscious sedation is provided for~~  
23 ~~behavioral management.~~

24 (18) ~~[(28)]~~ (26) "Moderate conscious sedation" – conscious sedation characterized by a drug induced  
25 depression of consciousness, during which patients obey ~~respond purposefully to~~ verbal  
26 commands, either alone or accompanied by light tactile stimulation, provided to patients 13 years  
27 of age or older, by oral, nasal, ~~rectal~~ rectal, or parenteral routes of administration of single or  
28 multiple pharmacological agents, in single or multiple doses, within a 24 hour period, including  
29 the time of treatment, possibly in combination with nitrous oxide. Moderate conscious sedation is  
30 may be provided for behavior control by licensed dentists who comply with the terms of Rule  
31 .0301 of this Subchapter. control. ~~[ Drugs designated by the manufacturer for use in administering~~  
32 ~~general anesthesia or deep sedation and drugs contraindicated for use in moderate conscious~~  
33 ~~sedation shall not be used by a moderate conscious sedation permit holder.] A moderate~~  
34 conscious sedation provider shall not use the following:

35 (a) drugs designed by the manufacturer for use in administering general anesthesia  
36 or deep sedation; or

37 (b) drugs contraindicated for use in moderate conscious sedation.

1 ~~(19)~~ "Moderate conscious sedation limited to oral routes and nitrous oxide inhalation" — conscious  
2 sedation characterized by a drug induced depression of consciousness during which patients  
3 respond purposefully to verbal commands, either alone or accompanied by light tactile  
4 stimulation, provided to patients 13 years or older, by oral routes of administration and nitrous  
5 oxide inhalation, of single or multiple pharmacological agents, in single or multiple doses, within  
6 a 24 hour period. Moderate conscious sedation limited to oral routes and nitrous oxide inhalation  
7 is provided for behavior control.

8 ~~[(29)]~~ (27) (20) "Moderate pediatric conscious sedation" - conscious sedation characterized by a drug  
9 induced depression of consciousness, during which patients ~~respond purposefully to obey~~ verbal  
10 commands, either alone or accompanied by light tactile stimulation, provided to patients ~~up to~~  
11 ~~under 18~~ 13 years of age, ~~or special needs patients~~, by oral, nasal, ~~rectal~~ rectal, or parenteral routes  
12 of administration of single or multiple pharmacological agents, in single or multiple doses, within  
13 a 24 hour period, including the time of treatment, possibly in combination with nitrous oxide.  
14 Moderate pediatric conscious sedation ~~is~~ may be provided for behavior ~~control by licensed~~  
15 ~~dentists who comply with the terms of Rule .0404 of this Subchapter. control.~~ ~~Drugs designated~~  
16 ~~by the manufacturer for use in administering general anesthesia or deep sedation and drugs~~  
17 ~~contraindicated for use in moderate pediatric conscious sedation shall not be used by a moderate~~  
18 ~~pediatric conscious sedation permit holder.] A moderate pediatric conscious sedation permit~~  
19 ~~holder shall not use the following:~~

20 (a) ~~drugs designed by the manufacturer for use in administering general anesthesia~~  
21 ~~or deep sedation; or~~

22 (b) ~~drugs contraindicated for use in moderate pediatric conscious sedation.~~

23 ~~[(30)]~~ (21) "Must" or "shall" — indicates an imperative need or duty or both; an essential or indispensable  
24 ~~item; mandatory.~~

25 ~~[(31)]~~ (28) (22) "Parenteral" - the administration of pharmacological agents intravenously, intraosseously,  
26 intramuscularly, subcutaneously, submucosally, intranasally, or transdermally.

27 ~~[(32)]~~ (29) "PALS" – Pediatric Advanced Life Support.

28 ~~[(33)]~~ (30) (23) "Protective reflexes" – includes the ability to swallow and cough.

29 ~~[(34)]~~ (31) [RN] "RN" – Registered Nurse licensed by the North Carolina Board of Nursing.

30 ~~[(35)]~~ (32) ~~[Special]~~ "Special needs ~~[patients]~~ patients" – patients with diminished mental and or physical  
31 capacity who are unable to cooperate ~~[sufficiently]~~ to receive ambulatory dental care without  
32 sedation or anesthesia.

33 ~~[(36)]~~ (33) (24) "Supplemental dosing" – the oral administration of a pharmacological agent that results in  
34 an enhanced level of conscious sedation when added to the primary sedative agent administered  
35 for the purpose of oral moderate conscious sedation, and ~~which~~, when added to the primary agent,  
36 does not exceed the maximum safe dose of either agent, separately or synergistically.



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~~(37)~~ (34) (25) "Vested adult" – a responsible adult who is the legal parent or guardian, or designee of a legal parent or guardian, entrusted with the care of a ~~minor~~ patient following the administration of general anesthesia or conscious sedation.

*History Note: Authority G.S. ~~90-28~~; 90-30.1; 90-48;  
Eff. February 1, 1990;  
Temporary Amendment Eff. December 11, 2002;  
Amended Eff. March 1, 2016; July 3, 2008; August 1, 2004.*

1 21 NCAC 16Q .0201 is amended as published in 30:1 NCR 2 as follows:

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3 **21 NCAC 16Q .0201 GENERAL ANESTHESIA CREDENTIALS AND PERMIT**

4 ~~(a) No dentist shall employ or use general anesthesia on an outpatient basis for dental patients unless the dentist~~  
5 ~~possesses a permit issued by the Board. A dentist holding a permit shall be subject to review and shall only employ~~  
6 ~~or use general anesthesia at a facility located in the State of North Carolina in accordance with 21 NCAC 16Q .0202.~~  
7 ~~Such permit must be renewed annually and shall be displayed with the current renewal at all times in a conspicuous~~  
8 ~~place in the office of the permit holder.~~

9 (a) Before a dentist licensed to practice in North Carolina may administer or supervise a CRNA [or RN] to  
10 administer general anesthesia, the dentist shall obtain a general anesthesia permit from the Board by completing an  
11 application form and paying a four hundred seventy five dollar (\$475.00) fee. The application form is available on  
12 the Board's website: [www.ncdentalboard.org](http://www.ncdentalboard.org). The permit shall be renewed annually and shall be displayed with the  
13 current renewal at all times in the permit holder's facility where it is visible to patients receiving treatment.

14 (b) A dentist applying for a general anesthesia permit shall be in good standing with the Board and demonstrate that  
15 he or she:

16 ~~(b) Any dentist who wishes to administer general anesthesia to patients must apply to the Board for the required~~  
17 ~~permit on a prescribed application form, submit an application fee of one hundred dollars (\$100.00) and produce~~  
18 ~~evidence showing that he or she:~~

- 19 (1) Has completed a minimum of two years ~~one year~~ of advanced training in anesthesiology and  
20 related academic subjects ~~(or its equivalent)~~ beyond the undergraduate dental school level; or  
21 (2) Has graduated from a program certified by the American Dental Association in Oral and  
22 Maxillofacial Surgery; or  
23 (3) Is a Diplomate of or eligible for examination by the American Board of Oral and Maxillofacial  
24 Surgery; or  
25 (4) Is a Fellow of the American Dental Society of Anesthesiology; ~~or~~ and  
26 (5) ~~Is a dentist who has been administering general anesthetics in a competent manner for the five~~  
27 ~~years preceding the effective date of this Rule.~~  
28 (5) Has [current] an unexpired ACLS certification.

29 (c) Before receiving a general anesthesia permit, all applicants shall pass an evaluation and inspection as set out in  
30 Rule .0202 of this Section. Every location other than a hospital or credentialed surgery center where a general  
31 anesthesia permit holder administers general anesthesia shall pass an inspection as set out in Rule .0202 of this  
32 Section.

33 ~~(e)(d) A dentist who is qualified to administer general anesthesia in accordance with this Section and holds a~~  
34 ~~general anesthesia permit may is also authorized to administer any level of sedation without obtaining a separate~~  
35 ~~sedation permit.~~

1 ~~(d) The dentist involved with the administration of general anesthesia shall document current, successful completion~~  
2 ~~of advanced cardiac life support (ACLS) training, or its age-specific equivalent or other Board-approved equivalent~~  
3 ~~course and auxiliary personnel shall document annual, successful completion of basic life support (BLS) training.~~

4 (e) A dentist who does not hold a general anesthesia permit may not employ a CRNA [or RN to provide] to  
5 administer general anesthesia services. A dentist who holds a general anesthesia permit may permit a CRNA to  
6 [provide] administer general anesthesia services under direct supervision of the dentist.

7 (f) A general anesthesia permit holder may provide general anesthesia or any level of sedation at the office of  
8 another licensed dentist, regardless of the permit, if any held, by the hosting dentist. The permit holder shall ensure  
9 that the facility where the general anesthesia or sedation is administered has been inspected and complies with the  
10 requirements set out in Rule .0202 of this Section or shall obtain an itinerant general anesthesia permit and comply  
11 with the provisions of Rule .0206 of this Section.

12  
13 *History Note: Authority G.S. 90-28; 90-30.1;*  
14 *Eff. February 1, 1990;*  
15 *Amended Eff. April 1, 2001; August 1, 2000;*  
16 *Temporary Amendment Eff. December 11, 2002;*  
17 *Amended Eff. March 1, 2016; February 5, 2008.*  
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1 21 NCAC 16Q .0202 is amended as published in 30:1 NCR 2 with changes as follows:

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3 **21 NCAC 16Q .0202 GENERAL ANESTHESIA EQUIPMENT AND CLINICAL REQUIREMENTS**

4 (a) A dentist administering general anesthesia shall be responsible to ensure is solely responsible for providing that  
5 the facility environment in which where the general anesthesia is ~~to be~~ administered meets the following  
6 requirements:

7 (1) The facility is shall be equipped ~~with;~~ with the following:

8 (A) An an operatory of size and design to permit access of emergency equipment and  
9 personnel and to permit effective emergency management;

10 (B) ~~A chair or table for emergency treatment, including chair suitable for CPR or CPR Board;~~  
11 [A] a CPR board or dental chair without [enhancements] enhancements, suitable for  
12 providing emergency treatment;

13 (C) Lighting lighting as necessary for specific [procedures] procedures, procedures; and  
14 back-up lighting; and

15 (D) Suction suction equipment as necessary for specific procedures; procedures, including  
16 non-electrical back-up ~~suction; [suction.] suction;~~

17 ~~(2) The following equipment is maintained:~~

18 ~~(A)-(E) Positive positive~~ pressure oxygen delivery system, including full face masks for small,  
19 medium, and large adults and pediatric patients, ~~patients;~~ and back-up E-cylinder  
20 portable oxygen tank apart from the central system;

21 ~~(B)-(F) [Small,] small, [medium] medium,~~ and large oral ~~Oral~~ and nasal airways; airways of  
22 various sizes;

23 ~~(C)-(G) Blood blood~~ pressure monitoring device;

24 ~~(D)-(H) EKG [Monitor; Electrocardiograph;] monitor; electrocardiograph;~~

25 ~~(E)-(I) Pulse pulse~~ oximeter; ~~and~~

26 ~~(F)-(J) Defibrillator; defibrillator;~~

27 ~~(G)-(K) Capnograph; capnograph;~~

28 ~~(H)-(L) [Thermometer;] thermometer;~~

29 ~~(3) The following emergency equipment is maintained:~~

30 (A) ~~[(D)] (M) I.V. set up [Vascular] vascular~~ access as necessary for specific procedures,  
31 including hardware and fluids;

32 (B) ~~[(J)] (N) Laryngoscope laryngoscope~~ with current-working batteries;

33 (C) ~~[(K)] (O) Intubation intubation~~ forceps and ~~endotracheal tubes;~~ advanced airway devices;

34 (D) ~~[(L)] (P) Tonsillar tonsillar~~-suction with back-up suction;

35 (E) ~~[(M)] (Q) Syringes syringes~~ as necessary for specific procedures; and

36 (F) ~~[(N)] (R) Tourniquet tourniquet & tape; and and~~ tape.

