

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 5 DENTISTRY (DENTISTS, DENTAL HYGIENISTS, ETC.)
PART 15 DENTISTS, ANESTHESIA ADMINISTRATION

16.5.15.1 ISSUING AGENCY: New Mexico Board of Dental Health Care
[16.5.15.1 NMAC - Rp 16 NMAC 5.15.1, 5-31-02]

16.5.15.2 SCOPE: The provisions of Part 15 of Chapter 5 apply to all dentists who hold or who are applying for certification to administer anesthesia or analgesia.
[16.5.15.2 NMAC- Rp 16 NMAC 5.15.2, 5-31-02]

16.5.15.3 STATUTORY AUTHORITY: Part 15 of Chapter 5 is promulgated pursuant to the Dental Health Care Act, NMSA 1978, 61-5A-22 (1996 Repl. Pamp.).
[16.5.15.3 NMAC - Rp 16 NMAC 5.15.3, 5-31-02]

16.5.15.4 DURATION: Permanent
[16.5.15.4 NMAC - Rp 16 NMAC 5.15.4, 5-31-02]

16.5.15.5 EFFECTIVE DATE: May 31, 2002 unless a different date is cited at the end of a Section
[16.5.15.5 NMAC - Rp 16 NMAC 5.15.5, 5-31-02]

16.5.15.6 OBJECTIVE:

A. To establish guidelines and procedures for the regulation of dentists who administer nitrous oxide inhalation analgesia, conscious sedation, deep sedation, or general anesthesia in an office located in New Mexico.

B. These guidelines are not meant to regulate the existing precedent where New Mexico licensed dentists may have hospital privileges to provide anesthesia/sedation to dental patients in the operating room or emergency room based on their training, education and policy of the hospital.
[16.5.15.6 NMAC - Rp 16 NMAC 5.15.6, 5-31-02]

16.5.15.7 DEFINITIONS:

A. "Conscious Sedation" means a minimally depressed level of consciousness that retains the patients ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command. Conscious sedation is produced by a pharmacologic or non-pharmacologic method or combination thereof. In accord with this particular definition, the drugs and/or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would be considered to be in a deeper state of anesthesia than conscious sedation.

B. "Deep Sedation" means a induced state of depressed consciousness accompanied by partial loss of protective reflexes, including the inability to continually maintain an airway independently and/or to respond purposefully to verbal command. Deep sedation is produced by a pharmacologic or non- pharmacologic method or combination thereof.

C. "General Anesthesia" means a induced state of unconsciousness, accompanied by partial or complete loss of protective reflexes, including the inability to continually maintain an airway independently and respond purposefully to physical stimulation or verbal command. General anesthesia is produced by a pharmacologic or non-pharmacologic method or combination thereof.

D. "Monitor" means to watch or check on.

E. "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.

F. "Prescribed Administration" means the nitrous oxide is administered by a dental hygienist or dental assistant under the indirect supervision of the dentist with the dentist's authorization.

G. "Combination inhalation-enteral sedation (combined conscious sedation)" - conscious sedation using inhalation and enteral agents. Nitrous oxide/oxygen when used in combination with sedative agents may produce anxiolysis, conscious or deep sedation of general anesthesia.
[16.5.15.7 NMAC - Rp 16 NMAC 5.15.7, 5-31-02]

16.5.15.8 REQUIREMENT TO BE REGISTERED OR CERTIFIED: Dentists who administer nitrous oxide inhalation analgesia in New Mexico are required to be registered with the Board. Dentists who administer conscious sedation, deep sedation, or general anesthesia in New Mexico are required to obtain an anesthesia permit from the Board. Any dentist who fails to comply with these rules may be subject to disciplinary action by the Board. Anesthesia permits valid on the effective date of this rule continue to be valid until the expiration date indicated on the permit.
[16.5.15.8 NMAC - Rp 16 NMAC 5.15.8, 5-31-02]

16.5.15.9 ANESTHESIA COMMITTEE:

A. Appointment: All members of the Anesthesia Committee serve at the pleasure of the Board. The Board Chair will appoint members to serve on the Anesthesia Committee for 5 year terms beginning on July 1. Individuals for consideration may be nominated by the New Mexico Dental Association, any local dental society, or the Anesthesia Committee.

