



STATE OF IOWA

IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

MELANIE JOHNSON, J.D.
EXECUTIVE DIRECTOR

ANESTHESIA CREDENTIALS COMMITTEE

AGENDA

January 24, 2013

12:00 p.m.

Location: Iowa Dental Board, 400 SW 8th St., Suite D, Des Moines, Iowa
(Committee Members May Participate in Person or by Telephone)

Committee Members: *Lynn Curry, D.D.S. Chair; Richard, Burton, D.D.S.; Steven Clark, D.D.S.; Douglas Horton, D.D.S.; Gary Roth, D.D. S.; Kaaren Vargas, D.D.S.; Kurt Westlund, D.D.S*

OPEN SESSION

a. CALL MEETING TO ORDER - ROLL CALL

Lynn Curry

b. COMMITTEE MEETING MINUTES

- a. October 18, 2012 – Teleconference*
- b. December 19, 2012 - Teleconference*

c. MODERATE SEDATION PERMIT APPLICATIONS

- a. Bradley D. Jordan, D.D.S.*

d. MODERATE SEDATION COURSE APPROVAL REQUEST

- a. UCLA School of Dentistry and Wendel Family Dental Centre*
- b. Duquense University Mylan School of Pharmacy, IV Moderate Sedation for Dentistry*

e. OPPORTUNITY FOR PUBLIC COMMENT

f. ADJOURN

If you require the assistance of auxiliary aids or services to participate in or attend the meeting because of a disability, please call the office of the Board at 515/281-5157.

Please Note: At the discretion of the Committee Chair, agenda items may be taken out of order to accommodate scheduling requests of Committee members, presenters or attendees or to facilitate meeting efficiency.



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ANESTHESIA CREDENTIALS COMMITTEE

- TELEPHONIC MEETING -

MINUTES

October 18, 2012
Conference Room
400 S.W. 8th St., Suite D
Des Moines, Iowa

Committee Members

Lynn Curry, D.D.S.
Richard Burton, D.D.S.
Steven Clark, D.D.S.
Douglas Horton, D.D.S.
Gary Roth, D.D.S.
Kaaren Vargas, D.D.S.
Kurt Westlund, D.D.S.

October 18, 2012

Present
Absent
Present
Present
Present
Present
Present*

Staff Member

Christel Branses

CALL TO ORDER FOR OCTOBER 18, 2012

Dr. Curry called the meeting of the Anesthesia Credentials Committee to order at 12:06 p.m. on Thursday, October 18, 2012. This meeting was held by conference call to review applications for moderate sedation permit, a request for course approval, and other committee-related matters. It was impossible for the Committee to schedule a meeting on such short notice and impractical for the Committee to meet with such a short agenda. A quorum was established with six members present.

Roll Call:

<u>Member</u>	<u>Curry</u>	<u>Burton</u>	<u>Clark</u>	<u>Horton</u>	<u>Roth</u>	<u>Vargas</u>	<u>Westlund</u>
Present	x	x	x	x	x	x	
Absent							x

APPROVAL OF MINUTES

OPEN SESSION MINUTES

- *July 19, 2012 Minutes*

*12:07 p.m. Dr. Westlund joined the call.

- ❖ MOVED by BURTON, SECONDED by CLARK, to APPROVE the July 19, 2012 minutes as submitted. Motion APPROVED unanimously.

Dr. Westlund asked for clarification regarding the designation of allowed sedation patients on the certificates and cards for moderate sedation permit holders. Ms. Braness clarified that this is all now very clearly noted on the certificate, card and letter received upon initial issuance and at renewal.

MODERATE SEDATION PERMIT APPLICATIONS

Dr. Curry asked for clarification about required inspections. Ms. Braness provided an overview of the inspection that are, typically, required, including facility inspections and peer evaluations.

- *Zach Dannenbring, D.D.S.*

Dr. Westlund has some reservations about the course Dr. Dannenbring completed. Dr. Westlund had some concerns about masking live patients, and simulated training in comparison to training on live patients.

Dr. Burton agreed with some of Dr. Westlund's concerns. Dr. Burton has participated in some simulated trainings. While the training is good, simulated training may not fully prepare a licensee for interaction with a live patient. For that reason, Dr. Burton also has some reservations about the course.

Dr. Roth recommended that the committee hold another meeting to more fully discuss this course.

Dr. Clark reported that Dr. Reed, the instructor of the course Dr. Dannenbring completed, is a dental anesthesiologist. Dr. Clark stated that Dr. Reed is very active in the American Society of Anesthesiology. Dr. Clark feels that Dr. Reed would be a good instructor given his education and experience.

Dr. Horton pointed out that Dr. Reed's letter regarding Dr. Dannenbring's training clarifies the number of live patients on which Dr. Dannenbring was trained.

Dr. Roth expressed some concerns in regards to the committee sometimes appearing to be too restrictive about training requirements for a sedation permit. Dr. Roth understands that the committee needs to ensure sufficient training; however, if the training requirements become too restrictive, it can become very difficult for a licensee to comply with those requirements.

Dr. Curry recommended that they table discussion on this application for another meeting to discuss this more thoroughly.

- *Ryan Hill, D.D.S.*

Dr. Curry provided an overview of the application.

Dr. Westlund indicated that the committee has not required facility inspections or peer evaluations of licensees at the University of Iowa College of Dentistry since the university maintains its own inspection and peer evaluation protocols.

- ❖ MOVED by WESTLUND, SECONDED by BURTON, to recommend approval of the application. Motion APPROVED unanimously.

- *David Jarrin, D.D.S.*
- *Andrew Mulka, D.D.S.*

Dr. Curry provided an overview of Dr. Jarrin's application.

Dr. Westlund stated that this course is a rather extensive course, including time in an operating room.

Dr. Horton reported that Dr. Jarrin indicated a preference to use ketamine as one of the sedatives used in the practice. Ketamine is, traditionally, used for general anesthesia, and not for moderate sedation.

The committee members noticed that Dr. Jarrin and Dr. Mulka attended the same course and are in the same practice.

- ❖ MOVED by WESTLUND, SECONDED by BURTON, to recommend approval of the applications, with the exclusion of the use of ketamine, for Dr. Jarrin and Dr.

Mulka following successful completion of a facility inspection and peer evaluation.
Motion APPROVED unanimously.

- *Hilary Reynolds, D.D.S.*

Dr. Westlund recommended an onsite peer evaluation prior to issuance of the permit.

- ❖ MOVED by WESTLUND, SECONDED by BURTON, to recommend approval of the application following a successful peer evaluation. Motion APPROVED unanimously.

- *Jordan Tortorich, D.D.S.*

Dr. Roth pointed out that Dr. Tortorich requested the added qualifications to sedate pediatric and medically-compromised patients. Following a discussion with Dr. Fridrich, prior to the committee meeting, pertaining to Dr. Tortorich's training, Dr. Fridrich expressed some concerns regarding the request to sedate pediatric and medically-compromised patients. Dr. Burton confirmed this. Approval would be granted for patients 13 and older, ASA 1-2. Pursuant to Iowa Administrative Code 650—Chapter 29, Dr. Tortorich's training is not sufficient to sedate pediatric and medically-compromised patients.

The committee members noted that Dr. Tortorich may not have fully understood the request when he asked to sedate pediatric and medically-compromised patients. However, Dr. Curry indicated that Board staff could provide Dr. Tortorich information about how to seek those qualifications at a later date if he should choose to pursue them.