37 (G) ~~— Blood pressure monitoring device;~~

1 (4) (3) ~~The following drugs are maintained with a current shelf life and with access from the operator~~  
2 ~~and recovery room: The following unexpired drugs shall be maintained in the facility and with~~  
3 ~~access from the operator and recovery rooms:~~

- 4 (A) ~~Ephinephrine; ephinephrine;~~
- 5 (B) Atropine;
- 6 (C) Lidocaine; ~~[Antiarrhythmic;] antiarrhythmic;~~
- 7 (D) ~~Antihistamine; antihistamine;~~
- 8 (E) ~~Antihypertensive; antihypertensive;~~
- 9 (F) ~~Bronchial dilator; [Bronchodilator;] bronchodilator;~~
- 10 (G) ~~Antihypoglycemic antihypoglycemic agent;~~
- 11 (H) ~~Vasopressor; vasopressor;~~
- 12 (I) ~~Corticosteroid; corticosteroid;~~
- 13 (J) ~~Anticonvulsant; anticonvulsant;~~
- 14 (K) ~~Muscle muscle~~ relaxant;
- 15 (L) ~~Appropriate appropriate~~ reversal agents;
- 16 (M) ~~Appropriate anti arrhythmic medication;~~
- 17 (M) (N) ~~Nitroglycerine; nitroglycerine;~~ and
- 18 (N) (O) ~~Antiemetic; [Antiemetic;] antiemetic.~~

19 (5) (4) ~~The permit holder shall maintain written~~ ~~Written~~ emergency and patient discharge protocols and  
20 training to familiarize ~~office personnel~~ ~~auxiliaries~~ in the treatment of clinical emergencies ~~are~~  
21 ~~shall be provided; and~~

22 (6) (5) The ~~permit holder shall maintain the~~ following records ~~for 10 years;~~ ~~are maintained;~~ ~~[maintained~~  
23 ~~for 10 years;]~~

- 24 (A) Patient's current written medical history, including ~~a record of~~ known allergies and  
25 previous ~~surgeries; surgery;~~
- 26 (B) ~~[Signed consent] Consent to general [anesthesia form,] anesthesia, signed by the patient~~  
27 ~~or guardian, identifying the risks and benefits, level of [anesthesia] anesthesia, and date~~  
28 ~~signed;~~
- 29 (C) ~~[Signed consent] Consent to the procedure, signed by the patient or guardian identifying~~  
30 ~~the [procedure, risks] risks, [and] [benefits] benefits, and date signed; and~~
- 31 (D) (B) ~~Patient Base base~~ line vital signs, including ~~temperature, SPO2, blood pressure and pulse;~~  
32 ~~[(E)] (C) An anesthesia [record] record which shall include:~~
  - 33 (i) ~~Periodic vital signs taken at intervals during the procedure;~~
  - 34 (ii) ~~Drugs administered during the procedure, including route of administration,~~  
35 ~~dosage, time and sequence of administration;~~
  - 36 (iii) ~~Duration of the procedure;~~
  - 37 (iv) ~~Documentation of complications or morbidity; and~~

(v) ~~\_\_\_\_\_~~ Status of patient upon discharge.

(6) The ~~[sedation] anesthesia~~ record shall include:

(A) ~~\_\_\_\_\_~~ base line vital signs, blood pressure (unless patient behavior prevents recording);  
~~\_\_\_\_\_~~ oxygen saturation, ET CO<sub>2</sub>, pulse and respiration rates ~~of the patient~~ recorded in real  
~~\_\_\_\_\_~~ time at 15 minute intervals;

(B) ~~\_\_\_\_\_~~ procedure start and end times;

(C) ~~\_\_\_\_\_~~ gauge of needle and location of IV ~~on the patient,~~ if used;

(D) ~~\_\_\_\_\_~~ status of patient upon discharge; ~~and~~

(E) ~~\_\_\_\_\_~~ documentation of complications or ~~[morbidity,] morbidity; and~~

~~(d) \_\_\_\_\_~~ (7) A dentist administering general anesthesia shall ensure that the ~~The~~ facility ~~shall be~~ is staffed with  
at least two BLS certified ~~auxiliary personnel~~ auxiliaries who shall be present at all times during  
the procedure and at least one of whom shall be dedicated to patient monitoring and recording  
general anesthesia or sedation data. ~~document annual successful completion of basic life support~~  
~~\_\_\_\_\_~~ training and be capable of assisting with procedures, problems, and emergency incidents that may  
~~\_\_\_\_\_~~ occur as a result of the general anesthetic or secondary to an unexpected medical complication.

(b) During an inspection or evaluation, the applicant or permit holder shall demonstrate the administration of  
anesthesia while the evaluator ~~observes.~~ ~~During the demonstration, the applicant or permit holder observes, and~~  
shall demonstrate competency in the following areas:

(1) ~~Monitoring~~ ~~monitoring~~ of blood pressure, pulse, ET CO<sub>2</sub>, and respiration;

(2) ~~Drug drug~~ dosage and administration;

(3) ~~Treatment~~ ~~treatment~~ of untoward reactions including respiratory or cardiac depression;

(4) ~~Sterilization;~~ ~~sterile technique;~~

(5) ~~Use~~ ~~use~~ of BLS CPR certified ~~auxiliaries;~~ ~~personnel;~~

(6) ~~Monitoring~~ ~~monitoring~~ of patient during recovery; and

(7) ~~Sufficiency~~ ~~sufficiency~~ of patient recovery time.

(c) During an inspection or evaluation, the applicant or permit holder shall verbally demonstrate competency ~~to the~~  
~~evaluator~~ in the treatment of the following clinical emergencies:

(1) ~~Laryngospasm;~~ ~~laryngospasm;~~

(2) ~~Bronchospasm;~~ ~~bronchospasm;~~

(3) ~~Emesis~~ ~~emesis~~ and aspiration;

(4) ~~Respiratory~~ ~~respiratory~~ depression and arrest;

(5) ~~Angina~~ ~~angina~~-pectoris;

(6) ~~Myocardial~~ ~~myocardial~~ infarction;

(7) ~~Hypertension/Hypotension;~~ ~~[Hypertension and Hypotension;]~~ ~~hypertension and hypotension;~~

(8) ~~Syncope;~~ ~~syncope;~~

(9) ~~Allergic~~ ~~allergic~~ reactions;

(10) ~~Convulsions;~~ ~~convulsions;~~

- 1 (11) ~~Bradycardia;~~ bradycardia;
- 2 (12) ~~Insulin~~ insulin shock; ~~and~~
- 3 (13) ~~Cardiac~~ cardiac arrest; ~~and~~
- 4 (14) ~~[Airway]~~ airway obstruction.

5 (d) A general anesthesia permit holder shall evaluate ~~[patients-]~~ a patient for health risks before starting any  
6 anesthesia procedure.

7 (e) Post-operative monitoring and ~~[discharge-]~~ discharge shall include the following:

8 (1) ~~[Vital]~~ vital signs shall be continuously monitored when the sedation is no longer being  
9 administered and the patient shall have direct continuous supervision until oxygenation and  
10 circulation are stable and the patient is ~~[sufficiently responsive]~~ recovered as defined by  
11 ~~[Paragraph]~~ Subparagraph (e)(2) of this Rule and is ready for discharge from the office.

12 (2) ~~[Recovery]~~ recovery from general anesthesia shall include documentation of the following:

- 13 (A) cardiovascular function stable;
- 14 (B) airway patency uncompromised;
- 15 (C) patient ~~[easily]~~ arousable and protective reflexes intact;
- 16 (D) state of hydration within normal limits;
- 17 (E) patient can talk, if applicable;
- 18 (F) patient can sit unaided, if applicable;
- 19 (G) patient can ambulate, if applicable, with minimal assistance; and
- 20 (H) for the ~~special needs~~ patient or a patient ~~[who is disabled, or]~~ incapable of the usually  
21 expected responses, the pre-sedation level of responsiveness or the level as close as  
22 possible for that patient shall be achieved.

23 (3) ~~[Before]~~ before allowing the patient to leave the office, the dentist shall determine that the patient  
24 has met the recovery criteria set out in Subparagraph ~~[Paragraph]~~ (e)(2) of this Rule and the  
25 following discharge criteria:

- 26 (A) oxygenation, circulation, activity, skin ~~color~~ color, and level of consciousness are  
27 ~~sufficient,~~ ~~[sufficient and stable]~~ stable, and have been documented;
- 28 (B) explanation and documentation of written postoperative instructions have been provided  
29 to the patient or a responsible adult at time of discharge; and
- 30 (C) ~~[responsible individual]~~ a vested adult is available ~~[for the patient]~~ to transport the  
31 patient after discharge.

32

33 *History Note: Authority G.S. 90-28; 90-30.1; 90-48;*

34 *Effective February 1, 1990;*

35 *Amended Eff. March 1, 2016; November 1, 2013; August 1, 2002; August 1, 2000.*

36

1 21 NCAC 16Q .0204 is amended as published in 30:1 NCR 2 as follows:

2  
3 **21 NCAC 16Q .0204 PROCEDURE FOR GENERAL ANESTHESIA EVALUATION OR INSPECTION**  
4 **AND RE-INSPECTION**

5 (a) When an evaluation or on-site inspection is required, the Board ~~will~~ **shall** designate two or more qualified  
6 ~~persons,~~ **persons to serve as evaluators,** each of ~~which~~ **whom** has administered general anesthesia for at least three  
7 years preceding the ~~inspection, exclusive of his [or her] training in general anesthesia,~~ **inspection. Training in**  
8 **general anesthesia shall not be counted in the three years.** When an on-site inspection involves only a facility and  
9 equipment check and not an evaluation of the dentist, the inspection may be accomplished by one ~~or more~~  
10 **evaluators,** **evaluator.**

11 ~~(b)~~ **(e)** At least a 15-day notice shall be given prior to an evaluation or inspection. The entire evaluation fee of three  
12 hundred seventy five dollars (\$375.00) shall be due 10 days after the date of receipt of such notice. An inspection  
13 fee of ~~two hundred seventy five dollars (\$275.00)~~ **three hundred seventy five dollars (\$375.00)** shall be due 10 days  
14 after the dentist receives notice of the inspection of each additional location at which the dentist administers general  
15 anesthesia.

