THE Brocker Law Firm P.A.

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Dr. Steven Hamrick, DMD
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Re: Response to public comment concerning amended sedation definitions in 21 NCAC 16Q .0101(39)

Dear Dr. Hamrick:

I am counsel to the North Carolina Board of Dental Examiners and the Board has asked that I reply to your public comment, which the Board received on June 28, 2017. The Board wanted to respond and address the concerns that you expressed in that letter and your prior communications, including your appearance and presentation at the sedation advisory committee meeting on June 9. The primary concern you have expressed in your public comment and prior communications is your belief that the amended definition for moderate conscious sedation in 21 NCAC 16Q .0101(39) does not permit use of the drug Propofol or Diprivan by moderate conscious sedation permit holders, such as yourself, even when being administered by a Certified Registered Nurse Anesthetist (CRNA).

The following sets forth our understanding of the arrangement or proposed arrangement that prompted your communications and inquiry. You hold a moderate sedation permit and frequently have a North Carolina licensed CRNA administer sedation drugs to your patients during your dental surgery or other procedures. The CRNA working in your office would administer Propofol while you are performing surgery or other dental procedures. The CRNA is trained in the administration of general anesthesia. The CRNA's primary responsibility is administering Propofol and is not involved in the surgery or dental procedure. According to your communications and representations, the CRNA would administer Propofol in a manner that placed the patient in a state not exceeding moderate conscious sedation and would not result in the patient entering a state of deep sedation or general anesthesia.

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As you are aware, the applicable rules concerning general anesthesia and sedation are set forth in subchapter Q of the Board's regulations. The Board's regulations generally do not reference specific drugs, including Propofol, but reference them only by definition or classification. Accordingly, none of the Board's regulations specifically reference Propofol.

The specific amended definition you reference that took effect on June 1, 2017 provides in pertinent part that:

> A moderate conscious sedation provider shall not use the following:
>
> (a) drugs designed by the manufacturer for use in administering general anesthesia or deep sedation; or
> (b) drugs contraindicated for use in moderate conscious sedation.

21 NCAC 16Q .0101(39)

The Board's regulations require a dentist with a moderate conscious sedation permit to supervise a CRNA employed to administer moderate sedation. 21 NCAC 16Q .0302(a). The Board's amended regulations define "administer" as "to direct, manage, supervise, control, and have charge of all aspects of selection, dosage, timing, and method of delivery to the patient of any pharmacologic agent intended to reduce anxiety or depress consciousness." 21 NCAC 16Q .0101(5).

The Board's regulations anticipate that it's interpretation of the rules would require reference to other sources about the drugs at issue. Thus, the Board's response to your comment is informed by information the drug manufacture of Propofol submitted to the Federal Drug Administration (FDA) and provided on its drug product label.

For example, the FDA-approved drug insert label for Propofol/Diprivan states under the Indications and Usage section: "DIPRIVAN is an IV general anesthetic and sedation drug." One of the indications listed is for "Combined sedation and regional anesthesia," in addition to general anesthesia uses. Additionally, use of Propofol for moderate conscious sedation is not listed in the Contraindication section of the drug label. Therefore, the FDA-approved drug insert label indicates that Propofol/Diprivan is not strictly limited to use for general anesthesia nor is it contraindicated for use in moderate sedation in all circumstances.

The FDA-approved drug insert label and the package warning label for Propofol, however, contain some essential conditions on its use and administration. For example, the package warning label on Propofol provides that it: "Should be administered only by persons trained in the administration of general anesthesia and not involved in the conduct of the surgical/diagnostic procedure." The package warning label further provides: "Sedated patient should be continuously monitored, and facilities for maintenance of a patent airway, providing artificial ventilation, administering supplemental oxygen, and instituting cardiovascular resuscitation must be immediately available." Therefore, the FDA-approved drug insert label and the drug package warning label for Propofol set forth critical restrictions and conditions for its use.

Based on the above stated facts and analysis, and assuming the above essential restrictions and conditions have been met, the Board does not believe that the administration of Propofol/Diprivan by a CRNA in the manner set forth by your comments and communications violates the Board's amended rules, including 21 NCAC 16Q .0101(39). In responding to your public comment and related communications, the Board is relying upon its understanding of the above facts that you provided, as set forth in the second paragraph of this letter, and also that all the above essential conditions noted herein have been satisfied.

It is critical to note that different facts likely could result in a different conclusion. For example, it would violate the Board's regulations if a patient being administered Propofol by a CRNA, under the supervision of a moderate sedation permit holder, was induced into deep sedation or general anesthesia because the dentist does not hold a permit for deep sedation or general anesthesia. See 21 NCAC 16Q .0201(a). The dentist permit holder is legally required to supervise the CRNA under the Dental Practice Act. N.C. Gen. Stat. § 90-29(b)(6). Accordingly, it is the responsibility of the dentist supervising a CRNA to ensure that the patient does not exceed a level of moderate conscious sedation and to be sufficiently trained to determine whether that level has been exceeded. 21 NCAC 16Q .0301(b). Failure to do so would violated the Board's regulations.

Additionally, nothing in this response to your comment is intended to state or imply that a dentist holding a moderate conscious sedation permit is allowed by the Board's rules to administer Propofol directly to a patient. Unlike a CRNA, the dentist moderate sedation permit holder has not been trained and qualified to administer general anesthesia. Therefore, a dentist moderate conscious sedation permit holder directly administering Propofol to a patient appears contrary to the package warning label against such use.

I hope that this response to your comment adequately addresses your concerns.

Sincerely,

Douglas J. Brocker