- ❖ MOVED by WESTLUND, SECONDED by BURTON, to recommend approval of the application. Motion APPROVED unanimously.

MODERATE SEDATION COURSE APPROVAL REQUEST

- *UCLA School of Dentistry & Wendel Family Dental Centre*

Dr. Curry provided an overview of the course submitted for approval.

Dr. Westlund recommended tabling the discussion of this request until further information about past course approvals can be obtained and used as a basis for comparison.

- ❖ MOVED by WESTLUND, SECONDED by BURTON, to table the discussion on this course and Dr. Dannenbring's application until the next meeting of the committee. Motion APPROVED unanimously.

Ms. Braness indicated that another meeting could be scheduled before January to address this and Dr. Dannenbring's application. The committee members indicated a preference to meet again in 2-3 weeks if time allowed.

Dr. Clark inquired if other states require training with a live patient for a moderate sedation permit. Dr. Westlund stated that it can vary from state to state.

Dr. Roth asked staff to get information about prior-approved courses, and to clarify the rules about required training.

2013 MEETING DATES

Ms. Braness confirmed that the committee had established quorums for the proposed quarterly meetings for 2013. A list of the 2013 meeting dates was included with the materials provided to the committee.

OPPORTUNITY FOR PUBLIC COMMENT

There were no comments received.

ADJOURNMENT

The Anesthesia Credentials Committee adjourned its meeting at 1:00 p.m.

NEXT MEETING OF THE COMMITTEE

A meeting of the Anesthesia Credentials Committee will be scheduled prior to the January 2013 meeting, and will be held by teleconference in Des Moines, Iowa. That meeting date was not yet scheduled at the time of this committee meeting.

Respectfully submitted,

Melanie Johnson, J.D.
Executive Director

MJ/cb

Minutes – Draft (Requires Final Approval)
Anesthesia Credentials Committee – October 18, 2012



STATE OF IOWA

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EXECUTIVE DIRECTOR

ANESTHESIA CREDENTIALS COMMITTEE

- TELEPHONIC MEETING -

MINUTES

December 19, 2012
Conference Room
400 S.W. 8th St., Suite D
Des Moines, Iowa

Committee Members

Lynn Curry, D.D.S.
Richard Burton, D.D.S.
Steven Clark, D.D.S.
Douglas Horton, D.D.S.
Gary Roth, D.D.S.
Kaaren Vargas, D.D.S.
Kurt Westlund, D.D.S.

December 19, 2012

Absent
Absent
Present
Present
Present
Absent
Present

Staff Member

Christel Braness

CALL TO ORDER FOR DECEMBER 19, 2012

Dr. Roth called the meeting of the Anesthesia Credentials Committee to order at 12:09 p.m. on Wednesday, December 19, 2012. This meeting was held by conference call to review applications for moderate sedation permit and a request for course approval. It was impossible for the Committee to schedule a meeting on such short notice and impractical for the Committee to meet with such a short agenda. A quorum was established with four members present.

Roll Call:

<u>Member</u>	<u>Curry</u>	<u>Burton</u>	<u>Clark</u>	<u>Horton</u>	<u>Roth</u>	<u>Vargas</u>	<u>Westlund</u>
Present			X	X	X		X
Absent	X	X				X	

MODERATE SEDATION PERMIT APPLICATIONS

- *Zach Dannenbring, D.D.S.*

The Committee members discussed the issue of training. Specifically, the Committee members discussed the difference between training on live patients as opposed to training on simulated patients. The concern was to ensure that the training was sufficient and whether training on simulated patients was an effective method of training in the use of moderate sedation.

Dr. Westlund expressed his concerns related to simulated training. Dr. Roth stated that the course, which Dr. Dannenbring completed, appears to be comparable to the other courses, which have been previously been approved by this Committee. Dr. Roth expressed his concerns about the Committee being too restrictive when it comes to course approval.

Dr. Horton agreed that the Committee has to allow courses that include simulated training. Apart from that, formal residencies would be one of the few places where a practitioner could get sufficient training on “live” patients.

Dr. Clark indicated that he has worked with Dr. Reid, the course instructor, through the University of Iowa College of Dentistry with residents using simman training. Dr. Clark feels that the course sufficiently teaches moderate sedation, along with airway management training.

Dr. Horton, who is a moderate sedation permit holder himself, indicated that he has only intubated a patient once in the last four years. Apart from that situation, the only training Dr. Horton has received recently in airway management has been limited to training completed on a simman.

Dr. Roth stated that this course appears to be far more comprehensive than a number of courses that are offered over weekends in hotels or convention centers.

- ❖ **MOVED** by ROTH, **SECONDED** by CLARK, to recommend approval of the application following completion of a peer evaluation.

Roll Call:

<u>Member</u>	<u>Curry</u>	<u>Burton</u>	<u>Clark</u>	<u>Horton</u>	<u>Roth</u>	<u>Vargas</u>	<u>Westlund</u>
Aye			x	x	x		x
Nay							
Abstain							
Absent	x	x				x	

Motion

APPROVED by ROLL CALL.

- *Christopher Vanderbeek, D.D.S.*
 - ❖ MOVED by ROTH, SECONDED by HORTON, to recommend approval of the application following completion of a peer evaluation. Motion APPROVED unanimously.

MODERATE SEDATION COURSE APPROVAL REQUEST

- *UCLA School of Dentistry & Wendel Family Dental Centre*

Dr. Roth stated that it appears that the didactic portion of the training is completed at the University of California, Los Angeles and the clinical portion is completed at Wendel Family Dental Centre.

The Committee members discussed the content of the proposed course. Dr. Roth stated that he would like clarification as to whether the practitioners enrolled in the program will induce the sedation, or if they are simply performing dental work after the sedation is induced by another practitioner. Dr. Clark agreed that the Committee needs to have this issue clarified prior to making a final decision on the course.

- ❖ MOVED by ROTH, SECONDED by HORTON, to have Board staff get further clarification as to whether the participants will actually induce moderate sedation in patients during the course. Motion APPROVED unanimously.

OPPORTUNITY FOR PUBLIC COMMENT

There were no comments received.

ADJOURNMENT

The Anesthesia Credentials Committee adjourned its meeting at 12:27 p.m.

NEXT MEETING OF THE COMMITTEE

The next meeting of the Anesthesia Credentials Committee is scheduled for January 24, 2013. The meeting will be held at the Board offices and by teleconference.

Respectfully submitted,

Melanie Johnson, J.D.
Executive Director

MJ/cb

REPORT TO THE ANESTHESIA CREDENTIALS COMMITTEE (ACC)

RECOMMENDATION

DATE OF MEETING:	January 24, 2013
RE:	Moderate Sedation Application
SUBMITTED BY:	Christel Branness, Administrative Assistant
ACTION REQUESTED:	Recommendation regarding application

Background

The Anesthesia Credentials Committee is a peer review committee appointed by the Board to assist the Board. The administrative rules provide that one of the duties of the Committee is to:

- a.* Review all permit applications and make recommendations to the board regarding those applications.

The following practitioner has applied for a moderate sedation permit:

- **Dr. Bradley Jordan, D.D.S.**

Committee Recommendation

Should the applicant(s) above be granted a moderate sedation permit?

Should the applicant be granted the added qualification as requested?

Added Qualifications: (Pediatric, medically-compromised patients (ASA-3-4))

Dr. Jordan has indicated that he would like to provide sedation to medically-compromised patients.