16 ~~(c)~~ **(c)** Any dentist-member of the Board may observe or consult in any ~~evaluation,~~ **evaluation or inspection.**

17 ~~(d)~~ **(d)** The inspection team shall determine compliance with the requirements of the Rules in this Subchapter, as  
18 applicable, by assigning a grade of "pass" or ~~"fail".~~ **"fail."**

19 ~~(d)~~ **(e)** Each evaluator shall report his or her recommendation to the ~~Board,~~ **Board's Anesthesia and Sedation**  
20 **Committee,** setting forth the details supporting his or her conclusion. The ~~Board Committee~~ **is shall** not **be** bound by  
21 these recommendations. The ~~Board Committee~~ shall determine whether the applicant has passed the  
22 ~~evaluation/inspection~~ **evaluation or inspection** and shall notify the applicant in writing of its decision.

23 **(f)** An applicant who fails an inspection or evaluation shall not receive a permit to administer general anesthesia. If  
24 a permit holder fails an evaluation, the permit shall be summarily ~~suspended,~~ **suspended as provided by G.S. 150B-**  
25 **3(c).** ~~If a permit holder's facility fails an inspection, no further anesthesia procedures [may] shall be performed at~~  
26 ~~the facility until it passes a re-inspection by the Board.~~

27 **(g)** An applicant who fails an inspection or evaluation may request a re-evaluation or re-inspection within 15 days  
28 of receiving the notice of failure. The request shall **be directed to the Board in writing and shall** include a  
29 statement of the grounds supporting the re-evaluation or re-inspection. The Board shall require the applicant to  
30 receive additional training prior to the re-evaluation to address the areas of deficiency determined by the evaluation.  
31 **The Board shall notify the applicant in writing of the need for additional training.**

32 **(h)** Re-evaluations and re-inspections shall be conducted by Board-appointed evaluators not involved in the failed  
33 evaluation or inspection.

34  
35 *History Note: Authority G.S. 90-28; 90-30.1; 90-39;*

36 *Eff. February 1, 1990;*

37 *Amended Eff. March 1, 2016; February 1, 2009; December 4, 2002; January 1, 1994.*



1 21 NCAC 16Q .0206 is adopted as published in 30:1 NCR 2 with changes as follows:

2

3 **21 NCAC 16Q .0206 ITINERANT (MOBILE) GENERAL ANESTHESIA PERMIT, EQUIPMENT**  
4 **AND EVALUATION**

5 (a) A dentist who holds a general anesthesia permit from the Board and who wishes to provide general anesthesia or  
6 other sedation services in the office of another practitioner shall obtain a mobile general anesthesia permit from the  
7 Board. The application form may be obtained on the Board's website: [www.ncdentalboard.org](http://www.ncdentalboard.org). and shall be  
8 accompanied by a one hundred (\$100.00) fee. No mobile permit ~~[is]~~ shall be required to administer general  
9 anesthesia in a hospital or credentialed surgery center.

10 (b) Before a mobile general anesthesia permit ~~is~~ may be issued, a general anesthesia permit holder appointed by the  
11 Board shall inspect the applicant's equipment and medications to ensure that they comply with Paragraphs (c) and  
12 (d) of this Rule.

13 (c) ~~The following equipment shall be maintained;~~ permit holder shall maintain the following equipment:

- 14 (1) ~~Positive~~ positive pressure ventilation system and back-up E cylinder portable oxygen tank;
- 15 (2) ~~Standard~~ standard ASA monitors with back-up power;
- 16 (3) ~~EKG monitor;~~ EKG Monitor;
- 17 (4) ~~capnograph;~~ Capnograph;
- 18 (5) ~~Small,~~ small, ~~medium~~ medium, and large oral airways and nasal trumpets;
- 19 (6) ~~Small,~~ small, ~~medium~~ medium, and large laryngoscope blades and back-up laryngoscope;
- 20 (7) ~~Small,~~ small, ~~medium~~ medium, and large nasal and oral endotracheal tubes;
- 21 (8) Magill forceps;
- 22 (9) ~~Small,~~ small, ~~medium~~ medium, and large supraglottic airway devices;
- 23 (10) ~~Back-up~~ back-up suction;
- 24 (11) ~~Defibrillator~~ defibrillator with pediatric capability;
- 25 (12) ~~Small,~~ small, ~~medium~~ medium, and large anesthesia circuits;
- 26 (13) ~~Back-up~~ back-up lighting;
- 27 (14) ~~Gastric~~ gastric suction device;
- 28 (15) ~~Endotracheal~~ endotracheal tube and pulmonary suction device;
- 29 (16) ~~Equipment~~ equipment for performing emergency cricothyrotomies and delivering positive  
30 pressure ventilation;
- 31 (17) ~~Back-up~~ back-up ventilation measurement;
- 32 (18) ~~Rebreathing~~ rebreathing device;
- 33 (19) ~~Scavenging~~ scavenging system;
- 34 (20) ~~Intermittent~~ intermittent compression devices;
- 35 (21) CPR board or dental chair without enhancements suitable for providing emergency treatment;
- 36 (22) ~~Laryngoscope~~ laryngoscope with working ~~current~~ batteries; and
- 37 (23) ~~Tourniquet~~ tourniquet and tape.

- 1 (d) The following ~~current unexpired~~ medications shall be immediately accessible ~~accessible~~ to the permit holder:
- 2 (1) ~~Epinephrine; ephinephrine;~~
- 3 (2) Atropine;
- 4 (3) ~~Antiarrhythmic~~ antiarrhythmic;
- 5 (4) ~~Antihistamine;~~ antihistamine;
- 6 (5) ~~Antihypertensive;~~ antihypertensive;
- 7 (6) ~~Bronchodilator;~~ bronchodilator;
- 8 (7) ~~Antihypoglycemic agent;~~ antihypoglycemic agent;
- 9 (8) ~~Vasopressor;~~ vasopressor;
- 10 (9) ~~Corticosteroid;~~ corticosteroid;
- 11 (10) ~~Anticonvulsant;~~ anticonvulsant;
- 12 (11) ~~Muscle relaxant;~~ muscle relaxant;
- 13 (12) ~~Appropriate~~ appropriate reversal agents;
- 14 (13) ~~Nitroglycerine;~~ nitroglycerine;
- 15 (14) ~~Antiemetic;~~ antiemetic;
- 16 (15) ~~Neuromuscular~~ neuromuscular blocking agent; and
- 17 (16) ~~Anti-malignant~~ anti-malignant hyperthermia agent.
- 18 (e) The evaluation and on-site inspection shall be conducted as set out in Rule .0204 of this Section.
- 19 (f) Before administering general anesthesia or sedation at another provider's office, the mobile permit holder shall
- 20 inspect the host facility to ensure that:
- 21 (1) ~~The the operator is of sufficient~~ operator's size and design ~~to permit effective~~
- 22 emergency management and access of emergency equipment and
- 23 personnel;
- 24 (2) ~~There there~~ is a CPR board or dental chair without enhancements suitable for
- 25 providing emergency treatment;
- 26 (3) ~~There there is sufficient lighting;~~ lighting to permit performance of all procedures planned for the
- 27 facility;
- 28 (4) ~~There there~~ is suction equipment, including non-electrical back-up suction; and
- 29 (5) ~~At at~~ at least two BLS certified auxiliaries ~~[shall be]~~ are present during all procedures.
- 30 (g) At least 24 hours before the procedure is scheduled to begin, the mobile permit holder shall send written notice
- 31 to the Board office confirming that the facility where the general anesthesia or sedation will be performed meets the
- 32 requirements of Paragraph (f) of this Rule and documenting when the inspection was conducted. The permit holder
- 33 shall retain a copy of the written notice for 10 years following the procedure. No procedure ~~may shall~~ be performed
- 34 until if the report is ~~not filed~~ as required by this ~~Paragraph.~~ Paragraph is filed.
- 35 (h) The mobile general anesthesia permit shall be displayed in the host facility where it is visible to patients
- 36 receiving treatment.
- 37 (i) All applicants for mobile general anesthesia permit shall be in good standing with the Board.

1            *History Note:*    *Authority G.S. 90-28; 90-30.1; 90-39; 90-48;*  
2                                    *Eff. March 1, 2016.*  
3

1 21 NCAC 16Q .0207 is adopted as published in 30:1 NCR 2 with changes as follows:

2

3 **21 NCAC 16Q .0207 ANNUAL RENEWAL OF GENERAL ANESTHESIA AND ITINERANT**  
4 **(MOBILE) GENERAL ANESTHESIA PERMIT REQUIRED**

5 (a) General anesthesia permits shall be renewed by the Board annually at the same time as dental licenses by paying  
6 a one hundred dollar (\$100.00) fee and completing an application available from the Board's website:

7 [www.ncdentalboard.org](http://www.ncdentalboard.org). If the completed renewal application and renewal fee are not received before January 31  
8 of each year, a one hundred dollar (\$100.00) late fee shall be paid.

9 (b) Itinerant general anesthesia permits shall be renewed by the Board annually at the same time as dental licenses  
10 by paying a one hundred dollar (\$100.00) fee and completing an application available from the Board's website:

11 [www.ncdentalboard.org](http://www.ncdentalboard.org). If the completed itinerant general sedation permit and renewal fee are not received before  
12 January 31 of each year, a one hundred dollar (\$100.00) late fee shall be paid.

13 (c) Any dentist who fails to renew a general anesthesia permit or itinerant general anesthesia permit before March  
14 31 of each year shall complete a reinstatement application, pay the renewal ~~fee and fee,~~ late ~~fee fee,~~ and comply with  
15 all conditions for renewal set out in this Rule. Dentists whose anesthesia permits or itinerant general anesthesia  
16 permits have been lapsed for more than 12 calendar months shall pass an inspection and an evaluation as part of the  
17 reinstatement process.

18 (d) A dentist who ~~continues to administer~~ administers general anesthesia ~~or any level of sedation~~ in violation of this  
19 Rule shall be subject to the penalties prescribed by Rule .0701 of this Subchapter.