B. Terms: Each member shall be appointed to serve a term of five years, however, the appointments shall be staggered so that no more than forty percent of the members will expire in any given year.

C. Reimbursement: The Anesthesia Committee examiners shall be paid one hundred dollars, in addition to mileage and per diem for exams outside of the community where they practice dentistry, upon the completion of each office anesthesia examination and evaluation.

D. Committee Composition: The Anesthesia Committee shall consist of licensed dentists, including at least 1 Board Certified Oral and Maxillofacial Surgeon, 1 general dentist, a non-voting ex-officio Board member, 1 dentist not engaged in the use of sedation techniques, and when possible, representatives of other interested dental specialties. Each anesthesia committee member should be currently practicing some form of sedation and be currently qualified as an examiner, except the non-sedating dentist.

E. Duties: Establish policies and procedures for the evaluation of applications, inspections of facilities, and examination of applicants; Make recommendations to the Board in regard to each application; Report to the Board, as needed, at regularly scheduled Board meetings the status of activities of the Anesthesia Committee; Inform the Board of any licensee who fails to cooperate with the requirements for application, registration or renewal of permits; Inspect facilities upon request of the Board; and Upon request, assist the Board in the investigation of complaints concerning the administration of anesthesia or analgesia.

[16.5.15.9 NMAC - Rp 16 NMAC 5.15.9, 5-31-02]

16.5.15.10 ADMINISTRATION OF NITROUS OXIDE ANALGESIA:

A. Registration Required: Each licensed dentist who administers or supervises the prescribed administration of nitrous oxide inhalation analgesia shall be registered with the Board. A registration form will be provided upon initial application or upon request, and contain information to verify the dentist, facility, and staff meet the requirements specified in paragraph A of this rule. When the registration has been approved by the Secretary-Treasurer of the Board the applicant will be sent a wall certificate which does not expire. Administration of nitrous oxide inhalation analgesia without registration is a violation of these rules and may result in disciplinary action against the licensee.

B. Requirements for Registration: Each licensed dentist who administers or prescribes administration of nitrous oxide inhalation analgesia shall meet the following requirements:

(1) Completed a course of training while a student in an accredited school of dentistry or through postgraduate training that meets the requirements of the October 2000 ADA Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry.

(2) Have adequate equipment which includes fail-safe features and a 25% minimum oxygen flow and an effective scavenging system;

(3) Each dentist and auxiliary personnel who monitors the use of, or administers nitrous oxide shall have current basic life support certification;

(4) All use of nitrous oxide inhalation analgesia shall be under the indirect supervision of a licensed dentist; and

(5) The patient's record shall reflect evidence of appropriate monitoring of vital signs, including blood pressure, pulse, and respiratory rate.

(6) Current permit holders would be grandfathered by New Mexico laws in effect at the time of original issue of their permit.

[16.5.15.10 NMAC - Rp 16 NMAC 5.15.10, 5-31-02]

16.5.15.11 ADMINISTRATION OF CONSCIOUS AND DEEP SEDATION: The following three categories of anesthesia shall not be administered in a dental facility unless the licensed dentist has obtained a permit from the Board. The Conscious Sedation II and Deep Sedation/General Anesthesia permits are issued to the dentist for a specific practice location, unless the anesthesia provider holds an Anesthesia Permit at Large. Administration without a permit is grounds for disciplinary action against the licensee.

A. Conscious Sedation I Permit allows a licensed dentist to use only oral or rectal medications or combined inhalation-enteral conscious sedation to obtain conscious sedation on an outpatient basis for dental patients.

B. Conscious Sedation II Permit allows a licensed dentist to use parenteral injection to obtain conscious sedation on an outpatient basis for dental patients.

C. Deep Sedation/General Anesthesia Permit allows a licensed dentist to use deep sedation or general anesthesia on an outpatient basis for dental patients.