Facility Inspection/Peer Evaluation

Dr. Jordan is asking to provide sedation in a facility that has *not* been previously inspected by the Board. A peer evaluation has not been conducted so far as I am aware.

Staff Recommendation

I recommend that Dr. Jordan be issued a moderate sedation permit as requested assuming the training meets all requirements as required by IAC 650—Chapter 29, and following the successful completion of any/all inspections and evaluations deemed necessary.



IOWA DENTAL BOARD
 400 S.W. 8th Street, Suite D, Des Moines, Iowa 50309-4687
 Phone (515) 281-5157 Fax (515) 281-7969
<http://www.dentalboard.iowa.gov>

RECEIVED

JAN 9

IOWA DENTAL BOARD

APPLICATION FOR MODERATE SEDATION PERMIT

SECTION 1 - APPLICANT INFORMATION

Instructions - Please read the accompanying instructions prior to completing this form. Answer each question. If not applicable, mark "N/A."

Full Legal Name: (Last, First, Middle, Suffix)

Jordan, Bradley, David

Other Names Used: (e.g. Maiden)

N/A

Home E-mail

jorda285@umn.edu

Work E-mail

N/A

Home Address:

902 Cedar River Dr. #4

City:

Waverly

State:

IA

Zip:

50677

Home Phone:

(612) 532-2094

License Number:

08903

Issue Date:

5/8/2012

Expiration Date:

8/31/2014

Type of Practice:

General Dentistry

SECTION 2 - LOCATION(S) IN IOWA WHERE MODERATE SEDATION SERVICES ARE PROVIDED

Principal Office Address:

121 20th St. NW

City:

Waverly

Zip:

50677

Phone:

(319) 352-5281

Office Hours/Days:

0700-1700 Tues-Fri

Other Office Address:

City:

Zip:

Phone:

Office Hours/Days:

SECTION 3 - BASIS FOR APPLICATION

Check each box to indicate the type of training you have completed.

Check if completed.

DATE(S):

Moderate Sedation Training Program that meets ADA Guidelines for Teaching Pain Control and Sedation to Dentists of at least 60 hours and 20 patient experiences

Completed

ADA-accredited Residency Program that includes moderate sedation training

Completed

06/2011 - 06/2012

You must have training in moderate sedation AND one of the following:

Formal training in airway management; OR

Completed

06/2012

Moderate sedation experience at graduate level, approved by the Board

Completed

SECTION 4 - ADVANCED CARDIAC LIFE SUPPORT (ACLS) CERTIFICATION

Name of Course:

ACLS Provider Course

Location:

South Texas Veterans Health Care System

Date of Course:

10/2011

Date Certification Expires:

10/2013

Office Use	Lic. #	Sent to ACC:	Inspection	Fee# 4033 \$500
	Permit #	Approved by ACC:	Inspection Fee Pd:	ACLS
	Issue Date:	Temp #	ASA 3/4?	Form A/B
	Brd Approved:	T. Issue Date:	Pediatric?	Peer Eval

Name of Applicant Bradley David Jordan

SECTION 5 – MODERATE SEDATION TRAINING INFORMATION

Type of Program:

Postgraduate Residency Program Continuing Education Program Other Board-approved program, specify:

Name of Training Program:

South Texas Veterans Hosp. AEGD

Address:

8410 Datapoint Dr.

City:

San Antonio

State:

TX

Type of Experience:

Advanced Education in General Dentistry

Length of Training:

12 months

Date(s) Completed:

6/30/2012

Number of Patient Contact Hours:

Estimated to be 90 hrs of sedation

Total Number of Supervised Sedation Cases:

43

- YES NO 1. Did you satisfactorily complete the above training program?
- YES NO 2. Does the program include at least sixty (60) hours of didactic training in pain and anxiety?
- YES NO 3. Does the program include management of at least 20 clinical patients?
As part of the curriculum, are the following concepts and procedures taught:
- YES NO 4. Physical evaluation;
- YES NO 5. IV sedation;
- YES NO 6. Airway management;
- YES NO 7. Monitoring; and
- YES NO 8. Basic life support and emergency management.
- YES NO 9. Does the program include clinical experience in managing compromised airways?
- YES NO 10. Does the program provide training or experience in managing moderate sedation in pediatric patients?
- YES NO 11. Does the program provide training or experience in managing moderate sedation in ASA category 3 or 4 patients?

Please attach the appropriate form to verify your moderate sedation training. Applicants who received their training in a postgraduate residency program must have their postgraduate program director complete Form A. In addition, attach a copy of your certificate of completion of the postgraduate program. Applicants who received their training in a formal moderate sedation continuing education program must have the program director complete Form B.

SECTION 6 – MODERATE SEDATION EXPERIENCE

- YES NO A. Do you have a license, permit, or registration to perform moderate sedation in any other state?
If yes, specify state(s) and permit number(s): _____
- YES NO B. Do you consider yourself engaged in the use of moderate sedation in your professional practice?
- YES NO C. Have you ever had any patient mortality or other incident that resulted in the temporary or permanent physical or mental injury requiring hospitalization of the patient during, or as a result of, your use of antianxiety premedication, nitrous oxide inhalation analgesia, moderate sedation or deep sedation/general anesthesia?
- YES NO D. Do you plan to use moderate sedation in pediatric patients?
- YES NO E. Do you plan to use moderate sedation in medically compromised (ASA category 3 or 4) patients?
- YES NO F. Do you plan to engage in enteral moderate sedation?
- YES NO G. Do you plan to engage in parenteral moderate sedation?

What major drugs and anesthetic techniques do you utilize or plan to utilize in your use of moderate sedation? Provide details (IV, inhalation, etc.) and attach a separate sheet if necessary.

I plan on primarily utilizing IV sedation with the drugs midazolam, fentanyl and diphenhydramine. I plan on occasionally using oral sedation with the drugs triazolam and lorazepam.

Name of Applicant Bradley David Jordan Facility Address 121 20th St. NW, Waverly, Iowa

SECTION 7 - AUXILIARY PERSONNEL

A dentist administering moderate sedation in Iowa must document and ensure that all auxiliary personnel have certification in basic life support (BLS) and are capable of administering basic life support. Please list below the name(s), license/registration number, and BLS certification status of all auxiliary personnel.

Name:	License/Registration #:	BLS Certification Date:	Date BLS Certification Expires:
Amanda Bockhoff	Q05979	8/17/12	8/31/14
Tammy Ingersoll	Q05138	8/17/12	8/31/14
Abigail Rundle	Q10797	3/2/11	3/31/10
Julianne Kout	Q07044	8/17/12	8/31/14
Name:	License/Registration #:	BLS Certification Date:	Date BLS Certification Expires:
Name:	License/Registration #:	BLS Certification Date:	Date BLS Certification Expires:
Name:	License/Registration #:	BLS Certification Date:	Date BLS Certification Expires:
Name:	License/Registration #:	BLS Certification Date:	Date BLS Certification Expires:

SECTION 8 - FACILITIES & EQUIPMENT

Each facility in which you perform moderate sedation must be properly equipped. Copy this page and complete for each facility. You may apply for a waiver of any of these provisions. The Board may grant the waiver if it determines there is a reasonable basis for the waiver.