20 (e) As a condition for renewal of the general anesthesia and itinerant general anesthesia ~~permit~~ permit, the permit  
21 holder shall maintain the clinical equipment and requirements set out in Rules .0202 and .0206 of this Section and  
22 ~~document;~~ shall document the following:

23 (1) six hours of continuing education each year in one or more of the following areas, which may be  
24 counted toward fulfillment of the continuing education required each calendar year for license  
25 renewal:

26 (A) sedation;

27 (B) medical emergencies;

28 (C) monitoring IV sedation and the use of monitoring equipment;

29 (D) pharmacology of drugs and agents used in general anesthesia and IV sedation;

30 (E) physical evaluation, risk assessment, or behavioral management; or

31 (F) airway management; ~~management and~~

32 (2) unexpired current ACLS, ACLS certification, which shall not count towards the six hours required  
33 in ~~Subparagraph Paragraph [(e);] (e)(1) of this Rule; and~~

34 (3) that the permit holder and all auxiliaries involved in anesthesia or sedation procedures have  
35 practiced responding to dental emergencies as a team at least once every six months in the  
36 preceding year; ~~and~~

- 1 (4) that the permit holder and all auxiliaries involved in anesthesia or sedation procedures have read  
2 the practice's emergency manual in the preceding year; and  
3 (5) that all [~~permit holder~~] auxiliaries involved in sedation procedures have completed BLS  
4 certification and six hours of continuing education in medical emergencies annually.  
5

6 *History Note: Authority G.S. 90-28; 90-30.1; 90-31; 90-39(12); 90-48;*  
7 *Eff. March 1, 2016.*  
8  
9  
10

1 21 NCAC 16Q .0301 is amended as published in 30:1 NCR 2 with changes as follows:

2  
3 **21 NCAC 16Q .0301 CREDENTIALS AND PERMITS FOR MODERATE CONSCIOUS SEDATION**  
4 **SEDATION, MODERATE PEDIATRIC CONSCIOUS SEDATION AND**  
5 **MODERATE CONSCIOUS SEDATION LIMITED TO ORAL ROUTES OF**  
6 **ADMINISTRATION AND NITROUS OXIDE**

7 (a) Before a dentist licensed to practice in North Carolina may administer or supervise a ~~certified registered nurse~~  
8 ~~anesthetist (CRNA)~~ CRNA ~~[or RN]~~ employed to administer or RN employed to deliver moderate conscious  
9 sedation, ~~moderate pediatric conscious sedation or moderate conscious sedation limited to oral routes of~~  
10 ~~administration and nitrous oxide to dental patients on an outpatient basis~~, the dentist shall obtain a permit from the  
11 Board by completing an application form ~~provided by the Board~~ and paying a fee of ~~one hundred dollars (\$100.00).~~  
12 ~~three hundred seventy five dollars (\$375.00).~~ The application form is available on the Board's website:  
13 [www.ncdentalboard.org](http://www.ncdentalboard.org). ~~The~~ Such permit shall be renewed annually and shall be displayed with the current  
14 renewal at all times ~~in a conspicuous place in the facility of the permit holder.~~ holder where it is visible to patients  
15 receiving treatment.

16 (b) The permit holder shall ~~[directly supervise]~~ provide direct supervision to any CRNA ~~[or RN]~~ employed to  
17 administer or RN employed to deliver ~~[sedation]~~ sedation, and shall ensure that the level and duration of the  
18 sedation does not exceed the permit holder's permit.

19 (b) ~~For a dentist to employ a certified registered nurse anesthetist to administer moderate conscious sedation,~~  
20 ~~moderate conscious sedation limited to oral routes and nitrous oxide or moderate pediatric conscious sedation, the~~  
21 ~~dentist must demonstrate through the permitting process that he or she is capable of performing all duties and~~  
22 ~~procedures to be delegated to the CRNA— The dentist must not delegate said CRNA perform procedures outside of~~  
23 ~~the scope of the technique and purpose of moderate conscious sedation, moderate pediatric conscious sedation or~~  
24 ~~moderate conscious sedation limited to oral routes and nitrous oxide as defined in Rule .0101 of this Subchapter.~~

25 (c) A dentist applying for a permit to administer moderate conscious sedation ~~or moderate pediatric conscious~~  
26 ~~sedation shall~~ must meet at least one of the following criteria: ~~[document:]~~ document the following:

- 27 (1) ~~Satisfactory completion~~ Completion of a minimum of [90] 60 hours of Board approved didactic  
28 training training, including PALS (Pediatric Advanced Life Support), and instruction in  
29 intravenous conscious sedation, sedation and 30 hours of clinical training, ~~[which]~~ that shall  
30 include satisfactory successful management of a minimum of ~~40~~ 20 live patients, under  
31 ~~[supervision,]~~ supervision of the course instructor, using intravenous sedation. Training shall be  
32 provided by one or more individuals who meet the American Dental Association Guidelines For  
33 Teaching Pain Control and Sedation to [Dentists or:] Dentists that is hereby incorporated by  
34 reference, including subsequent amendments and editions. The guidelines may be found at  
35 [www.ada.org/coda](http://www.ada.org/coda).

1           (2) ~~Satisfactory completion~~ Completion of a pre-doctoral dental or postgraduate program ~~which that~~  
2           included intravenous conscious sedation training equivalent to that defined in Subparagraph (c)(1)  
3           of this Rule; ~~or [and;]~~

4           (3) ~~[Current] Unexpired ACLS certification [ACLS;]~~ and

5           (4) ~~That all auxiliaries involved in sedation procedures have [current] unexpired BLS certification.~~

6           (3) ~~Satisfactory completion of a pre-doctoral dental or postgraduate program which included~~  
7           ~~intravenous conscious sedation training equivalent to that defined in Subparagraph (c)(1) of this~~  
8           ~~Rule.~~

9           ~~(d) Notwithstanding the foregoing, a dentist may also qualify for a permit to administer moderate pediatric~~  
10           ~~conscious sedation by documenting, with patient names and dates of completion, at least 100 cases of moderate~~  
11           ~~pediatric sedation procedures successfully completed between July 3, 2006 and July 3, 2009. A dentist who obtains~~  
12           ~~a pediatric conscious sedation permit pursuant to this Paragraph may not administer sedation intravenously and such~~  
13           ~~limitation shall be noted on the dentist's permit.~~

14           ~~(e) A dentist may modify his or her moderate conscious sedation permit to include the privilege of moderate~~  
15           ~~pediatric conscious sedation by completing a Board-approved pediatric dental degree or pediatric dental residency~~  
16           ~~program or obtaining the equivalent hours of continuing education program in pediatric dental anesthesia. If said~~  
17           ~~qualifications are satisfied, it shall be so designated on the dentist's moderate conscious sedation permit and will be~~  
18           ~~subject to the renewal requirements stated in Rule .0501(d) of this Subchapter.~~

19           ~~(f) To be eligible for a moderate conscious sedation permit, moderate conscious sedation limited to oral routes and~~  
20           ~~nitrous oxide inhalation permit or moderate pediatric conscious sedation permit, a dentist must operate within a~~  
21           ~~facility which includes the capability of delivering positive pressure oxygen, and is staffed with supervised auxiliary~~  
22           ~~personnel for each procedure performed. The dentist shall ensure that auxiliary personnel document annual,~~  
23           ~~successful completion of basic life support (BLS) training and are capable of assisting with procedures, problems~~  
24           ~~and emergencies incident thereto.~~

25           ~~(d) All applicants for a moderate conscious sedation permit shall be in good standing with the Board.~~

26           ~~(e)(g) Prior to issuance of a moderate conscious sedation permit, moderate conscious pediatric sedation permit or~~  
27           ~~moderate conscious sedation permit limited to oral routes and nitrous oxide inhalation permit, the applicant shall~~  
28           ~~undergo pass an evaluation which includes and a facility inspection. The Board shall direct an evaluator to perform~~  
29           ~~this evaluation. The applicant shall be notified in writing that an evaluation and facility inspection is required and~~  
30           ~~provided with the name of the evaluator who shall perform the evaluation and facility inspection. The applicant shall~~  
31           ~~be responsible for successful completion of passing the evaluation and inspection of his or her facility within three~~  
32           ~~months 90 days of notification. An extension of no more than 90 days shall be granted if the designated evaluator or~~  
33           ~~applicant requests one, one by contacting the Board in writing.~~

34           ~~[(f) The entire fee of three hundred seventy five dollars (\$375.00) shall be due 10 days after the applicant receives~~  
35           ~~notice of the inspection of each additional location at which the dentist administers sedation.]~~

36           ~~(h) [(g) The evaluator shall assign a grade of pass or fail and shall report his [or her] recommendation to the Board,~~  
37           ~~setting out the basis for his [or her] conclusion. The Board, [Board's Anesthesia and Sedation Committee] is not~~

1 bound by the evaluator's recommendation and shall make a final determination regarding whether the applicant has  
2 passed the evaluation. The applicant shall be notified of the ~~[Committee's ]~~Board's decision in writing.

3 ~~[(h) An applicant who fails an inspection or evaluation shall not receive a sedation permit.]~~

4 ~~[(i) An applicant who fails an inspection or evaluation may request a re-evaluation or re-inspection within 15 days  
5 of receiving the notice of failure. The request shall state specific grounds supporting it. The Board shall  
6 require the applicant to receive additional training prior to the re-evaluation to address the areas of deficiency  
7 determined by the evaluation.]~~

8 ~~[(j) Re-inspections and re-evaluations shall be conducted by evaluators not involved in the failed inspection or  
9 evaluation.]~~

10 ~~[(k) An applicant who does not pass the evaluation and inspection within the time allowed by Paragraph (e) of this  
11 Rule shall reapply and pay an additional three hundred seventy five dollar (\$375.00) fee.]~~

12 ~~(i) ~~[(4)]~~ (f) A dentist who holds a moderate conscious ~~sedation, sedation~~ moderate conscious sedation limited to oral  
13 routes and nitrous oxide inhalation or moderate pediatric conscious sedation permit shall not intentionally administer  
14 deep sedation ~~sedation~~. although deep sedation may occur briefly and unintentionally.~~

15 ~~(j) A dentist may obtain a moderate conscious sedation permit limited to oral routes of administration and nitrous  
16 oxide inhalation, including the ability to add supplemental dosing to the techniques set out in Rule .0101(23) of this  
17 Subchapter upon compliance with the following requirements:~~

18 (1) — successfully complete 24 hours of didactic training and manage at least 10 adult case experiences,  
19 including at least three live clinical dental experiences. The live clinical cases shall not be handled  
20 by groups with more than five student participants. The remaining cases may include simulations,  
21 video presentations or both, but must include one experience in returning/rescuing a patient from  
22 deep to moderate sedation; or

23 (2) — document, with patient names and dates of completion, at least 100 cases of oral moderate  
24 conscious sedation procedures successfully completed within one year preceding June 3, 2008;  
25 and fulfill all the requirements listed in Rule .0401 of this Subchapter for minimal conscious  
26 sedation.

27 ~~(k) A dentist who is qualified to administer general anesthesia, moderate conscious sedation or moderate pediatric  
28 conscious sedation and holds a general anesthesia, moderate conscious sedation permit or a moderate pediatric  
29 conscious sedation permit may administer minimal conscious sedation or moderate conscious sedation limited to  
30 oral routes without obtaining an additional a separate minimal conscious sedation permit.~~

31 ~~(l) Any dentist who holds an active parenteral conscious sedation permit as of October 1, 2007 shall be deemed to  
32 hold an active moderate conscious sedation permit. Such permits shall be subject to the renewal requirements set  
33 out in Rule .0501 of this Subchapter.~~

34  
35 *History Note: Authority G.S. 90-28; 90-30.1; 90-39(12); 90-48;*  
36 *Eff. February 1, 1990;*  
37 *Amended Eff. April 1, 2001; August 1, 2000; January 1, 1994;*



1 Temporary Amendment Eff. December 11, 2002;  
2 Amended Eff. March 1, 2016; July 1, 2010, July 3, 2008; August 1, 2004.

