#### 3100.0100 DENTISTS, HYGIENISTS, AND ASSISTANTS

# CHAPTER 3100 BOARD OF DENTISTRY DENTISTS, HYGIENISTS, AND ASSISTANTS

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#### 3100.0100 DEFINITIONS.

[For text of subpart 1, see M.R.]

Subp. 2. Act. "Act" means Minnesota Statutes, sections 150A.01 to 150A.21.

Subp. 2a. Analgesia. "Analgesia" means the loss of pain sensation without the loss of consciousness as a result of the administration of a pharmacological agent.

Subp. 2b. Anxiolysis. "Anxiolysis" means the process of reducing anxiety, fear, apprehension, and other forms of neurosis in which anxiety dominates the patient's mood by the administration of a pharmacological agent that does not impair the patient's ability to maintain normal mental abilities and vital functions.

[For text of subps 3 to 8, see M.R.]

Subp. 8a. **Conscious sedation.** "Conscious sedation" means a depressed level of consciousness induced by the administration of a pharmacological agent that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command. [For text of subp 9, see M.R.]

Subp. 9a. Dental health care worker or DHCW. "Dental health care worker" or "DHCW" means an individual who works in a dental practice who may be exposed to body fluids such as blood or salıva.

Subp. 9b. **Dental hygienist.** "Dental hygienist" means a person holding a license as a dental hygienist issued by the board pursuant to the act.

[For text of subps 10 and 11, see M.R.]

Subp. 12a. General anesthesia. "General anesthesia" means a controlled state of depressed consciousness produced by a pharmacological agent and accompanied by a partial or complete loss of protective reflexes, including the inability to maintain an airway and respond purposefully to physical stimulation or verbal commands.

[For text of subps 13 to 15, see M.R.]

Subp. 15a. Nitrous oxide inhalation analgesia. "Nitrous oxide inhalation analgesia" means the administration by inhalation of a combination of nitrous oxide and oxygen, producing an altered level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command.

[For text of subps 16 to 21, see M.R.]

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Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10 History: 16 SR 2314

#### 3100.1100 APPLICATIONS FOR LICENSE TO PRACTICE DENTISTRY.

Subpart 1. Form, credentials, and certification. Any person desiring licensure to practice dentistry within the state of Minnesota must first present to the board an application and credentials, as prescribed by the act, and shall conform to the following rules of the board:

[For text of items A to C, See M.R.]

D. Beginning January 1, 1993, an applicant who wants the authority under the license to administer a pharmacological agent for the purpose of general anesthesia or conscious sedation or to administer nitrous oxide inhalation analgesia must comply with part 3100.3600.

[For text of subps 2 to 5, see M.R.]

Subp. 6. Anesthesia, sedation, and nitrous oxide. Beginning January 1, 1993, a person applying for a license to practice dentistry or a dentist already licensed who wants the authority under the license to administer a pharmacological agent for the purpose of general anesthesia or conscious sedation or to administer nitrous oxide inhalation analgesia must comply with the applicable requirements of part 3100.3600.

Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10

History: 16 SR 2314

**3100.1200 APPLICATION FOR LICENSE TO PRACTICE DENTAL HYGIENE.** 

A person desiring licensure to practice dental hygiene must present an application and credentials as prescribed by the act and shall conform to the following rules of the board:

[For text of items A to F, see M.R.]

Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10

History: 16 SR 2314

#### 3100.2000 FEES.

Subpart 1. Application fees. Each applicant for licensure as a dentist or dental hygienist or for registration as a registered dental assistant shall submit with a license or registration application a fee in the following amounts:

A. dentist application, \$125;

B. dental hygienist application, \$55; and

C. dental assistant application, \$30.

Subp. 2. Annual license or registration fees. Each dentist, dental hygienist, and registered dental assistant shall submit with an annual license or registration renewal application a fee as established by the board not to exceed the following amounts:

**A.** dentist, \$110;

B. dental hygienist, \$40; and

C. registered dental assistant, \$26.

Subp. 3. Licensure by credentials. Each applicant for licensure as a dentist or dental hygienist by credentials pursuant to Minnesota Statutes, section 150A.06, subdivision 4, and part 3100.1400 shall submit with the license application a fee in the following amounts:

A. dentist, \$700; and

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#### B. dental hygienist, \$150.

[For text of subp 4, see M.R.]

