





March 24, 2025

VIA EMAIL: OPLCLicensing11@oplc.nh.gov

New Hampshire Board of Dental Examiners Office of Professional Licensure & Certification 7 Eagle Square Concord NH, 03301

Dear Members of the New Hampshire Board of Dental Examiners:

On behalf of the American Society of Dentist Anesthesiologists (ASDA), the American Association of Oral and Maxillofacial Surgeons (AAOMS), and the American Academy of Periodontology (AAP), we appreciate the dedication of states in ensuring safe and effective sedation and general anesthesia practices in dental facilities. As states consider adopting the American Society of Dentist Anesthesiologists, American Association of Oral & Maxillofacial Surgeons, and American Academy of Periodontology Model State Sedation/General Anesthesia Rules, we wish to emphasize that these provisions were developed as a guide and we would welcome states to tailor them to meet their unique demographics and needs while maintaining safety in the delivery of sedation and anesthesia.

As explicitly stated in the preamble of the model regulations (emphasis added):

"This document is a **regulatory and rules template to be used as a framework** for legislators and regulatory agencies to develop fair and safe laws to provide oversight to sedation and general anesthesia being provided in the dental anesthesia facility."

This statement underscores the intention for states to be able to modify the model regulations in a manner that best aligns with their specific patient populations, provider availability, and unique demands. Adopting the model regulations without such modifications may inadvertently create unnecessary barriers to access to care or fail to address the unique challenges faced by dental professionals and patients in specific states.

Several aspects of the model regulations that states may need to adjust to better reflect the needs of their patient populations and provider availability include:

- Minimum Patient Cases to Demonstrate Ongoing Proficiency: The model regulations provide case numbers to
 maintain pediatric sedation and general anesthesia permits. However, these numbers may not be reflective of
 the volume of pediatric cases in your state. States may adjust the minimum case requirement to ensure access to
 care while maintaining competency.
- 2. Continuing Education (CE) Hours: The CE requirements outlined in the model regulations serve as a baseline but may be modified to reflect the availability of courses, the needs of local practitioners, and the specific nature of sedation and anesthesia training relevant to the patient demographics in states, while maintaining patient safety. For example, practitioners who focus on pediatric sedation may benefit from targeted CE requirements that are more directly applicable to their patient population while balancing the required hours with overall CE requirements placed on practitioners.
- 3. **Non-dental personnel requirements:** Our organizations understand that states vary greatly in their requirements and scope of practices for non-dental providers involved in the delivery of sedation or anesthesia in dental

offices. Requirements placed on offices utilizing physician anesthesiologists and/or CRNAs along with dental assistant support should be in line with state norms and generally acceptable practice.

We encourage states to use the model regulations as a framework rather than a rigid mandate. A tailored approach will allow states to implement fair, effective, and enforceable regulations that best serve patients and providers alike. Please keep in mind that we firmly believe the principles outlined in this document are essential for patient safety while ensuring access to care. We remain available for further discussion and collaboration to support states in crafting regulations that enhance patient safety while recognizing the distinct needs of the state's dental professionals.

Thank you for your time and consideration.

Sincerely,

Lenny Naftalin, DDS

President

American Society of Dentist Anesthesiologists J. David Morrison, DDS

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