3  
4 21 NCAC 16Q .0302 is amended as published in 30:1 NCR 2 with changes as follows:

5  
6 **21 NCAC 16Q .0302 MODERATE CONSCIOUS SEDATION CLINICAL REQUIREMENTS AND**  
7 **EQUIPMENT**

8 (a) A dentist administering moderate conscious sedation ~~or moderate pediatric conscious sedation~~ or supervising the  
9 ~~administration delivery~~ of moderate conscious sedation ~~or moderate pediatric conscious sedation~~ by a certified  
10 registered nurse anesthetist by a CRNA or RN shall be responsible to ensure that the facility in ~~which~~ where the  
11 sedation is ~~to be~~ administered meets the following requirements:

- 12 (1) The facility ~~shall be is~~ equipped ~~with the following:~~ with:
- 13 (A) ~~an An~~ operator of size and design to permit access of emergency equipment and  
14 personnel and to permit effective emergency management;
  - 15 (B) ~~a A~~ CPR ~~Board board~~ or a dental chair without enhancements, suitable for providing  
16 emergency treatment;
  - 17 (C) lighting ~~Lighting~~ as necessary for specific ~~procedures;~~ procedures and back-up lighting;  
18 and
  - 19 (D) suction ~~Suction~~ equipment as necessary for specific procedures, including non-electrical  
20 back-up suction.

21 ~~(2) The following equipment is maintained:~~

- 22 ~~(A) (E)~~ Positive ~~positive~~ oxygen delivery system, including full face masks for ~~adults and~~  
23 ~~pediatric~~ small, [medium] medium, and large patients and back-up E-cylinder portable  
24 oxygen tank apart from the central system;
- 25 ~~(B) (F)~~ Small, [medium] medium, and large ~~Oral oral~~ and nasal airways; ~~airways of various~~  
26 sizes;
- 27 ~~(C) (G)~~ Blood ~~blood~~ pressure monitoring device;
- 28 ~~(D) (H)~~ Pulse ~~pulse~~ oximeter; and
- 29 ~~(E) (I)~~ Automatic External Defibrillator ~~automatic external defibrillator~~ ~~(AED);~~ AED;
- 30 ~~(F) (J)~~ EKG ~~Monitor;~~ monitor;
- 31 ~~(G) (K)~~ Capnograph; ~~and~~ capnograph;
- 32 ~~(H) (L)~~ Thermometer; ~~thermometer;~~

33 ~~(3) The following emergency equipment is maintained:~~

- 34 ~~(A) (D)~~ (M) ~~I.V.~~ [Vascular] vascular access set-up as necessary for specific procedures, including  
35 hardware and fluids; ~~fluids;~~ if anesthesia is intravenous;
- 36 ~~(B) (J)~~ (N) ~~Syringes~~ syringes as necessary for specific procedures; ~~and~~
- 37 ~~(C) (K)~~ (O) ~~tourniquet~~ Tourniquet and ~~tape;~~ tape;

- 1 ~~[(L)](P)~~ Advanced advanced airway devices; and
- 2 ~~[(M)](Q)~~ Tonsillar tonsillar suction with back-up suction.
- 3 (4) ~~[(2)]~~ (3) The following drugs are maintained with a current shelf life and with access from the operatory
- 4 and recovery area: ~~The following unexpired drugs shall be maintained in the facility and with~~
- 5 ~~access from the operatory and recovery rooms:~~
- 6 (A) Epinephrine; ~~[Injectable]~~ injectable epinephrine;
- 7 (B) Atropine; ~~[Injectable]~~ injectable Atropine;
- 8 (C) Appropriate ~~[Injectable]~~ injectable appropriate reversal agents;
- 9 (D) Antihistamine; ~~[Injectable]~~ injectable antihistamine;
- 10 (E) Corticosteroid; ~~[Injectable]~~ injectable corticosteroid;
- 11 (F) Nitroglycerine; ~~nitroglycerine;~~
- 12 (G) Bronchial dilator; ~~[Bronchodilator;]~~ bronchodilator;
- 13 (H) Antiemetic; ~~[Injectable]~~ injectable antiemetic;
- 14 (I) ~~[Injectable]~~ injectable 50% Dextrose; and
- 15 (J) Anti-arrhythmic; ~~[Injectable]~~ injectable anti-arrhythmic.
- 16 (5) ~~[(3)]~~ (4) The permit holder shall maintain ~~written~~ Written emergency and patient discharge protocols
- 17 ~~are maintained~~ and training to familiarize ~~office personnel-auxiliaries~~ in the treatment of clinical
- 18 emergencies ~~is~~ shall be provided; and
- 19 (6) ~~[(4)]~~ (5) The dentist shall maintain the following records ~~are maintained~~ for at least 10 years:
- 20 (A) Patient's current written medical ~~history;~~ history and pre-operative assessment; including
- 21 known allergies and previous surgery; and
- 22 (B) Drugs administered during the procedure, including route of administration, dosage,
- 23 strength, time and sequence of administration;
- 24 ~~(C) — A sedation record which shall include: [record; and]~~
- 25 (i) — blood pressure;
- 26 (ii) — pulse rate;
- 27 (iii) — respiration;
- 28 (iv) — duration of procedure;
- 29 (v) — documentations of complications or morbidity; and
- 30 (vi) — status of patient upon discharge.
- 31 ~~[(D) — Signed consent form, identifying the procedure, risks and benefits,~~
- 32 ~~level of sedation and date signed.]~~
- 33 (5) (6) The sedation record shall include:
- 34 (A) base line vital signs, blood pressure (unless patient behavior prevents recording);
- 35 oxygen saturation, ET CO2, pulse and respiration rates of the patient recorded in real
- 36 time at 15 minute intervals;
- 37 (B) procedure start and end times;

1 (C) gauge of needle and location of [IV,] IV on the patient, if used;

2 (D) status of patient upon discharge; [and]

3 (E) documentation of complications or [morbidity,] morbidity; and

4 (F) Consent form, signed by the patient or guardian, identifying the procedure, risks and  
5 benefits, level of sedation, and date signed.

6 (6) (7) The following conditions shall be satisfied during a sedation procedure:

7 (A) [Two] two BLS certified auxiliaries shall be present at all times during the  
8 procedure, one of whom shall be dedicated to continuous patient  
9 monitoring and recording sedation [data,] data; and

10 (B) [If,] if IV sedation is used, IV infusion shall be administered before the  
11 start of the procedure and maintained until the patient is ready for  
12 [dismissal,] discharge.

13 (b) During an inspection or evaluation, the applicant or permit holder shall demonstrate the administration of  
14 moderate conscious sedation on a patient, ~~or where applicable, moderate pediatric conscious sedation on a patient,~~  
15 including the deployment of an intravenous delivery system, while the evaluator observes. ~~Practices limited to~~  
16 ~~pediatric dentistry will not be required to demonstrate the deployment of an intravenous delivery system. Instead,~~  
17 ~~they will orally describe to the evaluator the technique of their training in intravenous and intraosseous deployment.~~

18 During the demonstration, the applicant or permit holder shall demonstrate competency in the following areas:

19 (1) Monitoring monitoring blood pressure, pulse, ET [CO<sub>2</sub>] CO<sub>2</sub>, and respiration;

20 (2) Drug drug dosage and administration;

21 (3) Treatment treatment of untoward reactions including respiratory or cardiac depression if  
22 applicable;

23 (4) Sterile sterile technique;

24 (5) Use use of BLS CPR certified ~~personnel; auxiliaries;~~

25 (6) Monitoring monitoring of patient during recovery; and

26 (7) Sufficiency sufficiency of patient recovery time.

27 (c) During an inspection or evaluation, the applicant or permit holder shall verbally demonstrate competency to the  
28 evaluator in the treatment of the following clinical emergencies:

29 (1) Laryngospasm; laryngospasm;

30 (2) bronchospasm; Bronchospasm;

31 (3) Emesis emesis and aspiration;

32 (4) Respiratory respiratory depression and arrest;

33 (5) Angina angina pectoris;

34 (6) Myocardial myocardial infarction;

35 (7) Hypertension/Hypotension; [Hypertension and Hypotension,] hypertension and hypotension;

36 (8) Syncope; syncope;

37 (9) Allergie allergic reactions;

- 1 (10) ~~Convulsions;~~ convulsions;
- 2 (11) ~~Bradycardia;~~ bradycardia
- 3 (12) ~~Insulin~~ insulin shock; and
- 4 (13) ~~Cardiac~~ arrest. cardiac arrest; and
- 5 (14) ~~Airway~~ airway obstruction.

6 ~~(d) A dentist administering moderate conscious sedation or moderate pediatric conscious sedation shall ensure that~~  
7 ~~the facility is staffed with sufficient auxiliary personnel for each procedure performed who shall document annual~~  
8 ~~successful completion of basic life support training and be capable of assisting with procedures, problems, and~~  
9 ~~emergency incidents that may occur as a result of the sedation or secondary to an unexpected medical complication.~~

10 (d) A moderate conscious sedation permit holder shall evaluate ~~patients~~ a patient for health risks before starting  
11 any sedation procedure as follows:

- 12 (1) ~~[A]~~ a patient who is medically stable and who is ASA I or II shall be evaluated by reviewing the
- 13 patient's current medical history and medication ~~[use.] use or;~~
- 14 (2) ~~[Patients]~~ a patient who ~~[are]~~ is not medically stable or who are ASA III or higher shall be
- 15 evaluated by a consultation with the patient's primary care physician or consulting medical
- 16 specialist regarding the potential risks posed by the procedure.

17 (e) Post-operative monitoring and discharge:

- 18 (1) ~~[Vital]~~ vital signs shall be continuously monitored when the sedation is no longer being
- 19 administered and the patient shall have direct continuous supervision until oxygenation and
- 20 circulation are stable and the patient is ~~sufficiently responsive~~ recovered as defined in
- 21 ~~[Paragraph]~~ Subparagraph (e)(2) of this Rule and is ready for discharge from the office.
- 22 (2) ~~[Recovery]~~ recovery from moderate conscious sedation shall ~~[include:] include documentation of~~
- 23 ~~the following:~~
- 24 (A) cardiovascular function stable;
- 25 (B) airway patency uncompromised;
- 26 (C) patient ~~[easily]~~ arousable and protective reflexes intact;
- 27 (D) state of hydration within normal limits;
- 28 (E) patient can talk, if applicable;
- 29 (F) patient can sit unaided, if applicable;
- 30 (G) patient can ambulate, if applicable, with minimal assistance; and
- 31 (H) for ~~special needs patients~~ ~~[the patient who is disabled, or]~~ or patients incapable of the
- 32 usually expected responses, the pre-sedation level of responsiveness or the level as close
- 33 as possible for that patient shall be achieved.
- 34 (3) ~~[Before]~~ before allowing the patient to leave the office, the dentist shall determine that the patient
- 35 has met the recovery criteria set out in Subparagraph (e)(2) of this Rule and the following
- 36 discharge criteria:

- 1           (A) oxygenation, circulation, activity, skin [color] color, and level of consciousness are  
2           [sufficient and stable] stable, and have been documented;  
3           (B) explanation and documentation of written postoperative instructions have been provided  
4           to the patient or a responsible adult at time of discharge; and  
5           (C) [responsible individual] a vested adult is available [for the patient] to transport the patient  
6           after discharge.