YES NO Is your dental office properly maintained and equipped with the following:

- 1. An operating room large enough to adequately accommodate the patient on a table or in an operating chair and permit an operating team consisting of at least two individuals to move freely about the patient?
- 2. An operating table or chair that permits the patient to be positioned so the operating team can maintain the airway, quickly alter the patient position in an emergency, and provide a firm platform for the management of cardiopulmonary resuscitation?
- 3. A lighting system that is adequate to permit evaluation of the patient's skin and mucosal color and a backup lighting system that is battery powered and of sufficient intensity to permit completion of any operation underway at the time of general power failure?
- 4. Suction equipment that permits aspiration of the oral and pharyngeal cavities and a backup suction device?
- 5. An oxygen delivery system with adequate full face masks and appropriate connectors that is capable of delivering oxygen to the patient under positive pressure, together with an adequate backup system?
- 6. A recovery area that has available oxygen, adequate lighting, suction, and electrical outlets? (The recovery area can be the operating room.)
- 7. Is the patient able to be observed by a member of the staff at all times during the recovery period?
- 8. Anesthesia or analgesia systems coded to prevent accidental administration of the wrong gas and equipped with a fail safe mechanism?
- 9. EKG monitor?
- 10. Laryngoscope and blades?
- 11. Endotracheal tubes?
- 12. Magill forceps?
- 13. Oral airways?
- 14. Stethoscope?
- 15. A blood pressure monitoring device?
- 16. A pulse oximeter?
- 17. Emergency drugs that are not expired?
- 18. A defibrillator (an automated defibrillator is recommended)?
- 19. Do you employ volatile liquid anesthetics and a vaporizer (i.e. Halothane, Enflurane, Isoflurane)?
- 9 20. In the space provided, list the number of nitrous oxide inhalation analgesia units in your facility.

SECTION 9 – If you answer Yes to any of the questions below, attach a full explanation. Read the instructions for important definitions.

	YES	NO
1. Do you currently have a medical condition that in any way impairs or limits your ability to practice dentistry with reasonable skill and safety?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Are you currently engaged in the illegal or improper use of drugs or other chemical substances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Do you currently use alcohol, drugs, or other chemical substances that would in any way impair or limit your ability to practice dentistry with reasonable skill and safety?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. If YES to any of the above, are you receiving ongoing treatment or participation in a monitoring program that reduces or eliminates the limitations or impairments caused by either your medical condition or use of alcohol, drugs, or other chemical substances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Have you ever been requested to repeat a portion of any professional training program/school?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Have you ever received a warning, reprimand, or been placed on probation during a professional training program/school?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Have you ever voluntarily surrendered a license or permit issued to you by any professional licensing agency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7a. If yes, was a license disciplinary action pending against you, or were you under investigation by a licensing agency at that time the voluntary surrender of license was tendered?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Aside from ordinary initial requirements of proctorship, have your clinical activities ever been limited, suspended, revoked, not renewed, voluntarily relinquished, or subject to other disciplinary or probationary conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Has any jurisdiction of the United States or other nation ever limited, restricted, warned, censured, placed on probation, suspended, or revoked a license or permit you held?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Have you ever been notified of any charges filed against you by a licensing or disciplinary agency of any jurisdiction of the U.S. or other nation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Have you ever been denied a Drug Enforcement Administration (DEA) or state controlled substance registration certificate or has your controlled substance registration ever been placed on probation, suspended, voluntarily surrendered or revoked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

SECTION 10 – AFFIDAVIT OF APPLICANT

STATE: IA COUNTY: Black Hawk

I, the below named applicant, hereby declare under penalty of perjury that I am the person described and identified in this application and that my answers and all statements made by me on this application and accompanying attachments are true and correct. Should I furnish any false information, or have substantial omission, I hereby agree that such act shall constitute cause for denial, suspension, or revocation of my license or permit to provide moderate sedation. I also declare that if I did not personally complete the foregoing application that I have fully read and confirmed each question and accompanying answer, and take full responsibility for all answers contained in this application.

I understand that I have no legal authority to administer moderate sedation until a permit has been granted. I understand that my facility is subject to an on-site evaluation prior to the issuance of a permit and by submitting an application for a moderate sedation permit, I hereby consent to such an evaluation. In addition, I understand that I may be subject to a professional evaluation as part of the application process. The professional evaluation shall be conducted by the Anesthesia Credentials Committee and include, at a minimum, evaluation of my knowledge of case management and airway management.

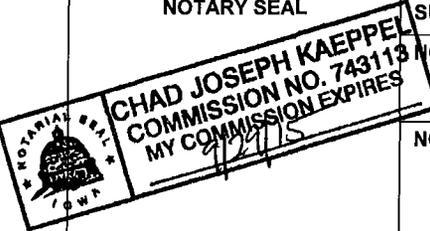
I certify that I am trained and capable of administering Advanced Cardiac Life Support and that I employ sufficient auxiliary personnel to assist in monitoring a patient under moderate sedation. Such personnel are trained in and capable of monitoring vital signs, assisting in emergency procedures, and administering basic life support. I understand that a dentist performing a procedure for which moderate sedation is being employed shall not administer the pharmacologic agents and monitor the patient without the presence and assistance of at least one qualified auxiliary personnel.

I am aware that pursuant to Iowa Administrative Code 650—29.9(153) I must report any adverse occurrences related to the use of sedation. I also understand that if moderate sedation results in a general anesthetic state, the rules for deep sedation/general anesthesia apply.

I hereby authorize the release of any and all information and records the Board shall deem pertinent to the evaluation of this application, and shall supply to the Board such records and information as requested for evaluation of my qualifications for a permit to administer moderate sedation in the state of Iowa.

I understand that based on evaluation of credentials, facilities, equipment, personnel, and procedures, the Board may place restrictions on the permit.

I further state that I have read the rules related to the use of sedation and nitrous oxide inhalation analgesia, as described in 650 Iowa Administrative Code Chapter 29. I hereby agree to abide by the laws and rules pertaining to the practice of dentistry and moderate sedation in the state of Iowa.

MUST BE SIGNED IN PRESENCE OF NOTARY	SIGNATURE OF APPLICANT <i>[Signature]</i>	
NOTARY SEAL	SUBSCRIBED AND SWORN BEFORE ME, THIS <u>2</u> DAY OF <u>January</u> , YEAR <u>2013</u>	
	NOTARY PUBLIC SIGNATURE <i>[Signature]</i>	
	NOTARY PUBLIC NAME (TYPED OR PRINTED) <u>Chad Joseph Kaepfel</u>	MY COMMISSION EXPIRES: <u>9/29/2015</u>

ACLS Provider

Bradley Jordan

This card certifies that the above individual has successfully completed the national cognitive and skills evaluations in accordance with the curriculum of the American Heart Association for the Advanced Cardiovascular Life Support Program.

October 2011

Issue Date

October 2013

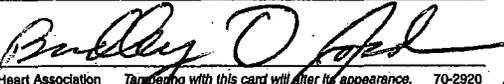
Recommended Renewal Date

AHA
Region VA STVHCS TX04848

Community
Training Center SAN ANTONIO, TX 78229

Training
Site AUDIE L. MURPHY DIVISION

Instructor PATRICIA WOLTERS

Holder's
Signature 

RECEIVED

DEC 11 2012

IOWA DENTAL BOARD



IOWA DENTAL BOARD
 400 S.W. 8th Street, Suite D, Des Moines, Iowa 50309-4687
 Phone (515) 281-5157 Fax (515) 281-7969
<http://www.dentalboard.iowa.gov>

PLEASE TYPE OR PRINT LEGIBLY IN INK.