Subp. 5. Duplicate license or registration fee. Each licensee or registrant shall submit with a request for issuance of a duplicate of the original license or registration of of an annual renewal of it a fee in the following amounts:

A. original dentist or dental hygiene license; \$20; and

B. initial and renewal registration certificates and license renewal certificates, \$10.

Subp. 6. Reinstatement fee. No dentist, dental hygienist, or registered dental assistant whose license or registration has been suspended or revoked shall have the license or registration reinstated or a new license or registration issued until a fee has been submitted to the board in the following amount:

A. dentist, \$125;

B. dental hygienist, \$55; and

C. registered dental assistant, \$30.

[For text of subps 7 to 10, see M.R.]

**Statutory Authority:** MS s 150A.04; 150A.06; 150A.08; 150A.10; 150A.11; 214.06

#### History: 16 SR 1127

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3100.3600 TRAINING AND EDUCATIONAL REQUIREMENTS TO ADMINISTER ANESTHESIA AND SEDATION.

Subpart 1. Prohibitions. Dental hygienists and dental assistants may hot administer general anesthesia, conscious sedation, or nitrous oxide inhalation analgesia.

Subp. 2. General anesthesia. A dentist may administer a pharmacological agent for the purpose of general anesthesia only pursuant to items A to C.

A. Beginning January 1, 1993, a dentist may administer a pharmacological agent for the purpose of general anesthesia only after satisfactorily completing the requirements in clause (1) or (2) in addition to the requirements in clause (3).

(1) a didactic and clinical program at a dental school, hospital, or graduate medical or dental program accredited by the Commission on Accreditation, resulting in the dentist becoming clinically competent in the administration of general anesthesia. The program must be equivalent to a program for advanced specialty education in oral and maxillofacial surgery; or

(2) a one-year residency in general anesthesia at an institution certified by the American Society of Anesthesiology, the American Medical Association, or the Joint Commission on Hospital Accreditation, resulting in the dentist becoming clinically competent in the administration of general anesthesia. The residency must include a minimum of 390 hours of didactic study, 1,040 hours of clinical anesthesiology, and 260 cases of administration of general anesthesia to an ambulatory outpatient; and

(3) an advanced cardiac life support course and must be currently certified in advanced cardiac life support or basic cardiac life support as provided in educational programs recognized by the American Heart Association, the American Red Cross, or other agencies whose courses are equivalent to the American Heart Association or American Red Cross courses.

B. A dentist shall be prepared and competent to diagnose, resolve, and reasonably prevent any untoward reaction or medical emergency that may develop any time after the administration of general anesthesia. A dentist shall apply the current standard of care to monitor and evaluate a patient's blood pressure, pulse, respiratory function, and cardiac activity. The current standard of

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care to assess respiratory function shall require the monitoring of tissue oxygenation or the use of a superior method of monitoring respiratory function.

C. A dentist shall administer a pharmacological agent for the purpose of general anesthesia only by application of the appropriate systems and drugs for the delivery of general anesthesia. Prior to discharging the patient, the dentist shall ensure that the effects of the medication have sufficiently dissipated to a level where in-office monitoring is no longer required.

Subp. 3. Conscious sedation. A dentist may administer a pharmacological agent for the purpose of conscious sedation only pursuant to items A to C.

A. Beginning January 1, 1993, a dentist may administer a pharmacological agent for the purpose of conscious sedation of a patient only after satisfactorily completing:

(1) a course of education resulting in the dentist becoming clinically competent for administration of conscious sedation, with a minimum of 60 hours of didactic education, 24 hours of clinical experience, and at least ten individual cases of administration of conscious sedation; and

(2) an advanced cardiac life support course and must be currently certified in advanced cardiac life support or basic cardiac life support as provided in educational programs recognized by the American Heart Association, the American Red Cross, or other agencies whose courses are equivalent to the American Heart Association or American Red Cross courses.

B. A dentist shall be prepared and competent to diagnose, resolve, and reasonably prevent any untoward reaction or medical emergencies that may develop any time after rendering a patient in the state of conscious sedation. A dentist shall apply the current standard of care to monitor and evaluate a patient's blood pressure, pulse, respiratory function, and cardiac activity. The current standard of care to assess respiratory function shall require the monitoring of tissue oxygenation or the use of a superior method of monitoring respiratory function.

C. A dentist shall administer a pharmacological agent for the purpose of conscious sedation only by application of the appropriate systems and drugs for the delivery of conscious sedation. Prior to discharging the patient, the dentist shall ensure that the effects of the medication have sufficiently dissipated to a level where in-office monitoring is no longer required.

Subp. 4. Nitrous oxide inhalation analgesia. A dentist may administer nitrous oxide inhalation analgesia only pursuant to items A to D and subpart 5.