7

8   *History Note: Authority G.S. 90-28; 90-30.1; 90-48;*

9           *Eff. February 1, 1990;*

10          *Amended Eff. August 1, 2002; August 1, 2000;*

11          *Temporary Amendment Eff. December 11, 2002;*

12          *Amended Eff. March 1, 2016; November 1, 2013; July 1, 2010; July 3, 2008; August 1, 2004.*

13

1 21 NCAC 16Q .0304 is amended as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0304 OFF SITE USE OF MODERATE CONSCIOUS SEDATION PERMITS**

4 ~~(a) Upon request, the~~ The holder of a ~~moderate pediatric conscious sedation or~~ moderate conscious sedation permit  
5 may travel to the office of a licensed dentist ~~who does not hold such a permit~~ and provide moderate conscious  
6 ~~sedation services at the level for which the traveling dentist holds a valid permit, as well as minimal sedation or~~  
7 ~~moderate conscious sedation limited to oral routes~~ for the patients of that dentist who are undergoing dental  
8 procedures. The permit holder shall be responsible to ensure ~~is solely responsible for providing~~ that the facility ~~in~~  
9 ~~which where~~ the sedation is administered has passed inspection by the Board and meets the requirements set out in  
10 Rule .0302 of this Section. ~~established by the Board, that the required drugs and equipment are present, and The~~  
11 ~~that the permit holder shall~~ be responsible to ensure that utilizes sufficient auxiliary personnel for each procedure  
12 ~~performed based on the standard of care who shall document annual successful completion of basic life support~~  
13 ~~training- two BLS certified auxiliaries are available for each procedure. and be capable of assisting with procedures,~~  
14 ~~problems, and emergency incidents that may occur as a result of the sedation or secondary to an unexpected medical~~  
15 ~~complication.~~

16 ~~(b) Holders of moderate conscious sedation permits limited to oral routes and nitrous oxide inhalation may not~~  
17 ~~provide sedation at the office of a licensed dentist who does not hold an appropriate sedation permit.~~

18

19 *History Note: Authority G.S. 90-28; 90-30; 90-30.1; 90-48;*

20 *Recodified from 21 NCAC 16Q .0302(e)(f), Eff. November 1, 2013.*

21 *Amended Eff. March 1, 2016.*

22

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24

1 21 NCAC 16Q .0305 is adopted as published in 30:1 NCR 2 with changes as follows:

2

3 **21 NCAC 16Q .0305 ANNUAL RENEWAL OF MODERATE CONSCIOUS SEDATION PERMIT**  
4 **REQUIRED**

5 (a) Moderate conscious sedation permits shall be renewed by the Board annually at the same time as dental licenses  
6 by paying a one hundred dollar (\$100.00) fee and completing an application available from the Board's website:  
7 [www.ncdentalboard.org](http://www.ncdentalboard.org).

8 (b) If the completed permit renewal application and renewal fee are not received before January 31 of each year, a  
9 one hundred dollar (\$100.00) late fee shall be paid.

10 (c) Any dentist who fails to renew a moderate conscious sedation permit before March 31 of each year shall  
11 complete a reinstatement application, pay the renewal fee, late ~~fee-fee~~, and comply with all conditions for renewal  
12 set out in this Rule. Dentists whose sedation permits have been lapsed for more than 12 calendar months shall pass  
13 ~~a-an facilities~~ inspection and an evaluation as part of the reinstatement process.

14 (d) A dentist who administers moderate conscious sedation in violation of this Rule shall be subject to the  
15 penalties prescribed by Rule .0701 of this Subchapter.

16 (e) As a condition for renewal of the moderate conscious sedation ~~permit-permit~~, the ~~applicant-permit holder~~ shall  
17 meet the clinical and equipment requirements of Rule .0302 of this Section and shall ~~document-~~document the  
18 following:

19 (1) six hours of continuing education each year in one or more of the following areas, which may be  
20 counted toward fulfillment of the continuing education required each calendar year for license  
21 renewal:

22 (A) sedation;

23 (B) medical emergencies;

24 (C) monitoring IV sedation and the use of monitoring equipment;

25 (D) pharmacology of drugs and agents used in IV sedation;

26 (E) physical evaluation, risk assessment, or behavioral management; or

27 (F) airway management; ~~and~~

28 (2) ~~unexpired current~~ ACLS certification, ACLS, which shall not count towards the six hours of  
29 continuing education required in Subparagraph (e)(1) ~~Paragraph (e)(1) of this Rule-~~Rule;

30 (3) that the permit holder and all auxiliaries involved in sedation procedures have practiced  
31 responding to dental emergencies as a team at least once every six months in the preceding year;

32 (4) that the permit holder and all auxiliaries involved in sedation procedures have read the practice's  
33 emergency manual in the preceding year; and

34 (5) that all auxiliaries involved in sedation procedures have completed BLS certification and six hours  
35 of continuing education in medical emergencies annually.

36 (f) All ~~applicants-permit holders applying-~~ for renewal of a moderate conscious sedation permit shall be in good  
37 standing with the Board.

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*History Note:* Authority G.S. 90-28; 90-30.1; 90-31; 90-39(12); 90-48;  
Eff. March 1, 2016.



1 21 NCAC 16Q .0306 is adopted as published in 30:1 NCR 2 with changes as follows:

2  
3 **21 NCAC 16Q .0306 PROCEDURE FOR MODERATE CONSCIOUS SEDATION EVALUATION OR**  
4 **INSPECTION AND RE-INSPECTION**

5 (a) When an evaluation or on-site inspection is required, the Board ~~will~~ shall designate one or more qualified  
6 ~~persons,~~ persons to serve as evaluators [or inspectors,] each of whom has administered moderate conscious sedation  
7 for at least three years preceding the ~~inspection,~~ inspection. ~~exclusive of his or her training~~ Training in moderate  
8 conscious ~~sedation.~~ sedation shall not be counted in the three years.

9 (b) An inspection fee of three hundred seventy five dollars (\$375.00) shall be due 10 days after the dentist receives  
10 notice of the inspection of each additional location at which the dentist administers moderate conscious sedation.

11 (c) Any dentist-member of the Board may observe or consult in any ~~evaluation.~~ evaluation or inspection.

12 (d) The inspection team shall determine compliance with the requirements of the Rules in this Subchapter, as  
13 applicable, by assigning a grade of "pass" or ~~["fail,]~~ "fail."

14 (e) Each evaluator shall report his or her recommendation to the Board's Anesthesia and Sedation Committee,  
15 setting forth the details supporting his or her conclusion. The Committee ~~is not~~ shall not be bound by these  
16 recommendations. The Committee shall determine whether the applicant has passed the evaluation or inspection  
17 and shall notify the applicant in writing of its decision.

18 (f) An applicant who fails an inspection or evaluation shall not receive a permit to administer moderate conscious  
19 sedation. If a permit holder fails an evaluation, the permit ~~will~~ shall be summarily ~~suspended.~~ suspended as  
20 provided by G.S. 150B-3(c). If a permit holder's facility fails an inspection, no further sedation procedures ~~may~~  
21 shall be performed at the facility until it passes a re-inspection by the Board.

22 (g) An applicant who fails an inspection or evaluation may request a re-evaluation or re-inspection within 15 days  
23 of receiving the notice of failure. The request shall be directed to the Board in writing and shall include a  
24 statement of the grounds supporting the re-evaluation or re-inspection. The Board shall require the applicant to  
25 receive additional training prior to the re-evaluation to address the areas of deficiency determined by the evaluation.  
26 The Board shall notify the applicant in writing of the need for additional training.

27 (h) Re-evaluations and re-inspections shall be conducted by Board-appointed evaluators not involved in the failed  
28 evaluation or inspection.

29  
30 *History Note: Authority G.S. ~~90-28;~~ 90-30.1; 90-39;90-48;*  
31 *Eff. March 1, 2016.*  
32

1 21 NCAC 16Q .0404 is adopted as published in 30:1 NCR 2 with changes as follows:

2  
3 **21 NCAC 16Q .0404 CREDENTIALS AND PERMITS FOR MODERATE PEDIATRIC CONSCIOUS**  
4 **SEDATION**

5 (a) Before a dentist licensed to practice in North Carolina may administer moderate pediatric conscious sedation,  
6 the dentist shall obtain a general anesthesia or moderate pediatric conscious sedation permit from the Board by  
7 completing an application form and paying a fee of three hundred seventy-five dollars (\$375.00). The application  
8 form is available on the Board's website: [www.ncdentalboard.org](http://www.ncdentalboard.org). The permit shall be renewed annually and shall  
9 be displayed with the ~~current~~ unexpired renewal at all times in the permit holder's facility where it is visible to  
10 patients receiving treatment.

11 (b) A dentist applying for a permit to administer moderate pediatric conscious sedation shall meet at least one of the  
12 following criteria:

- 13 (1) completion of a postgraduate program ~~which that~~ included pediatric intravenous conscious  
14 sedation training;
- 15 (2) completion of a Council On Dental Accreditation (CODA) approved pediatric residency ~~which~~  
16 that included intravenous conscious sedation training; or
- 17 (3) completion of a pediatric degree or pediatric residency at a CODA approved institution that  
18 includes training in the use and placement of IVs or intraosseous vascular access. A list of CODA  
19 approved institutions that is hereby incorporated by reference, including subsequent amendments  
20 and editions, appears at [www.ada.org/coda](http://www.ada.org/coda).

21 (c) All applicants for moderate pediatric conscious sedation permits shall have completed the training required by  
22 Paragraph (b) of this Rule within the last two years or show evidence of moderate pediatric conscious sedation  
23 practice within the last two years in another state or U.S. Territory.

24 (d) All applicants for moderate pediatric conscious sedation permits shall be in good standing with the Board.

25 ~~(e) Before receiving a moderate pediatric sedation permit, the applicant shall pass an evaluation and a facility~~  
26 ~~inspection. The Board shall direct an evaluator to perform this evaluation and inspection. The Board shall notify~~  
27 ~~the applicant in writing that an evaluation and facility inspection is required and [ provided with the name of ] the~~  
28 ~~evaluator who shall perform the evaluation and facility inspection at least 15 days before the inspection and~~  
29 ~~evaluation. The applicant shall be responsible for successful completion of the evaluation and inspection of his or~~  
30 ~~her facility within 90 days of notification. An extension of no more than 90 days shall be granted if the designated~~  
31 ~~evaluator or applicant requests one.~~

32 ~~(f) An additional fee of three hundred seventy five dollars (\$375.00) shall be due 10 days after the applicant~~  
33 ~~receives notice of the inspection of each additional location at which the dentist administers sedation.~~

34 ~~(g) The evaluator shall assign a grade of pass or fail and shall report his or her recommendation to the Board, setting~~  
35 ~~out the basis for his or her conclusion. The Board's Anesthesia and Sedation Committee is not bound by the~~  
36 ~~evaluator's recommendation and shall make a final determination regarding whether the applicant has passed the~~  
37 ~~evaluation. The applicant shall be notified of the Committee's decision in writing.~~

- 1 ~~(h) An applicant who fails an inspection or an evaluation shall not receive a sedation permit.~~  
2 ~~(i) An applicant who fails an inspection or evaluation may request a re-evaluation within 15 days of receiving the~~  
3 ~~notice of failure. The request shall state specific grounds supporting it. The Board shall require the applicant~~  
4 ~~to receive additional training prior to the re-evaluation to address the areas of deficiency determined by the~~  
5 ~~evaluation.~~  
6 ~~(j) Re-inspections shall be conducted by evaluators not involved in the failed inspection or evaluation.~~  
7 ~~(k) An applicant who does not pass the evaluation and inspection within the time allowed by Paragraph [(g)]~~  
8 ~~of this Rule shall reapply and pay an additional three hundred seventy five dollar (\$375.00) fee.~~  
9 ~~(l) A dentist who holds a moderate pediatric conscious sedation permit shall not intentionally administer deep~~  
10 ~~sedation.~~