D. Permit Levels: The level of permits in order of increasing complexity are conscious sedation I, conscious sedation II, and deep sedation/general anesthesia. When a permit is issued for one level, all levels of lesser complexity are considered within the scope of that permit.

[16.5.15.11 NMAC - Rp 16 NMAC 5.15.11, 5-31-02]

16.5.15.12 PERMIT REQUIREMENTS:

A. Conscious Sedation I:

(1) To administer enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) the dentist must satisfy one of the following criteria:

(a) Must have completed training to the level of competency in enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) consistent with that prescribed in Part I and Part III of the October 2000 ADA Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry.

(b) Completion of an ADA accredited post-doctoral training program, which affords comprehensive and appropriate training necessary to administer and manage enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) consistent with that prescribed in Part II of the October 2000 ADA Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry.

(c) Current permit holders would be grand-fathered by New Mexico laws in effect at the time of original issue of their permit.

(2) The dentist maintains a properly equipped facility for the administration of conscious sedation, staffed with supervised clinical auxiliary personnel capable of handling procedures, problems and emergencies incident thereto in accordance with the October 2000 ADA Guidelines for the use of Conscious Sedation, Deep sedation and General Anesthesia for Dentists;

(3) The dentist and auxiliary clinical personnel have current basic life support certification; and

(4) The patient's record shall reflect that the pre-operative patient evaluation, pre-operative preparation, monitoring, recovery, discharge and documentation was performed in accordance with the October 2000 ADA Guidelines for the Use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists.

(5) The following rules shall apply to the administration of enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) in the dental office.

(a) Administration of enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) by another duly qualified dentist or physician requires the operating dentist and his/her clinical staff to maintain current expertise in Basic Life Support (BLS). The operating dentists shall ensure that the dentist or physician anesthetist is duly licensed in New Mexico to provide anesthesia and be a member in

good standing of the staff of an accredited New Mexico hospital in the community in which the anesthesia occurs. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(b) When a Certified Registered Nurse Anesthetist (CRNA) is permitted to function under the supervision of a dentist, administration of enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) by a CRNA shall require the operating dentist to have completed training in enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) commensurate with these rules. The operating dentist shall hold a current Conscious Sedation I permit. The operating dentist shall ensure that the CRNA is duly licensed in New Mexico to provide anesthesia and be a member in good standing of the anesthesiology staff of an accredited New Mexico hospital. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(c) A dentist administering enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) must document current successful completion of a Basic Life Support (BLS) course.

(d) A dental facility utilizing dentist, physician or CRNA anesthetists shall be registered with the Board as a Conscious Sedation I Facility.

(e) The operating dentist must ensure that the anesthesia permit holder/provider provides for the anesthetic management, adequacy of the facility, and the treatment of emergencies associated with the administration of enteral and/or combined conscious sedation, including immediate access to pharmacologic antagonists, if any, and appropriately sized equipment for establishing a patent airway and providing positive pressure ventilation with oxygen.

B. Conscious Sedation II:

(1) To administer parenteral conscious sedation the dentist must satisfy one of the following criteria:

(a) Completion of a comprehensive training program in parenteral conscious sedation that satisfies the requirements described in Part III of the October 2000 ADA Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry.

(b) Completion of an ADA accredited post-doctoral training program (e.g. general practice residency), which affords comprehensive and appropriate training necessary to administer and manage parenteral conscious sedation.

(c) Current permit holders would be grandfathered by New Mexico laws in effect at the time of original issue of their permit.

(2) The dentist maintains a properly equipped facility for the administration of conscious sedation in accordance with the October 2000 ADA Guidelines for the use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists;

(3) The office is staffed with supervised clinical auxiliary personnel capable of handling procedures, problems and emergencies incident thereto;

(4) The dentist and auxiliary clinical personnel have current basic life support certification;

(5) The patient's record shall reflect that the pre-operative patient evaluation, pre-operative preparation, monitoring, recovery, discharge and documentation was performed in accordance with the October 2000 ADA Guidelines for the Use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists.