A. Prior to January 1, 1993, a licensed dentist who is currently administering nitrous oxide inhalation analgesia may register that fact with the board pursuant to subpart 5, item A. Such registered dentists may continue to administer nitrous oxide inhalation analgesia and need not comply with item B.

B. Beginning January 1, 1993, a dentist who has not previously registered with the board pursuant to subpart 5, item A, may administer nitrous oxide inhalation analgesia only after satisfactorily completing a dental school or postdental graduate education course on the administration of nitrous oxide inhalation analgesia from an institution accredited by the Commission on Accreditation. The course must include a minimum of 16 hours of didactic instruction and supervised clinical experience using fail-safe anesthesia equipment capable of positive pressure respiration.

C. A dentist must be currently certified in advanced cardiac life support or basic cardiac life support as provided in educational programs recognized by the American Heart Association, the American Red Cross, or other agencies whose courses are equivalent to the American Heart Association or American Red Cross courses.

D. A dentist may only use fail-safe anesthesia equipment capable of positive pressure respiration.

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Subp. 5. Notice to board. A dentist who administers a pharmacological agent for the purpose of general anesthesia, conscious sedation, or nitrous oxide inhalation analgesia shall submit to the board the information in items A to C.

A. A dentist who is administering pharmacological agents for the purpose of general anesthesia or conscious sedation or who is administering nitrous oxide inhalation analgesia shall inform the board of that fact on forms provided by it no later than July 27, 1992. If the dentist begins doing so after July 27, 1992, the dentist shall inform the board of that fact on forms provided by it.

B. Beginning January 1, 1993, a dentist may administer pharmacological agents for the purpose of general anesthesia or conscious sedation only if the dentist has submitted the following information to the board on forms provided by it: the name, address, and telephone number of the institution at which the dentist took the program or residency that complies with subparts 2, item A, subitem (1) or (2); and 3, item A, subitem (1), a certified copy of the dentist's transcript or other official record from the institution verifying that the dentist satisfactorily completed the program, residency, or course; the name, address, and telephone number of the institution or other agency at which the dentist successfully completed the advanced cardiac life support course required by subparts 2, item A, subitem (3); and 3, item A, subitem (2); and a statement that the dentist is currently certified in advanced cardiac life support or basic cardiac life support required by subparts 2, item A, subitem (3); and 3, item A, subitem (2). After this initial submission, dentists shall submit a statement of current certification in advanced cardiac life support or basic cardiac life support every year on their license renewal application or other form provided by the board.

C. Beginning January 1, 1993, a dentist not previously registered with the board pursuant to subpart 5, item A, may administer nitrous oxide inhalation analgesia only after the dentist has submitted the following information to the board on forms provided by it: the name, address, and telephone number of the institution at which the dentist took the course that complies with subpart 4, item B; a certified copy of the dentist's transcript or other official record from the institution verifying that the dentist satisfactorily completed the course; and a statement that the dentist is currently certified in advanced cardiac life support or basic cardiac life support required by subpart 4, item C. After this initial submission, a dentist shall submit a statement of current certification in advanced cardiac life support or basic cardiac life support every year on the license renewal application or other form provided by the board.

Subp. 6. Analgesia. A dentist may administer a pharmacological agent for the purpose of analgesia provided the dentist has a current license to practice dentistry in Minnesota.

Subp. 7. Anxiolysis. A dentist may administer a pharmacological agent for the purpose of anxiolysis provided the dentist has a current license to practice dentistry in Minnesota.

Subp. 8. **Reporting of incidents required.** A dentist shall report to the board any incident that arises from the administration of nitrous oxide inhalation analgesia or of a pharmacological agent for the purpose of general anesthesia, conscious sedation, local anesthesia, analgesia, or anxiolysis that results in a serious or unusual outcome that produces a temporary or permanent physiological injury, harm, or other detrimental effect to one or more of a patient's body systems. The report shall be submitted to the board on forms provided by it within ten days of the incident.

Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10

History: 16 SR 2314

3100.6200 CONDUCT UNBECOMING A LICENSEE OR REGISTRANT. "Conduct unbecoming a person licensed to practice dentistry or dental 15

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hygiene or registered as a dental assistant or conduct contrary to the best interests of the public," as used in Minnesota Statutes, section 150A.08, subdivision 1, clause (6), shall include the act of a dentist, dental hygienist, registered dental assistant, or applicant in:

[For text of items A to J, see M.R.]

K. failing to maintain adequate safety and sanitary conditions for a dental office as specified in part 3100.6300; and

L. failing to provide access to and transfer of medical and dental records as prescribed by Minnesota Statutes, section 144.335.