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*History Note: Authority G.S. ~~90-28~~; 90-30.1; 90-39(12); 90-48;  
Eff. March 1, 2016.*

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21 NCAC 16Q .0405 is adopted as published in 30:1 NCR 2 with changes as follows:

**21 NCAC 16Q .0405      MODERATE PEDIATRIC CONSCIOUS SEDATION CLINICAL  
REQUIREMENTS AND EQUIPMENT**

(a) A dentist administering moderate pediatric conscious sedation shall be responsible to ensure that the facility where in which the sedation is ~~to be~~ administered meets the following requirements:

- (1) The facility ~~is~~ shall be equipped ~~with:~~ with the following:
  - (A) ~~An~~ an operatory of size and design to permit access of emergency equipment and personnel and to permit ~~effective~~ emergency management;
  - (B) ~~A~~ a CPR board or a dental chair without enhancements, suitable for providing emergency treatment;
  - (C) ~~Lighting~~ lighting as necessary for specific procedures and back-up lighting; ~~and~~
  - (D) ~~Suction~~ suction equipment as necessary for specific procedures, including non-electrical back-up ~~[suction.]~~ suction;

~~[(2) The following equipment is maintained:]~~

- ~~[(A)]~~ (E) Positive oxygen delivery system, including full face masks for small, medium, and large adults and pediatric patients—patients, and back-up E-cylinder portable oxygen tank apart from the central system;
- ~~[(B)]~~ (F) Oral oral and nasal airways of various sizes;
- ~~[(C)]~~ (G) Blood blood pressure monitoring device;
- ~~[(D)]~~ (H) Pulse pulse oximeter;
- ~~[(E)]~~ (I) Capnograph; capnograph;
- ~~[(F)]~~ (J) Defibrillator; defibrillator;
- ~~[(G)]~~ (K) EKG Monitor; monitor;
- ~~[(H)]~~ (L) Thermometer; thermometer;
- ~~[(I)]~~ (M) Vascular vascular access set-up as necessary for specific procedures, including hardware and fluids;
- ~~[(J)]~~ (N) Syringes syringes as necessary for specific procedures;
- ~~[(K)]~~ (O) Advanced advanced-airways; and
- ~~[(L)]~~ (P) Tourniquet ~~tourniquet~~ and tape.

~~[(3)]~~ (2) The following drugs are maintained with a current shelf life and with access from the operator and recovery area: The following unexpired drugs shall be maintained in the facility and with access from the operator and recovery rooms:

- (A) ~~Epinephrine;~~ epinephrine;

- 1 (B) Atropine;
- 2 (C) ~~Appropriate~~ appropriate reversal agents;
- 3 (D) ~~Antihistamine;~~ antihistamine;
- 4 (E) ~~Corticosteroid;~~ corticosteroid;
- 5 (F) ~~Nitroglycerine;~~ nitroglycerine;
- 6 (G) ~~Bronchodilator;~~ bronchodilator;
- 7 (H) ~~Antiemetic;~~ antiemetic; and
- 8 (I) 50% Dextrose.

9 ~~{(4)}~~ (3) The permit holder shall maintain ~~written~~ Written emergency and patient discharge protocols ~~are~~  
 10 ~~maintained~~ and training to familiarize auxiliaries in the treatment of clinical emergencies ~~is~~ shall  
 11 ~~be provided; and~~

12 ~~{(5)}~~ (4) The following records are maintained for at least 10 years:

- 13 (A) patient's ~~Patient's~~ current written medical history and pre-operative assessment;
- 14 (B) drugs ~~Drugs~~ administered during the procedure, including route of administration,  
 15 dosage, strength, time and sequence of administration;
- 16 (C) ~~A~~ a sedation record;
- 17 (D) a ~~Signed~~ consent form, signed by the patient or a guardian, identifying the procedure,  
 18 risks and benefits, level of sedation and date signed.

19 ~~{(6)}~~ (5) The sedation record shall include:

- 20 (A) base line vital signs, blood pressure (unless patient behavior prevents recording); oxygen  
 21 saturation, ET CO<sub>2</sub>, pulse and respiration rates of the patient recorded in real time at 15  
 22 minute intervals;
- 23 (B) procedure start and end times;
- 24 (C) gauge of needle and location of ~~IV,~~ IV on the patient, if used;
- 25 (D) status of patient upon discharge; and
- 26 (E) documentation of complications or ~~morbidity;~~ morbidity; and

27 ~~{(7)}~~ (6) The following conditions shall be satisfied during a sedation procedure:

- 28 (A) ~~Two~~ two BLS certified auxiliaries shall be present at all times during the  
 29 procedure, one of whom shall be dedicated to patient monitoring and  
 30 recording sedation data.
- 31 (B) ~~When~~ when IV sedation is used, IV infusion shall be administered before the  
 32 commencement of the procedure and maintained until the patient is ready for ~~dismissal.~~  
 33 discharge.

34 (b) During an inspection or evaluation, applicants and permit holders who use intravenous sedation shall  
 35 demonstrate the administration of moderate pediatric conscious sedation on a live patient, including the deployment  
 36 of an intravenous delivery system, while the evaluator observes. Applicants and permit holders who do not use IV  
 37 sedation shall describe the proper deployment of an intravenous delivery system to the evaluator and shall

1 demonstrate the administration of moderate pediatric conscious sedation on a live patient while the evaluator  
2 observes.

3 (c) During the demonstration, all applicants and permit holders shall demonstrate competency in the following areas:

- 4 (1) ~~Monitoring~~ monitoring blood pressure, pulse, and respiration;
- 5 (2) ~~Drug-drug~~ dosage and administration;
- 6 (3) ~~Treatment~~ treatment of untoward reactions including respiratory or cardiac depression if  
7 applicable;
- 8 (4) ~~Sterile-sterile~~ technique;
- 9 (5) ~~Use~~ use of BLS certified auxiliaries;
- 10 (6) ~~Monitoring~~ monitoring of patient during recovery; and
- 11 (7) ~~Sufficiency~~ sufficiency of patient recovery time.

12 (d) During an inspection or evaluation, the applicant or permit holder shall verbally demonstrate competency in  
13 ~~treating-the treatment of-~~ the following clinical emergencies:

- 14 (1) ~~Laryngospasm;~~ laryngospasm;
- 15 (2) bronchospasm; ~~Bronchospasm;~~
- 16 (3) ~~Emesis~~ emesis and aspiration;
- 17 (4) ~~Respiratory-respiratory~~ depression and arrest;
- 18 (5) ~~Angina~~ angina pectoris;
- 19 (6) ~~Myocardial-myocardial~~ infarction;
- 20 (7) ~~Hypertension/Hypotension;~~ [~~Hypertension and Hypotension;~~] hypertension and hypotension;
- 21 (8) ~~Allergie~~ allergic reactions;
- 22 (9) ~~Convulsions;~~ convulsions;
- 23 (10) ~~Syneope;~~ syncope;
- 24 (11) ~~Bradycardia;~~ bradycardia;
- 25 (12) ~~Insulin-insulin~~ shock;
- 26 (13) ~~Cardiac-cardiac~~ arrest;
- 27 (14) ~~Airway~~ airway obstruction; and
- 28 (15) ~~Vascular~~ vascular access.

29 (e) ~~A~~ a moderate pediatric conscious sedation permit holder shall evaluate patients for health risks before starting  
30 any sedation procedure as follows:

- 31 (1) ~~A~~ a patient who is medically stable and who is ASA I or II shall be evaluated by reviewing the  
32 patient's current medical history and medication ~~use-use;~~ or
- 33 (2) ~~Patients who are-a~~ a patient who is not medically stable or who ~~are~~ is ASA III or higher shall be  
34 evaluated by a consultation with the patient's primary care physician or consulting medical  
35 specialist regarding the potential risks posed by the procedure.

36 (f) Patient monitoring:

- 1 (1) Patients who have been administered moderate pediatric conscious sedation shall be monitored for  
2 alertness, responsiveness, ~~breathing-breathing,~~ and skin coloration during waiting periods before  
3 operative procedures.
- 4 (2) Vital signs shall be continuously monitored when the sedation is no longer being administered and  
5 the patient shall have direct continuous supervision until oxygenation and circulation are stable  
6 and the patient is [~~sufficiently responsive~~] recovered as defined in Subparagraph (f)(3) of this Rule  
7 and is ready for discharge from the office.
- 8 (3) Recovery from moderate pediatric conscious sedation shall ~~include~~ include documentation of the  
9 following:
- 10 (A) cardiovascular function stable;
  - 11 (B) airway patency uncompromised;
  - 12 (C) patient [~~easily~~] arousable and protective reflexes intact;
  - 13 (D) state of hydration within normal limits;
  - 14 (E) patient can talk, if applicable;
  - 15 (F) patient can sit unaided, if applicable;
  - 16 (G) patient can ambulate, if applicable, with minimal assistance; and
  - 17 (H) for the special needs patient ~~who is disabled~~, or a patient incapable of the usually  
18 expected responses, the pre-sedation level of responsiveness or the level as close as  
19 possible for that patient shall be achieved.
- 20 (4) Before allowing the patient to leave the office, the dentist shall determine that the patient has met  
21 the recovery criteria set out in Subparagraph (f)(3) of this Rule and the following discharge  
22 criteria:
- 23 (A) oxygenation, circulation, activity, skin ~~color-color,~~ and level of consciousness are  
24 sufficient and ~~stable-stable,~~ and have been documented;
  - 25 (B) explanation and documentation of written postoperative instructions have been provided  
26 to a responsible adult at time of discharge;
  - 27 (C) a vested adult [~~responsible individual~~] is available [~~for the patient~~] to transport the patient  
28 after discharge; and
  - 29 (D) ~~A~~ a vested adult shall be available to transport patients for whom a motor vehicle  
30 restraint system is required and an additional responsible individual shall be available to  
31 attend to the patients.

32  
33 *History Note: Authority G.S. 90-28; 90-30.1; 90-48;*  
34 *Eff. March 1, 2016.*  
35

1 21 NCAC 16Q .0406 is adopted as published in 30:1 NCR 2 with changes as follows:

2

3 **21 NCAC 16Q .0406 OFF SITE USE OF MODERATE PEDIATRIC CONSCIOUS SEDATION**

4

**PERMITS**

5 The holder of a moderate pediatric conscious sedation permit may travel to the office of a licensed dentist and  
6 provide moderate pediatric conscious sedation. The permit holder shall be responsible to ensure that the facility  
7 where the sedation is administered has been inspected by the Board as required by Rule .0404 of this ~~Section~~  
8 Section, and that the equipment, ~~facility~~ facility, and auxiliaries meet the requirements of Rule .0405 of this Section.