**FORM A: VERIFICATION OF MODERATE SEDATION TRAINING
 IN A POSTGRADUATE RESIDENCY PROGRAM**

SECTION 1 – APPLICANT INFORMATION

Instructions – Use this form if you obtained your training in moderate sedation from an approved postgraduate residency program. Complete Section 1 and mail this form to the Postgraduate Program Director for verification of your having successfully completed this training.

NAME (First, Middle, Last, Suffix, Former/Maiden):

Bradley, David, Jordan

MAILING ADDRESS:

121 20th St. NW

CITY:

Waverly

STATE:

IA

ZIP CODE:

50677

PHONE:

(319) 352-5281

To obtain a permit to administer moderate sedation in Iowa, the Iowa Dental Board requires that the applicant submit evidence of having completed an approved postgraduate training program or other formal training program approved by the Board. The applicant's signature below authorizes the release of any information, favorable or otherwise, directly to the Iowa Dental Board at the address above.

APPLICANT'S SIGNATURE:

Bradley Jordan

DATE:

12/3/2012

SECTION 2 – TO BE COMPLETED BY POSTGRADUATE PROGRAM DIRECTOR

NAME OF POSTGRADUATE PROGRAM DIRECTOR:

Dr. Alan Scott Douglas
 8410 Datapoint DR 3rd Fl
 San Antonio, TX 78229

THIS POSTGRADUATE PROGRAM IS APPROVED OR ACCREDITED TO TEACH POSTGRADUATE DENTAL OR MEDICAL EDUCATION BY ONE OF THE FOLLOWING:

- American Dental Association;
- Accreditation Council for Graduate Medical Education of the American Medical Association (AMA); or
- Education Committee of the American Osteopathic Association (AOA).

NAME AND LOCATION OF POSTGRADUATE PROGRAM:

AUDIE L MURPHY
 MEMORIAL HOSPITAL DENTAL SERVICE - 160
 7400 MERTON MINTOR BOULEVARD
 SAN ANTONIO, TEXAS 78229

ADVANCED EDUCATION
 IN GENERAL DENTISTRY
 RESIDENCY PROGRAM

PHONE:

DATES APPLICANT PARTICIPATED IN PROGRAM ▶

FROM (MO/YR):

07/01/2011

TO (MO/YR):

07/01/2012

DATE PROGRAM COMPLETED:

7/1/2012

- YES NO 1. DID THE APPLICANT SATISFACTORILY COMPLETE THE ABOVE POSTGRADUATE TRAINING PROGRAM?
- YES NO 2. DOES THE PROGRAM INCLUDE AT LEAST SIXTY (60) HOURS OF DIDACTIC TRAINING IN PAIN AND ANXIETY?
- YES NO 3. DOES THE PROGRAM COVER THE AMERICAN DENTAL ASSOCIATION GUIDELINES FOR TEACHING PAIN CONTROL AND SEDATION TO DENTISTS AND DENTAL STUDENTS?
- YES NO 4. DOES THE PROGRAM INCLUDE CLINICAL EXPERIENCE IN MANAGING COMPROMISED AIRWAYS?
- YES NO 5. DOES THE PROGRAM INCLUDE MANAGEMENT OF AT LEAST 20 PATIENTS?
 (If no to above, please provide a detailed explanation.)
- YES NO 6. DID THE APPLICANT EVER RECEIVE A WARNING OR REPRIMAND, OR WAS THE APPLICANT PLACED ON PROBATION DURING THE TRAINING PROGRAM? If yes, please explain.
- YES NO 7. WAS THE APPLICANT EVER REQUESTED TO REPEAT A PORTION OF THE TRAINING PROGRAM? If yes, please explain.
- YES NO 8. DOES THE PROGRAM INCLUDE ADDITIONAL CLINICAL EXPERIENCE IN PROVIDING MODERATE SEDATION FOR PEDIATRIC (AGE 12 OR YOUNGER) PATIENTS? If yes, please provide details.
- YES NO 9. DOES THE PROGRAM INCLUDE ADDITIONAL CLINICAL EXPERIENCE IN PROVIDING MODERATE SEDATION FOR MEDICALLY COMPROMISED (ASA CLASS 3 OR 4) PATIENTS? If yes, please provide details.

I further certify that the above named applicant has demonstrated competency in airway management and moderate sedation.

PROGRAM DIRECTOR SIGNATURE:

Alan Scott Douglas

DATE:

12/13/2012



DEPARTMENT OF VETERANS AFFAIRS
South Texas Veterans Health Care System
Audie L. Murphy Memorial Veterans Hospital Division
7400 Merton Minter Boulevard
San Antonio TX 78229-4404

June 1, 2012
 Dr. Ernest B. Luce, D.D.S.
 Associate Professor, Dept. of General Practice
 U.T. Health Science Center at San Antonio
 7703 Floyd Curl Drive
 San Antonio, TX 78284

671/160

In Reply Refer To:

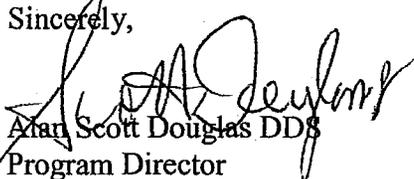
Re: A.E.G.D. Residents

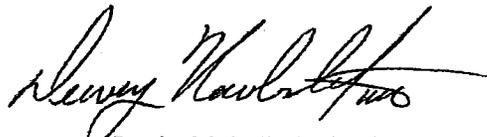
Dear Dr. Luce:

The residents listed below have each performed at least 25 intravenous conscious sedation procedures under our supervision. They have successfully completed a course in Advanced Cardiac Life support according to the guidelines of the American Heart Association, had 70 hours of didactic training in pain control and conscious sedation, and completed a three-week hospital rotation in general anesthesia. We are satisfied with their clinical performance and I recommend them for certification in IV Conscious Sedation.

<u>Resident</u>	<u>IV Sedations Performed</u>	<u>ORAL Sedations Performed</u>	<u>NITROUS OXIDE Sedations Performed</u>
Dr Hendricks	42	1	
Dr Jordan	43	4	
Dr McElroy	43	4	
Dr Raju	32	1	8
Dr Rose	37		
Dr Ryan	41		
Dr Wallmann	38	2	

Sincerely,


 Alan Scott Douglas DDS
 Program Director
 Advanced Education In General Dentistry Residency


 Dewey A. Newbold, D.D.S., M.S.D.
 Section Chief, Periodontics
 South Texas Veterans Health Care System

Mark Haverkorn, DDS
 Section Chief, Oral/Maxillofacial Surgery
 South Texas Veterans Health Care System

June 25, 2012

To Whom It May Concern:

Dr. Bradley D. Jordan, D.D.S. is a resident in the Advanced Education in General Dentistry program at the Audie Murphy Veterans Administration Hospital Dental Clinic. He will complete a one-year residency on June 30, 2012.

During the year, residents complete a number of activities related to sedation training. Primarily, residents complete a 70-hour didactic course in pain and anxiety control and perform a minimum of 20 parenteral conscious sedation procedures under direct faculty supervision. In addition, residents complete a one-month anesthesia rotation. During the anesthesia rotation residents learn to induce, ventilate, intubate, and maintain anesthetized patients, perform pre- and post-anesthetic evaluations of surgery patients and improve their skills in patient monitoring, patient classification, phlebotomy skills and maintenance of the anesthesia record. In addition, residents enhance their understanding of pharmacologic agents in general and regional anesthesia. At the end of the rotation, residents maintain the anesthetized patient with little supervision. It should be understood that this experience is not intended to train residents in the administration of general anesthesia; however, the experience should define the general anesthetic state and assist the resident in emergency situations when airway management and ventilation may be necessary. Emphasis in their coursework is placed on the differences between conscious sedation, deep sedation and general anesthesia.