Statutory Authority: MS's 150A.04; 150A.06; 150A.08; 150A.10

History: 16 SR 2314

3100.6300 ADEQUATE SAFETY AND SANITARY CONDITIONS FOR DENTAL OFFICES.

Subpart 1. Minimum conditions. Subparts 2 to 13 are minimum safety and sanitary conditions.

[For text of subps 2 to 10, see M.R.]

Subp. 11. Infection control. Dental health care workers shall comply with the most current infection control recommendations, guidelines, precautions, procedures, practices, strategies, and techniques specified in the United States Department of Health and Human Services, Public Health Service, Centers for Disease Control publications of the Morbidity and Mortality Weekly Report (MMWR). The current infection control techniques set forth in the MMWR dated July 12, 1991, volume 40, number RR-8, pages 1 to 9, are hereby incorporated by reference. The MMWR is available at the Minnesota State Law Library, by interlibrary loan, or by subscription from the United States Department of Health and Human Services, Public Health Service, Centers for Disease Control. The infection control standards in the MMWR are subject to frequent change.

Subp. 12. Sharps and contaminated waste. Sharp items and contaminated wastes must be disposed of in accordance with Minnesota Statutes, sections 116.76 to 116.83, and rules adopted under them, and requirements established by local government agencies.

Subp. 13. CPR training. A minimum of one person who is currently certified in advanced cardiac life support or basic cardiac life support as provided in educational programs recognized by the American Heart Association, the American Red Cross, or other agencies whose courses are equivalent to the American Heart Association or American Red Cross courses must be present in the dental office when dental services are provided.

Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10

History: 16 SR 2314

#### 3100.8500 REGISTERED DENTAL ASSISTANTS.

Subpart 1. Duties under indirect supervision. A registered dental assistant, in addition to the services performed by the assistant, may perform the following services if the dentist is in the office, authorizes the procedures, and remains in the office while the procedures are being performed:

A. take radiographs;

B. take impressions for casts and appropriate bite registration. Dental assistants shall not take impressions and bite registrations for final construction of fixed and removable prostheses;

C. apply topical medications and cavity varnishes prescribed by den-

tists;

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D. place and remove rubber dam;

E. remove excess cement from inlays, crowns, bridges, and orthodontic appliances with hand instruments only;

F. perform mechanical polishing to clinical crowns not including instrumentation. Removal of calculus by instrumentation must be done by the dentist or dental hygienist before mechanical polishing;

G. preselect orthodontic bands;

H. place and remove periodontal packs;

I. remove sutures;

J. monitor a patient who has been induced by a dentist into nitrous oxide inhalation analgesia;

K. place and remove elastic orthodontic separators; and

L. remove and replace ligature ties on orthodontic appliances.

Subp. 1a. Duties under direct supervision. A registered dental assistant may perform the following services if the dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and evaluates the performance of the auxiliary before dismissing the patient:

A. remove excess bond material from orthodontic appliances with hand instruments only;

B. etch appropriate enamel surfaces before bonding of orthodontic appliances by a dentist;

C. etch appropriate enamel surfaces and apply pit and fissure sealants. Before the application of pit and fissure sealants, a registered dental assistant must have successfully completed a course in pit and fissure sealants at a dental school, dental hygiene school, or dental assisting school that has been accredited by the Commission on Accreditation; and

D. make preliminary adaptation of temporary crowns. [For text of subps 2 and 3, see M.R.]

Statutory Authority: MS s 150A.04; 150A.06; 150A.08; 150A.10 History: 16 SR 2314

#### 3100.8700 DENTAL HYGIENISTS.

Subpart 1. Duties under general supervision. A dental hygienist may perform the following services if the dentist has authorized them and the hygienist carries them out in accordance with the dentist's diagnosis and treatment plan:

[For text of items A to C, see M.R.]

D. dietary analysis, salivary analysis, and preparation of smears for dental health purposes;

E. application of pit and fissure sealants; and

F. remove excess bond material from orthodontic appliances.

Subp. 2. Duties under indirect supervision. A dental hygienist may remove marginal overhangs if the dentist is in the office, authorizes the procedures, and remains in the office while the procedures are being performed.

Subp. 2a. Duties under direct supervision. A dental hygienist may perform the following procedures if the dentist is in the office, personally diagnoses the condition to be treated, personally authorizes the procedure, and evaluates the performance of the dental hygienist before dismissing the patient:

A. etch appropriate enamel surfaces before bonding of orthodontic appliances by a dentist; and

B. make preliminary adaptation of temporary crowns.

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[For text of subp 3, see M.R.]

**Statutory Authority:** *MS s 150A.04; 150A.06; 150A.08; 150A.10* **History:** *16 SR 2314* 

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