9

10 *History Note:* Authority G.S. 90-28; 90-30.1; 90-48;

11 *Eff. March 1, 2016.*



1 21 NCAC 16Q .0407 is adopted as published in 30:1 NCR 2 with changes as follows:

2  
3 **21 NCAC 16Q .0407 ANNUAL RENEWAL OF MODERATE PEDIATRIC CONSCIOUS SEDATION**  
4 **PERMIT REQUIRED**

5 (a) Moderate pediatric conscious sedation permits shall be renewed by the Board annually at the same time as  
6 dental licenses by paying a one hundred (\$100.00) fee and completing an application available from the Board's  
7 website: [www.ncdentalboard.org](http://www.ncdentalboard.org).

8 (b) If the completed renewal application and renewal fee are not received before January 31 of each year, a one  
9 hundred (\$100.00) late fee shall be paid.

10 (c) Any dentist who fails to renew a moderate pediatric conscious sedation permit before March 31 of each year  
11 shall complete a reinstatement application, pay the renewal fee, late ~~fee~~ fee, and comply with all conditions for  
12 renewal set out in this Rule. Dentists whose sedation permits have been lapsed for more than 12 calendar months  
13 shall pass a an facilities inspection and an evaluation as part of the reinstatement process.

14 (d) A dentist who administers ~~Continued administration of moderate pediatric conscious level of~~ sedation in  
15 violation of this Rule ~~shall be unlawful and shall be~~ subject ~~the dentist~~ to the penalties prescribed by Rule .0701 of  
16 this Subchapter.

17 (e) As a condition for renewal of the moderate pediatric conscious sedation permit, the permit holder shall meet the  
18 clinical and equipment requirements of Rule .0405 of this Section ~~and~~ and shall document the following:

19 (1) ~~document~~ six hours of continuing education each year in one or more of the following areas,  
20 which may be counted toward fulfillment of the continuing education required each calendar year  
21 for license renewal:

22 (A) sedation;

23 (B) medical emergencies;

24 (C) monitoring IV sedation and the use of monitoring equipment;

25 (D) pharmacology of drugs and agents used in IV sedation;

26 (E) physical evaluation, risk assessment, or behavioral management; or

27 (F) airway management; ~~and~~

28 (2) ~~document current PALS, unexpired PALS certification~~ which shall not count towards the six  
29 hours of continuing education required in Subparagraph (e)(1) of this rule;

30 (3) ~~document~~ that the permit holder and all auxiliaries involved in sedation procedures have practiced  
31 responding to dental emergencies as a team at least once every six months in the preceding year.

32 (4) ~~document~~ that the permit holder and all auxiliaries involved in sedation procedures have read the  
33 practice's emergency manual in the preceding year.

34 (5) ~~document~~ that all auxiliaries involved in sedation procedures have completed BLS certification  
35 and six hours of continuing education in medical emergencies annually.

36 (f) All ~~applicants~~ permit holders applying for renewal of a moderate pediatric conscious sedation permit shall be in  
37 good standing with the Board.

1

2 *History Note:* Authority G.S. 90-28; 90-30.1; 90-31; 90-39(12); 90-48;

3

*Eff. March 1, 2016.*

4

5

1 21 NCAC 16Q .0408 is adopted as published in 30:1 NCR 2 with changes as follows:

2  
3 **21 NCAC 16Q .0408 PROCEDURE FOR MODERATE PEDIATRIC SEDATION EVALUATION OR**  
4 **INSPECTION AND RE-INSPECTION**

5 (a) When an evaluation or on-site inspection is required, the Board ~~will~~ shall designate one or more qualified  
6 persons to serve as evaluators, persons, each of whom has administered moderate pediatric sedation for at least three  
7 years preceding the ~~inspection, evaluation or inspection.~~ exclusive of his or her training Training in moderate  
8 pediatric ~~sedation.~~ sedation shall not count toward the three years.

9 (b) An inspection fee of three hundred seventy five dollars (\$375.00) shall be due 10 days after the dentist receives  
10 notice of the inspection of each additional location at which the dentist administers moderate pediatric sedation.

11 (c) Any dentist-member of the Board may observe or consult in any ~~evaluation.~~ evaluation or inspection.

12 (d) The inspection team shall determine compliance with the requirements of the Rules in this Subchapter, as  
13 applicable, by assigning a grade of "pass" or ~~["fail.]"~~ "fail."

14 (e) Each evaluator shall report his or her recommendation to the Board's Anesthesia and Sedation Committee,  
15 setting forth the details supporting his or her conclusion. The Committee ~~is not~~ shall not be bound by these  
16 recommendations. The Committee shall determine whether the applicant has passed the evaluation or inspection  
17 and shall notify the applicant in writing of its decision.

18 (f) An applicant who fails an inspection or evaluation shall not receive a permit to administer moderate pediatric  
19 sedation. If a permit holder fails an evaluation, the permit ~~will~~ shall be summarily ~~suspended.~~ suspended as  
20 provided by G.S. 150B-3(c). If a permit holder's facility fails an inspection, no further sedation procedures ~~may~~  
21 shall be performed at the facility until it passes a re-inspection by the Board.

22 (g) An applicant who fails an inspection or evaluation may request a re-evaluation or re-inspection within 15 days  
23 of receiving the notice of failure. The request shall be directed to the Board in writing and include a statement of  
24 the grounds supporting the re-evaluation or re-inspection. The Board shall require the applicant to receive additional  
25 training prior to the re-evaluation to address the areas of deficiency determined by the evaluation. The Board shall  
26 notify the applicant in writing of the need for additional training.

27 (h) Re-evaluations and re-inspections shall be conducted by Board-appointed evaluators not involved in the failed  
28 evaluation or inspection.

29  
30 *History Note: Authority G.S. ~~90-28; 90-30.1; 90-39; 90-48;~~*  
31 *Eff. March 1, 2016.*  
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21 NCAC 16Q .0703 is adopted as published in 30:1 NCR 2 with changes as follows:

**21 NCAC 16Q .0703      REPORTS OF ADVERSE OCCURRENCES**

(a) A dentist who holds a permit to administer general anesthesia or sedation shall report to the Board within 72 hours after each adverse occurrence related to the administration of general anesthesia or sedation ~~which~~ that results in the death of a patient within 24 hours of the procedure. Sedation permit holders shall cease administration of sedation until the Board has investigated the death and approved resumption of permit privileges. General anesthesia permit holders shall cease administration of general anesthesia and sedation until the Board has reviewed the incident report and approved resumption of permit privileges.

(b) A dentist who holds a permit to administer general anesthesia or sedation shall report to the Board within 30 days after each adverse occurrence related to the administration of general anesthesia or sedation ~~which~~ that results in permanent organic brain dysfunction of a patient occurring within 24 hours of the procedure or ~~which~~ that results in physical injury or severe medical emergencies, causing hospitalization of a patient occurring within 24 hours of the procedure.

(c) The adverse occurrence report shall be in writing and shall ~~include~~ include the following:

- (1) ~~The~~ dentist's name, license number and permit number;
- (2) ~~The~~ date and time of the occurrence;
- (3) ~~The~~ facility where the occurrence took place;
- (4) ~~The~~ name and address of the patient;
- (5) ~~The~~ surgical procedure involved;
- (6) ~~The~~ type and dosage of sedation or anesthesia utilized in the procedure;
- (7) ~~The~~ circumstances involved in the occurrence; and
- (8) ~~The~~ anesthesia records.

(d) Upon receipt of any such report, the Board shall investigate and shall take disciplinary action if the evidence demonstrates that a licensee has violated the Dental Practice Act set forth in Article 2 of G.S. 90 Act or the Board's rules of this Chapter.

*History Note:*      Authority G.S. 90-28; 90-30.1; 90-41; 90-48;  
                            Eff. March 1, 2016.



1 21 NCAC 16Q .0401 - .0403 are repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0401 MINIMAL CONSCIOUS SEDATION CREDENTIALS, EVALUATION AND**  
4 **PERMIT**

5 **21 NCAC 16Q .0402 MINIMAL CONSCIOUS SEDATION PERMIT REQUIREMENTS, CLINICAL**  
6 **PROVISIONS AND EQUIPMENT**

7 **21 NCAC 16Q .0403 TEMPORARY APPROVAL PRIOR TO SITE INSPECTION**

8

9 *History Note: Authority G.S. 90-28; 90-30.1.*

10 *Temporary Adoption Eff. March 13, 2003; December 11, 2002;*

11 *Eff. August 1, 2004;*

12 *Amended Eff. February 1, 2009; July 3, 2008;*

13 *Repealed Eff. March 1, 2016.*

1 21 NCAC 16Q .0501 - .0503 are repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0501 ANNUAL RENEWAL REQUIRED**

4 **21 NCAC 16Q .0502 PAYMENT OF FEES**

5 **21 NCAC 16Q .0503 INSPECTION AUTHORIZED**

6

7 *History Note: Authority G.S. 90-28; 90-30.1;90-48*

8 *Eff. February 1, 1990;*

9 *Amended Eff. August 1, 2002; January 1, 1994;*

10 *Transferred and Recodified from 16Q .0403 to 16Q .0503;*

11 *Transferred and Recodified from 16Q .0403 to 16Q .0501*

12 *Transferred and Recodified from 16Q .0402 to 16Q .0502;*

13 *Temporary Amendment Eff. December 11, 2002;*

14 *Amended Eff. November 1, 2013; July 3, 2008; August 1, 2004;*

15 *Repealed Eff. March 1, 2016.*

16

1 21 NCAC 16Q .0601 - .0602 are repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0601      REPORTS OF ADVERSE OCCURRENCES**

4 **21 NCAC 16Q .0602      FAILURE TO REPORT**

5

6 *History Note:      Authority G.S. 90-28; 90-30.1; 90-41;*

7 *Eff. February 1, 1990;*

8 *Transferred and Recodified from 16Q .0502 to 16Q .0602;*

9 *Transferred and Recodified from 16Q .0501 to 16Q .0601;*

10 *Temporary Amendment Eff. December 11, 2002;*

11 *Amended Eff. August 1, 2004;*

12 *Repealed Eff. March 1, 2016.*

13

14



1 21 NCAC 16Q .0203 is repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0203      TEMPORARY APPROVAL PRIOR TO SITE EVALUATION**

4

5 *History Note:      Authority G.S. 90-28; 90-30.1;*

6 *Eff. February 1, 1990;*

7 *Amended Eff. August 1, 2002*

8 *Repealed Eff. March 1, 2016.*

9

1 21 NCAC 16Q .0205 is repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0205 RESULTS OF SITE EVALUATION AND REEVALUATION**

4 *History Note: Authority G.S. 90-28; 90-30.1;*

5 *Eff. February 1, 1990;*

6 *Amended Eff. August 1, 2002.*

7 *Repealed Eff. March 1, 2016.*

8

1 21 NCAC 16Q .0303 is repealed as published in 30:1 NCR 2 as follows:

2

3 **21 NCAC 16Q .0303      TEMPORARY APPROVAL PRIOR TO SITE INSPECTION**

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5 *History Note:      Authority G.S. 90-28; 90-30.1;*

6 *Eff. February 1, 1990;*

7 *Amended Eff. August 1, 2002; January 1, 1994;*

8 *Temporary Amendment Eff. December 11, 2002;*

9 *Amended Eff. September 1, 2014; February 1, 2009; July 3, 2008; August 1, 2004.*

10 *Repealed Eff. March 1, 2016.*

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