(6) The dentist passes the examination and receives approval after facility inspection by the Anesthesia Committee.

(7) The following rules shall apply to the administration of parenteral conscious sedation in the dental office.

(a) Administration of parenteral Conscious Sedation by another duly qualified dentist or physician requires the operating dentist and his/her clinical staff to maintain current expertise in Basic Life Support (BLS). The operating dentist shall ensure that the dentist or physician anesthetist is certified in Advanced Cardiac Life Support (ACLS), is duly licensed in New Mexico to provide anesthesia and is a member in good standing of the staff of an accredited New Mexico hospital. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(b) When a Certified Registered Nurse Anesthetist (CRNA) is permitted to function under the supervision of a dentist, administration of parenteral conscious sedation by a CRNA shall require the operating dentist to have completed training in parenteral conscious sedation commensurate with these rules. The operating dentist shall hold a current Conscious Sedation II permit. The operating dentist shall ensure that the CRNA is duly

licensed in New Mexico to provide anesthesia and be a member in good standing of the anesthesiology staff of an accredited New Mexico hospital. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(c) A dentist administering parenteral conscious sedation must document current successful completion of:

(i) A Basic Life Support (BLS) course

(ii) Advanced Cardiac Life Support (ACLS) or an appropriate equivalent as approved by the Anesthesia Committee.

(d) A dental facility utilizing dentist, physician or CRNA anesthetists shall be registered with the Board as a Conscious Sedation II Facility and the facility and staff shall be evaluated as such.

(e) The operating dentist must ensure that the anesthesia permit holder/provider is responsible for the anesthetic management, adequacy of the facility, and the treatment of emergencies associated with the administration of parenteral conscious sedation, including immediate access to pharmacologic antagonists, if any, and appropriately sized equipment for establishing a patent airway and providing positive pressure ventilation with oxygen.

C. Deep Sedation/General Anesthesia:

(1) To administer deep sedation/general anesthesia, the dentist must satisfy one of the following criteria:

(a) Completion of an advanced training program in anesthesia and related subjects beyond the undergraduate dental curriculum that satisfies the requirements described in Part II of the October 2000 ADA Guidelines for Teaching and Comprehensive Control of Anxiety and Pain in Dentistry.

(b) Completion of an ADA accredited post-doctoral training program (e.g. oral and maxillofacial surgery), which affords comprehensive and appropriate training necessary to administer and manage deep sedation/general anesthesia, commensurate with these rules.

(c) Current permit holders would be grandfathered by New Mexico laws in effect at the time of original issue of their permit.

(2) The dentist maintains a properly equipped facility for the administration of deep sedation or general anesthesia in accordance with the October 2000 ADA Guidelines for the use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists

(3) The office is staffed with supervised clinical auxiliary personnel capable of handling procedures, problems and emergencies incident thereto;

(4) The dentist and auxiliary clinical personnel have current basic life support certification;

(5) The patient's record shall reflect that the pre-operative patient evaluation, pre-operative preparation, monitoring recovery, discharge and documentation was performed in accordance with the October 2000 ADA Guidelines for the Use of Conscious Sedation, Deep Sedation and General Anesthesia for Dentists.

(6) The dentist passes the examination and receives approval after facility inspection by the Anesthesia Committee.

(7) The following rules shall apply to the administration of deep sedation/general anesthesia in the dental office.

(a) Administration of deep sedation/general anesthesia by another duly qualified dentist or physician requires the operating dentist and his/her clinical staff to maintain current expertise in Basic Life Support (BLS). The operating dentist shall ensure that the acting anesthetist is certified in Advanced Cardiac Life Support (ACLS), is duly licensed in New Mexico to provide anesthesia and is a member in good standing of the staff of an accredited New Mexico hospital. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(b) When a Certified Registered Nurse Anesthetist (CRNA) is permitted to function under the supervision of a dentist, administration of deep sedation/general anesthesia by a CRNA shall require the operating dentist to have completed training in deep sedation/general anesthesia commensurate with these rules. The operating dentist shall hold a current Deep Sedation/General Anesthesia permit. The operating dentist shall ensure that the CRNA is duly licensed in New Mexico to provide anesthesia and be a member in good standing of the anesthesiology staff of an accredited New Mexico hospital. The operating dentist shall be responsible for notifying the Anesthesia Committee of the New Mexico Board of Dental Health Care of all anesthetists used.