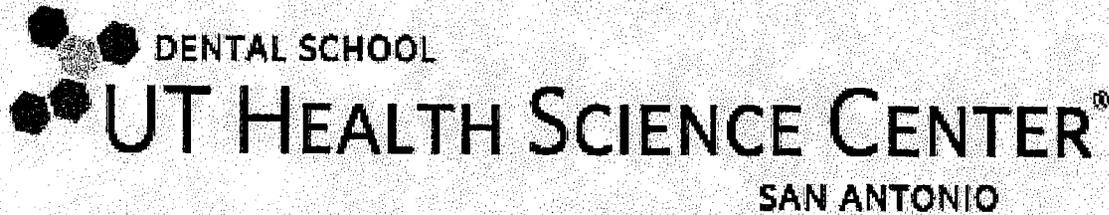
The didactic coursework begins with a discussion of the spectrum of anesthesia and covers such topics as behavioral modification, local anesthetics, nitrous oxide sedation, oral sedation, intramuscular and intravenous sedation, and emergency management. There is a strong emphasis on pharmacology, drug interactions, emergencies as well as management of the medically compromised patient. The course is a combination of didactic and clinical demonstrations in which residents perform local anesthetic, nitrous oxide, and intravenous sedations on one another. The emergency management section reviews all of the possible dental office emergencies within and outside of sedation. This section of the course utilizes mock emergency case scenarios to underscore the didactic material. Significant time is also devoted to discussions of recognition, management and prevention of complications of sedation. During conscious sedation procedures, residents are responsible for gaining intravenous access, use and interpretation of monitoring equipment including automated blood pressure and pulse, pulse oximetry and ECG monitoring. Dr. Jordan obtained clinical experiences with all forms of parenteral sedation and nitrous oxide analgesia. Specifically this includes 43 IV sedations and 4 oral sedations. Intravenous sedations typically entail the use of a benzodiazepine (i.e., diazepam, or midazolam) in combination with a narcotic (i.e., fentanyl or meperidine). Dr. Jordan's performance throughout this training has been exemplary, and I feel he is competent to administer conscious sedation via the IM, IV, and oral or inhalation route.

Sincerely,



Ernest B. Luce, DDS

Course Director, Pain Control and Sedation



*The University of Texas
Health Science Center at San Antonio*

certifies that

Bradley D. Jordan, D.D.S.

*Has satisfactorily completed all of the
requirements for competency in*

*Pain Control and Conscious Sedation
during his postdoctoral training in general dentistry*

July 1, 2011 to June 30, 2012

Ernest B. Lure

Course Director, Pain Control and Sedation

Program Director

Department of Veterans Affairs

Certificate of Residency

This Certificate is awarded to

Bradley D. Jordan D.D.S.

by the Veterans Health Services and Research Administration

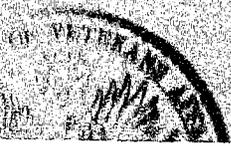
upon satisfactory completion of a Residency in

Advanced Education in General Dentistry

from July 1, 2011 to June 30, 2012

At the Veterans Affairs Medical Center

San Antonio, Texas



REPORT TO THE ANESTHESIA CREDENTIALS COMMITTEE (ACC)

RECOMMENDATION

DATE OF MEETING:	January 24, 2013
RE:	Moderate Sedation Course Request
SUBMITTED BY:	Christel Branness, Administrative Assistant
ACTION REQUESTED:	Recommendation regarding application

Background

The Anesthesia Credentials Committee occasionally reviews courses in moderate sedation for approval when they are offered as continuing education programs.

The following sponsor has asked for approval of a moderate sedation course:

- **UCLA – Wendel Family Dental Centre**

Update

On December 19, 2012, Lori from Wendel Family Dental Centre replied to the request for clarification regarding sedation cases. Please refer to the attached email.

Committee Recommendation

Should the course be approved for use as training in moderate sedation?

From: [Lori S](#)
To: [Braness, Christel \[IDB\]](#)
Subject: RE: UCLA/Wendel Family Dental Centre Moderate Sedation Course
Date: Wednesday, December 19, 2012 2:49:08 PM

Christel,

Thank you for getting back to me. In the clinical portion of our course, the practitioners are actually sedating the patients. Our office's dentists will be performing all dental treatment on these patients that are sedated by the course practitioners. Please let me know if there is any more information needed. Happy Holidays.

From: Braness, Christel [IDB] [<mailto:Christel.Braness@iowa.gov>]
Sent: Wed., Dec. 19, 2012 12:16 PM
To: Lori S
Subject: UCLA/Wendel Family Dental Centre Moderate Sedation Course
Importance: High

The Anesthesia Credentials Committee met today and discussed your request for approval of your moderate sedation course. Prior to granting approval, the committee members wanted to get clarification on a portion of the course. For the clinical part of the training, do the practitioners completing the training actually sedate the patients? Or, are they simply performing dental work on patients that will have already been sedated? After reviewing the brochure, it was a little unclear and they wanted to make sure that they were basing their information on accurate information.

The committee is scheduled to meet again on January 24, 2013. If I have the information by January 10, 2013, I should be able to add this to the agenda for discussion at that meeting.

Let me know if you have any questions. Thank you.

Christel Braness, Program Planner

Iowa Dental Board | 400 SW 8th St., Suite D | Des Moines, IA 50309

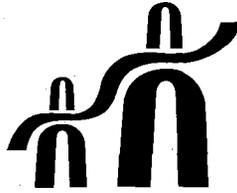
Phone: 515-242-6369 | Fax: 515-281-7969 | www.dentalboard.iowa.gov

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Wendel Family Dental Centre

Nobody "treats" Your Teeth Like We Do



RECEIVED

OCT 1 2012

IOWA DENTAL

September 27, 2012

Iowa Board of Dental Examiners
400 SW 8th Street, Ste. D
Des Moines, IA 50309-4687

To Whom It May Concern:

We are asking that our Intravenous Moderate Sedation Course be considered for approval for the doctors in your state.

The course is 80 hours and includes a minimum of 20 patient cases. I have attached some information on the course for your review. If you would like additional information, please contact me as soon as possible. We would like to get this approval prior to January 2013.

Our course satisfies the requirements for a moderate sedation permit in the states of Washington, Oregon, and California, among other states. The instructor is currently the Clinical Professor of Anesthesiology and Section Chief of Anesthesiology at the School of Dentistry University of California, Los Angeles.

We would greatly appreciate your assistance in helping us get this course approved. If you have any questions or concern please contact me at the number below.

Sincerely,

A handwritten signature in black ink, appearing to read "Lori S.", written in a cursive style.

Lori S.
Administrative Assistant
Wendel Family Dental Centre
7012 NE 40th Street
Vancouver WA 98661
(360) 254-5254 ext. 3353
loris@wendeldental.com

Vancouver
7012 NE 40th Street
Vancouver, WA 98661
360-254-5254
Fax 360-254-3698

Salmon Creek
1300 NE 134th Street
Vancouver, WA 98685
360-546-5208
Fax 360-574-2878

Hiddenbrook
19111 SE 34th Street, Ste. 104
Vancouver, WA 98683
360-823-0427
Fax 360-823-0428

Instructors



Steven Ganzberg, D.M.D., M.S.

