



AB 224 – Dental Anesthesia and Children

IN BRIEF

AB 224 seeks to increase the safety of children who need anesthesia during dental procedures.

AB 224 is a follow up bill to last year's AB 2235 which was signed by Governor Brown with no votes in opposition from either house. As a result of AB 2235, the Dental Board of California reviewed the current state of dental anesthesia for children and made recommendations to the legislature on how to make the practice safer. This bill implements the Dental Board's recommendations with evidence-based solutions that improve safety with careful consideration of the accessibility of safe dental anesthesia for all California children.

AB 224 will update the definitions of sedation and anesthesia. It will also update the permitting structure to correspond with those modern definitions.

THE ISSUE

Dentists and oral surgeons are administering anesthesia, including general anesthesia and deep sedation, to children and use powerful, potentially dangerous drugs in these procedures.

The Dental Board has thoroughly reviewed the current regulations and made recommendations to keep children safe. The Board recommended requiring dedicated personnel whose only task is to monitor the vital signs and breathing of children undergoing sedation and anesthesia.

Under current law, dentists and oral surgeons are allowed to perform procedures while simultaneously administering sedation and anesthesia for pediatric patients. This is called the single operator-anesthetist model. All other healthcare professions require a separate dedicated trained anesthesia provider, in addition to the person performing the procedure. FDA warning labels on anesthesia medications warn against a single provider for both the procedure and anesthesia.

As stated in the Journal of the American Dental Association (March 2017):

“The Single operator-anesthetist is also a risk factor for the use of anesthetic and sedative drugs, as the dentist performing the clinical procedure is ultimately responsible for monitoring the patient at the same time. There is little evidence to suggest that the use of a minimally trained dental assistant abrogates the potential risks of a single operator-anesthetist when drugs are administered that produce general anesthesia or deep sedation. If the public can appreciate that driving and texting at the same time is an unsafe practice, the dental profession needs to justify the continued risk of the single operator-anesthetist that places economic benefit over patient safety.”

THE SOLUTION

AB 224 will:

- Implement the Dental Board's recommendations regarding safe access to dental anesthesia for children in California.
- Update anesthesia definitions and permit structure for sedation and anesthesia in California

SUPPORT

American Academy of Pediatrics – CA, (Sponsor)
American Society of Dentist Anesthesiologists
California Society of Anesthesiologists
PDI Surgery Center
Happy Bear Surgery Center
The Family of Caleb Sears (2008–2015)

FOR MORE INFORMATION

Michael Lucien, Office of Asm. Tony Thurmond
916 319 2015 | michael.lucien@asm.ca.gov