(c) A dentist administering deep sedation/general anesthesia must document current, successful completion of an Advanced Cardiac Life Support (ACLS) course, or an equivalent as approved by the Anesthesia Committee.

(d) A dental facility utilizing dentist, physician or CRNA anesthetists shall be registered with the Board as a Deep Sedation/General Anesthesia Facility and the facility and staff shall be evaluated as such.

(e) The operating dentist must ensure that the anesthesia permit holder/provider is responsible for the anesthetic management, adequacy of the facility, and the treatment of emergencies associated with the administration of deep sedation and general anesthesia, including immediate access to pharmacologic antagonists and appropriately sized equipment for establishing a patent airway and providing positive pressure ventilation with oxygen. Advanced airway equipment, resuscitation medications and a defibrillator must also be immediately available. Appropriate pharmacologic agents must be immediately available if known triggering agents of malignant hyperthermia are part of the anesthesia plan.

D Anesthesia Permit at Large: This permit allows the holder to provide anesthesia services to patients in dental offices on an out-patient basis. The holder of the "Anesthesia Permit at Large" assumes all responsibility for the administration of the sedation or anesthesia in the dental office.

(1) To hold an "Anesthesia Permit at Large" a dentist must meet the requirements of Subsection C of 16.5.12 NMAC Deep Sedation/General Anesthesia.

(2) The holder of a "Permit at Large" may be evaluated and inspected by the Anesthesia Committee as deemed necessary to assure safety to the public.

(3) The holder of such a permit agrees to have available at all times all monitors, emergency equipment, and other necessary drugs and materials when administering conscious sedation, deep sedation, and general anesthesia.

(4) The permit holder will inform the Board of all dental facilities where anesthesia services are to be provided and follow all other procedures as outlined in Subsection C of 16.5.12 NMAC Deep Sedation/General Anesthesia.

[16.5.15.12 NMAC - Rp 16 NMAC 5.15.12, 5-31-02]

16.5.15.13 REPORTING ADVERSE INCIDENTS: Each licensed dentist must submit a written report to the Board within a period of thirty days of any significant morbidity or mortality or other incident which results in temporary or permanent physical or mental injury of a patient during, or as a result of, nitrous oxide inhalation analgesia, conscious sedation administered via oral, rectal, or parenteral routes, deep sedation, or general anesthesia. The report is required regardless of the need for hospitalization after the incident and shall include the following:

- A. Description of the dental procedure;
- B. Description of the pre-operative physical condition of the patient;
- C. List of drugs and dosage administered and route of administration;
- D. Description in detail of techniques utilized in administering the drugs utilized;
- E. The names of auxiliary personnel in attendance; and
- F. Description of the adverse occurrence to include the following: detailed description of symptoms, of any incident; treatment initiated on the patient; response of the patient to the treatment; description of the patient's condition on termination of treatment; and, copies of the patient record, medical history and operative report.

[16.5.15.13 NMAC - Rp 16 NMAC 5.15.13, 5-31-02]

16.5.15.14 FAILURE TO REPORT: Failure to comply with the reporting requirements of Section 13 of this Part shall be grounds for disciplinary action against the licensee. In accordance with the provisions of the Uniform Licensing Act, the Board may take any actions enumerated in Part 16 of these rules, as well as revoke the anesthesia permit.

[16.5.15.14 NMAC - Rp 16 NMAC 5.15.14, 5-31-02]

16.5.15.15 PERMIT APPLICATION PROCEDURE:

A. Applications may be obtained from the Board office. The completed application, accompanied by the required permit fee as defined in Part 5, is forwarded to the Anesthesia Committee for evaluation.