Dr. Ganzberg, Clinical Professor of Anesthesiology at the UCLA School of Dentistry, is a dentist anesthesiologist with over 25 years experience in pain management. Dr. Ganzberg graduated from M.I.T. in 1977 and the University of Pennsylvania School of Dental Medicine in 1981. He completed his pain management training at New York University and his anesthesiology training and Master's degree at Ohio State University. Dr. Ganzberg taught at O.S.U. for 17 years where he directed the anesthesiology residency program in the College of Dentistry before coming to UCLA. He is currently Section Chair of Dental Anesthesiology at UCLA where he teaches pharmacology, sedation and anesthesiology in the School of Dentistry as well as engages in private dental anesthesiology practice. Dr. Ganzberg has lectured extensively on topics involving anesthesiology, sedation and medicine.

Christine L. Quinn, D.D.S., M.S.

Dr. Quinn received her D.D.S. degree from the University of Southern California School of Dentistry in 1987 and completed a residency in Dental Anesthesiology at Ohio State University College of Dentistry in 1989. Dr. Quinn is currently the Dental Anesthesiology Residency Director at UCLA School of Dentistry. She has been actively involved with both didactic and clinical teaching at the predoctoral and postdoctoral levels since 1989. Dr. Quinn is an in-office examiner for the State of California for general anesthesia.



**Wendel Family
Dental Centre**

Roger J. Wendel, D.M.D.

After earning his degree in dental medicine from the University of Pennsylvania, Dr. Wendel established his family practice in Vancouver. His goal was to achieve excellence in professional dental care, rendered in a manner that reflects the utmost respect and consideration for a patient. For more than 35 years this philosophy has allowed Wendel Family Dental Centre to become a leading provider of quality dental care in Clark County, and has earned Dr. Wendel a reputation that reaches beyond Vancouver and the Pacific Northwest.

I.V. Moderate Sedation Eight Day Course Detail

Day 1:

Introduction.

Overview of moderate sedation:

history and definitions, goals and routes, indications and contradictions, and techniques.

Pharmacology of moderate sedation: benzodiazepines, barbiturates, opioids, antihistamines, other CNS depressants, and reversal agents.

Pharmacokinetic principles of moderate sedation.

Day 2:

Patient evaluation: medical history, physical examination, laboratory studies, physician consultation, pediatric patients, geriatric patients, special patients, and ASA physical status classification.

Patient preparation: importance, fasting guidelines, preoperative instructions, postoperative instructions, preemptive and postoperative analgesic use.

Techniques of intravenous sedation: single drug, multiple drug, adjunctive medication, combination with enteral, and inhalation techniques.

Day 3:

Medical emergencies: overview, airway obstruction, bronchospasm, laryngospasm, respiratory depression, angina, myocardial infarction, stroke, hypotension, hypertension, cardiac arrest, intraarterial injection, extravascular injection syncope, hyperventilation, hypoglycemia, drug overdose, and thrombophlebitis.

Advanced airway management: laboratory exercises and SimMan experience.

Day 4:

Monitoring: national standards and guidelines, commonalities and specifics of state laws and regulations, evidence-based benefits of monitoring, specific monitors (use and interpretation): pretracheal stethoscope, pulse oximetry, sphygmomanometry, end-tidal carbon dioxide detection, electrocardiography (ECG), and bispectral analysis.

Course review and summary.

Exam.

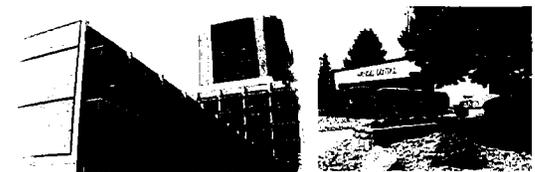
Day 5-8:

Clinical cases.



UCLA School of Dentistry and Wendel Family Dental Centre

Moderate Sedation with multiple oral and parenteral agents



A two-part, eight-day course for your Moderate Sedation permit.

April 19-21, 2013
and
May 15-19, 2013

Curriculum

After completing the course the student should be able to:

- Define and contrast moderate sedation, deep sedation, and general anesthesia.
- Describe pharmacokinetic principles that affect drugs used for moderate sedation, such as: (1) the influence of lipid solubility on drug onset, potency, and duration of effect; (2) single vs. multicompartmental pharmacokinetic models; and (3) drug cumulation and context-sensitive half-times.
- Describe the relative advantages and disadvantages of the intravenous and other routes of drug administration for fear and anxiety control.
- Obtain and record an appropriate medical history and physical assessment of a given patient and suitably evaluate the patient for moderate sedation.
- Obtain an adequate informed consent for moderate sedation and provide appropriate preoperative and postoperative instructions to a given patient.
- Establish and maintain a patent intravenous line.
- Compare different drugs used for moderate sedation and administer an appropriate regimen for anxiety control in a given clinical situation.
- Discuss how patient and procedural variables influence drug selection for intravenous sedation.
- Describe and use appropriate monitoring and chart recording methods for moderate sedation techniques.
- Describe the uses of oral premedication and nitrous oxide/oxygen administration alone, in combination, and with intravenous sedation.
- Outline possible adverse effects associated with moderate sedation and perform appropriate corrective measures.
- Respond effectively to an emergent situation relating to moderate sedation.
- Review relevant state legislation and regulations regarding the use of intravenous sedation and how these relate to existing national standards/guidelines.

Most states require Basic Life Support or Advanced Cardiac Life Support certification, in addition to this course prior to obtaining a Moderate Sedation license.

2013 Course Information

Part I - 7:00 AM - 6:00 PM Fri, Sat
7:00-2:00 PM Sun @ UCLA
Part II - 7:00 AM-6:00 PM Wed-Sun @ WFDC

At UCLA

April 19-21, 2013

Fly into Los Angeles, CA - LAX

UCLA Guest House (\$148/night)

310-825-2923

Hilgard House (\$160/night) "UCLA Rate"

310-208-3945

Tiverton House (\$139/night)

310-794-0151

AND

At WFDC

May 15-19, 2013

Fly into Portland, OR - PDX

Holiday Inn (\$100/night)

360-253-0500

Heathman Lodge (\$102/night)

360-254-3100

Call for additional accommodations.

Tuition: \$11,995 per person.

A deposit of \$5,000 will be due by February 1, 2013.

Balance due April 5, 2013

**You will be called to confirm your
successful registration**

Credit Hours:

- 80 hours of AGD credit -

Completion of this course will satisfy the requirements for IV Moderate Sedation in most states.

Pre-approval through your state dental board is recommended. Course is directly affiliated with UCLA School of Dentistry.

Course Description

- The purpose of this course is to enable the participant to deliver safe and effective moderate sedation, with special emphasis on intravenous sedation.
- At the conclusion of this course, the participant should be able to select an appropriate sedative regimen for a given patient and use that regimen safely in the clinical setting.
- Through the use of proper patient evaluation and selection, monitoring, administration technique, and emergency management, the participant should be able to avoid most adverse responses to moderate sedation and respond effectively to those emergencies that may occur.

**A minimum of 20
patient cases will
be provided.**



**SPACE IS LIMITED—REGISTER BY RETURNING
COMPLETED REGISTRATION FORM TO:**

Lori Sissel

Wendel Family Dental Centre

7012 NE 40th Street

Vancouver, WA 98661

Email: loris@wendeldental.com

Phone: 360-944-3813

Fax: 360-254-3698

AGD PACE: 8/22/07 - 8/31/13

Course fees will be refunded minus a \$500 administration fee up to 2 weeks prior to the course as long as we can fill your spot in the course. If we cannot, you will be responsible for up to 25% of the course fee.