B. Temporary Permits. The Anesthesia Committee evaluates the application and identifies any additional information required. If the application appears to be in order, the Anesthesia Committee may

recommend the Board issue a temporary permit. Temporary permits allow time to complete processing of the application, administer the examination and inspect the facility.

- (1) The temporary permit shall not be valid for more than 12 months;
- (2) The permit application fee includes the cost of the temporary permit and the initial permit; and
- (3) A temporary permit shall be revoked by the Board on the following grounds: the applicant fails the Anesthesia Committee's examination; the applicant is found to be practicing outside the recognized standard of care in regard to administration of anesthesia; or the applicant fails to cooperate with the timely scheduling of the examination and facility inspection.

C. Examination/Evaluation: The Anesthesia Committee will schedule the examination and facility inspection, when required, with the applicant. The Anesthesia Committee uses the American Association of Oral and Maxillofacial Surgeons Office Anesthesia Evaluation Manual as a guide for the examinations. Incomplete applications will be returned by the Anesthesia Committee to the Board office with a clear indication of the deficient areas.

D. Final Approval. After final evaluation of the application and examination results, the Anesthesia Committee recommends final action on the application to the Board. The Board makes the final determination on approval of the permit. If an application is denied for failure to meet the requirements of Section 10 of this Part, the areas of non-compliance will be identified and the applicant may re-apply when the requirements are met.
[16.5.15.15 NMAC - Rp 16 NMAC 5.15.15, 5-31-02]

16.5.15.16 PERMIT EXPIRATION AND RENEWAL:

A. Expiration: Anesthesia permits are issued for six years from the last day of the month in which the initial permit was issued.

B. Renewal: Renewal applications will be sent to each dentist prior to the expiration date of the anesthesia permit. The completed application, along with the required fee must be returned to the Board office prior to permit expiration. The permit renewal application will be forwarded to the Anesthesia Committee, which will schedule a re-examination for holders of Conscious Sedation II and General Anesthesia permits.

C. New facility evaluation: A dentist who holds a Conscious Sedation II or General Anesthesia permit and who relocates his practice requires a new permit based on re-examination. The permit fee will be charged and the new permit will be issued in accordance with paragraph 16.1.

D. Re-examination/evaluation: The Board may require a re-examination or a re-evaluation of the credentials, facilities, equipment, personnel, and procedures of a permit holder to determine if the dentist is currently qualified to administer anesthesia. The Board or its agents shall notify the dentist to be re-examined or re-evaluated 180 days in advance of permit expiration. The notification will indicate the content and format of the examination/evaluation

E. Permit Expiration: Failure of a dentist to renew his license and permit, or to schedule a required office re-evaluation within thirty days of receipt of the notification, or failure on the part of the licensee to successfully complete the examination/evaluation, will cause the permit to expire.

[16.5.15.16 NMAC - Rp 16 NMAC 5.15.16, 5-31-02]

HISTORY OF 16.5.15 NMAC:

Pre NMAC History:

Material in this part was derived from that previously filed with the commission of public records - state records center and archives as:

Article XIV, Administration Of Nitrous Oxide Inhalation Analgesia, Conscious Sedation, Deep Sedation, And General Anesthesia, filed 09-04-86;

BOD Rule 13, Administration Of Nitrous Oxide Inhalation Analgesia, Conscious Sedation, Deep Sedation, And General Anesthesia, filed 02-09-89;

BODHC Rule DS 8-95, Dentists, Analgesia Administration, filed 07-31-95.

History of Repealed Material: 85-1, Repealer, filed 10-29-85.

BODHC Rule DS 8-95, Dentists, Analgesia Administration, filed 07-31-95, **repealed** effective 05-31-2002.

Other History:

BODHC Rule DS 8-95, Dentists, Analgesia Administration, filed 07-31-95; **renumbered, reformatted and replaced** by 16 NMAC 5.15, Dentists, Analgesia Administration, filed 09-17-96;
16 NMAC 5.15, Dentists, Analgesia Administration, filed 09-17-96, **replaced** by 16.5.15 NMAC, Dentists, Analgesia Administration, effective 05-31-2002.