REPORT TO THE ANESTHESIA CREDENTIALS COMMITTEE (ACC)

RECOMMENDATION

DATE OF MEETING:	January 24, 2013
RE:	Moderate Sedation Course Request
SUBMITTED BY:	Christel Braness, Administrative Assistant
ACTION REQUESTED:	Recommendation regarding application

Background

The Anesthesia Credentials Committee occasionally reviews courses in moderate sedation for approval when they are offered as continuing education programs.

The following sponsor has asked for approval of a moderate sedation course:

- **Duquesne University Mylan School of Pharmacy: IV Moderate Sedation for Dentistry**

Explanation: Dr. Richard Kava called inquiring about approved moderate sedation courses. I referred him to the courses, which have been previously approved by the Committee. When Dr. Kava contacted the University of Minnesota School of Dentistry, Dr. Kava was informed that they no longer offer a course in moderate sedation and referred him to this provider. Dr. Kava has submitted the course for review.

Committee Recommendation

Should the course be approved for use as training in moderate sedation?

Duquesne University Mylan School of Pharmacy
IV Moderate Sedation for Dentistry
SYLLABUS

Credits Hours: Lecture 65 Clinical 21 (up to 40 optional)

Prerequisites: American Heart Association CPR-Health Care Provider (ACLS is offered in the second module and is required by most state dental boards).

Clinical Prerequisites: Unites States or Canadian dental license in good standing, negative clinical blood tests to Hepatitis B, tuberculosis, and current dental liability insurance coverage with minimum limits of \$1,000,000/3,000,000.

Description:

This is a competency course and is designed to provide the participant with the knowledge necessary to safely administer moderate sedation by the parenteral and enteral routes in the dental office setting. This course meets or exceeds the “Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students” of the American Dental Association (October 2007).

Required Texts:

1. *“Sedation: A Guide to Patient Management.”* Malamed
2. *“ECGs Made Easy”* Barbara J. Aehlert

Grading:

To successfully earn continuing education credit and certification for this course the participant must pass each individual written exam with a **75%** minimum score. This is irrespective of the final grade average.

A participant must pass all exams successfully to be able to participate in the clinical portion of the course. There are **NO** exceptions to this requirement.

In order to successfully pass the clinical portion of the course, the student must demonstrate clinical competence to the satisfaction of the clinical coordinator and the course director. If the student cannot gain clinical competence in the 20 allotted hours of clinical training, he/she will be required to return for additional training and experience at an additional fee.

Only after successful completion of the clinical and practical portions will the participant be awarded a certificate of completion that can be used for certification by a state board of dentistry or other licensing body.

Examinations:

There will be at least three written examinations of 100 points each, including an EKG interpretation examination.

There may also be a practical examination for the “hands-on” portion of the 60 hour didactic course.

Behavioral Objectives:

Upon successful completion of the course the participant should be able to:

1. List and discuss the advantages and disadvantages of moderate sedation.
2. Discuss the prevention, recognition and management of complications associated with moderate sedation.
3. Administer moderate sedation to patients in a clinical setting in a safe and effective manner.
4. Discuss the abuse potential, occupational hazards and other untoward effects of the agents utilized to achieve moderate sedation.
5. Describe and demonstrate the technique of intravenous access, intramuscular injection and other parenteral techniques.
6. Discuss the pharmacology of the drug(s) selected for administration.
7. Discuss the precautions, indications, contraindications and adverse reactions associated with the drug(s) selected.
8. Administer the selected drug(s) to dental patients in a clinical setting in a safe and effective manner.
9. List the complications associated with techniques of moderate sedation.
10. Describe a protocol for management of emergencies in the dental office and list and discuss the emergency drugs and equipment required for the prevention and management of emergency situations.
11. Discuss the principals of advanced cardiac life support or an appropriate dental sedation/anesthesia emergency course equivalent.
12. Demonstrate the ability to manage emergency situations.

Moderate Sedation Course Content:

1. Historical, philosophical and psychological aspects of anxiety and pain control.
2. Patient evaluation and selection through review of medical history taking, physical diagnosis and psychological considerations.
3. Definitions and descriptions of physiological and psychological aspects of anxiety and pain.
4. Description of the sedation anesthesia continuum, with special emphasis on the distinction between the conscious and the unconscious state.
5. Review of pediatric and adult respiratory and circulatory physiology and related anatomy.
6. Pharmacology of local anesthetics and agents used in moderate sedation, including drug interactions and contraindications.
7. Indications and contraindications for use of moderate sedation.

8. Review of dental procedures possible under moderate sedation.
9. Patient monitoring using observation and monitoring equipment, with particular attention to vital signs and reflexes related to consciousness.
10. Maintaining proper records with accurate chart entries recording medical history, physical examination, informed consent, time-oriented anesthesia record, including the names of all drugs administered including local anesthetics, doses, and monitored physiological parameters.
11. Prevention, recognition and management of complications and emergencies.
12. Description and use of moderate sedation monitors and equipment.
13. Discussion of abuse potential.
14. Intravenous access: anatomy, equipment and technique.
15. Prevention, recognition and management of complications of venipuncture and other parenteral techniques.
16. Description and rationale for the technique to be employed.
17. Prevention, recognition and management of systemic complications of moderate sedation, with particular attention to airway maintenance and support of the respiratory and cardiovascular systems.

The didactic portion of the course will include extensive simulation training using the Laerdal SimMan[®] as well as other types of simulation devices.

Clinical Training:

The clinical training portion of the course will take place at one of our associated dental clinics or ambulatory surgery centers. Each site is fully equipped to provide patients with all phases of anesthesia, including moderate sedation and general anesthesia. While the intention of this course is not to train dentists in the administration of general anesthesia, managing patients at this level provides many valuable skills. Particular attention will be paid to maintenance and management of the airway and associated complications.

The faculty-to-student ratio in the clinical training portion is at least 1:1, and the student will be working with a certified registered nurse anesthetist (CRNA) or dental anesthesiologist.

For those students who are required to complete dental procedures while doing the sedation, a temporary CE license must be applied for prior to the clinical training. More information regarding this is available from Ms. Diller.

Clinical training must be completed within **six (6) months** of successful completion of the didactic portion of the course.

TERMS AND CONDITIONS

ATTENDANCE:

Initials *Attendance is mandatory at all lectures. The participant will not be allowed to receive a certificate of completion for the course if ANY lectures or portions thereof are missed.*

CLINICAL TRAINING:

Initials *Clinical training must be completed within SIX months of successful completion of the didactic portion of the course.*

REGULATORY AUTHORITIES:

Initials *Neither Duquesne University nor the course instructors guarantee participant's certification by any state dental board or regulatory authority and participant agrees that he/she is responsible for confirming the validity of this course with any state dental board or provincial college/association.*

NO REFUNDS:

Initials *There will be NO refunds of any kind once the didactic portion has begun.**

PAYMENT PLANS (INITIAL ONE ONLY):

OPTION 1:

Initials *\$3500.00 deposit to hold place in class. \$6495.00 balance before first module begins.*

OPTION 2:

Initials *\$3500.00 deposit to hold place in class. \$3,247.50 before first module begins. \$3,247.50 balance before second module begins.*

*** if you register and deposit before February 16, receive a \$500 discount.

I, _____, acknowledge that I have received, read, and understand all of the terms of the foregoing course syllabus and I hereby agree to abide by its terms and conditions.

Signature

Date

Print Name