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DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

TITLE 68: PROFESSIONS AND OCCUPATIONS

CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1220

ILLINOIS DENTAL PRACTICE ACT

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**AUTHORITY:** Implementing the Illinois Dental Practice Act [225 ILCS 25] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15(7)].

**SOURCE:** Rules and Regulations for the Administration and Enforcement of the Provisions of the Illinois Dental Practice Act, effective August 16, 1967; amended at 3 Ill. Reg. 16, p. 21, effective April 21, 1979; amended at 3 Ill. Reg. 42, p. 266, effective October 3, 1979; codified at 5 Ill. Reg. 11028; emergency amendment at 6 Ill. Reg. 916, effective January 6, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 4174, effective May 24, 1982; amended at 6 Ill. Reg. 7448, effective June 15, 1982; emergency amendment at 7 Ill. Reg. 8952, effective July 15, 1983, for a maximum of 150 days; emergency expired December 12, 1983; amended at 8 Ill. Reg. 15610, effective August 15, 1984; amended at 10 Ill. Reg. 20725, effective December 1, 1986; transferred from Chapter I, 68 Ill. Adm. Code 220 (Department of Registration and Education) to Chapter VII, 68 Ill. Adm. Code 1220 (Department of Professional Regulation) pursuant to P.A. 85-225, effective January 1, 1988, at 12 Ill. Reg. 2926; amended at 13 Ill. Reg. 4191, effective March 16, 1989; amended at 13 Ill. Reg. 15043, effective September 11, 1989; amended at 17 Ill. Reg. 1559, effective January 25, 1993; emergency amendment at 17 Ill. Reg. 8309, effective May 21, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 15890, effective September 21, 1993; amended at 17 Ill. Reg. 21492, effective December 1, 1993; amended at 19 Ill. Reg. 6606, effective April 28, 1995; amended at 21 Ill. Reg. 378, effective December 20, 1996; emergency amendment at 22 Ill. Reg. 2332, effective January 8, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 10574, effective June 1, 1998; amended at 22 Ill. Reg. 14880, effective July 29, 1998; amended at 23 Ill. Reg. 7294, effective June 10, 1999; amended at 24 Ill. Reg. 13992, effective August 31, 2000; amended at 25 Ill. Reg. 10901, effective August 13, 2001; amended at 26 Ill. Reg. 18286, effective December 13, 2002; amended at 30 Ill. Reg. 8574, effective April 20, 2006; emergency amendment at 30 Ill. Reg. 12999, effective July 18, 2006, for a maximum of 150 days; amended at 30 Ill. Reg. 19656, effective December 18, 2006; amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_ .

SUBPART B: DENTAL HYGIENIST

**Section 1220.200 Application for Licensure**

An applicant for licensure as a dental hygienist shall file an application, on forms supplied by the Division, that shall include:

- a) Certification of successful completion of 2 academic years of credit from a dental hygiene program approved by the Commission on Dental Accreditation of the American Dental Association;

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- b) Proof that the applicant has passed the National Dental Hygienist Board Examination given by the Joint Commission on National Dental Examinations and has been issued a National Board Certificate, mailed to the Division by the Joint Commission. In order to be successful, a grade of at least 75 is required;
- c) Proof of successful completion of an examination pursuant to Section 1220.220(a) received directly from the testing entity;
- d) A current certification in Basic Life Support for Healthcare Providers (BLS), or its equivalent, cardiopulmonary resuscitation from the American Red Cross, the American Heart Association or an equivalent agency or a statement from a licensed physician indicating that the applicant is physically disabled and unable to obtain certification;
- e) Certification, on forms provided by the Division, from the state in which an applicant was originally licensed and is currently licensed, if applicable, stating:
  - 1) The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and
  - 2) Whether the file on the applicant contains any record of disciplinary actions taken or pending;
- f) The required fee set forth in Section 1220.415(a)(3).

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.220 Dental Hygiene Examination**

- a) The Division, upon recommendation of the Board, shall accept the American Dental Hygiene Licensing Examination (~~ADHLEX~~~~ADLEX~~) developed by the American Board of Dental Examiners, Inc. (ADEX) for licensure. The passing score accepted by the Division shall be the passing score established by the testing entity. Dental hygiene licensure candidates can view and download a copy of the Candidate's Manual online at [www.nerb.org/manual.htm](http://www.nerb.org/manual.htm) or [www.crds.org/dental.htm](http://www.crds.org/dental.htm).
- b) The Division, upon recommendation from the Board, shall also accept the following examinations for licensure if administered and passed in their entirety prior to October 1, 2006:

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- 1) The North East Regional Board (NERB) with a passing score of 75 or better on each part of the examination. Beginning July 1, 1998, the passing score accepted by the Division shall be the passing score established by the testing entity;
  - 2) The Central Regional Dental Testing Service (CRDTS) Examination after January 1, 1988, with a passing score of 75 prior to May 1993. Beginning in May 1993 a passing score of 70 or better on each part of the examination shall be accepted for licensure. Beginning July 1, 1998, the passing score accepted by the Division shall be the passing score established by the testing entity. Beginning July 1, 2002, the passing score on the examination shall be 75;
  - 3) The Southern Regional Testing Agency, Inc. (SRTA) Examination after January 1, 1991, with a passing score of 75% or better on each part of the examination. Beginning July 1, 1998, the passing score accepted by the Division shall be the passing score established by the testing entity; or
  - 4) The Western Regional Examination Boards (WREB) Examination taken after May 1, 1998, with a passing score as established by the testing entity.
- c) Retake requirements shall be that of the testing entity.
  - d) The applicant shall have examination scores submitted to the Division directly from the reporting entity.
  - e) The Division will only accept examinations that have been completed in the 5 years prior to submission of the application, if never licensed in another jurisdiction.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.240 Prescribed Duties of Dental Hygienists**

- a) Dental hygienists may perform the operative procedure of dental hygiene, consisting of oral prophylaxis procedures.
- b) Dental hygienists may perform dental health education functions and may record case histories and oral conditions observed.

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- c) Dental hygienists may perform all procedures that may be performed by an appropriately trained dental assistant.
- d) Dental hygienists shall not perform those procedures that constitute the practice of dentistry as described in the Illinois Dental Practice Act. Hygienists may not perform procedures that require the professional judgment and skill of a dentist. Such prohibited procedures include, but shall not be limited to, the following:
  - 1) Making denture adjustments.
  - 2) Condensing or carving amalgam restorations.
  - 3) Placing and finishing composite restorations.
  - 4) Taking final impressions for the fabrication of prosthetic appliances, crowns, bridges, inlays, onlays or other restorative or replacement dentistry.
  - 5) Permanently cementing permanent crowns or bridges.
  - 6) Permanently re-cementing permanent crowns or bridges that have come loose.
- e) Dental hygienists may administer and monitor nitrous under the following conditions:
  - 1) The dental hygienist functions under the supervision of the dentist who must remain~~remains~~ in the facility;
  - 2) The dental hygienist may administer (start the flow of) nitrous oxide to the patient and control the induction of the gas, so that the patient is at a level of analgesia not anesthesia;
  - 3) The dental hygienist may remove the patient from nitrous oxide when the hygiene procedures have been completed; ~~and~~
  - 4) The dental hygienist is responsible for obtaining proof of certification, validating completion of a 12 hour course relative to nitrous oxide analgesia and submitting certification to the dentist of valid completion of

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the required course. Such course shall have been completed no earlier than December 31, 1994.

A dental hygienist who completed the 12 hour course shall complete an additional 2 hour course in nitrous oxide analgesia administration. The dental hygienist, who has not completed the 12 hour course, shall complete an approved course of 14 hours relative to the administration and monitoring of nitrous oxide analgesia and submit certification of successful completion to the dentist. Such course shall have been completed no earlier than January 1, 1998.

An individual who graduated from an approved dental hygiene program after January 1, 1998 that contained nitrous oxide analgesia administration and monitoring in the curriculum shall not be required to complete the 14 hour course upon proof to the dentist of the required curriculum. The dental hygienist, who has not completed the 12 or 14 hour course, shall complete an approved 6 hour course relative to the administration and monitoring of nitrous oxide analgesia and submit certification of successful completion to the dentist. Such course shall be completed within 18 months of the passage of these Rules. Proof of nitrous oxide analgesia education shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental hygiene program approved by the Division pursuant to Section 1220.250;:-

- 5) The dental hygienist must maintain Basic Life Support for Healthcare Providers certification or its equivalent, which will be in addition to the required courses.
- f) Dental hygienists may assist in the provision of moderate sedation (conscious sedation) as defined in Section 1220.500, deep sedation as defined in Section 1220.500, and general anesthesia as defined in Section 1220.500 under the following conditions:
  - 1) The dental hygienist functions under the supervision of the dentist who must remain in the facility. When the hygienist is the treatment provider while the patient is under moderate sedation (conscious sedation), deep sedation, or general anesthesia, the anesthesia permit holder must remain in the treatment room;

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- 2) The dental hygienist is responsible for obtaining proof of certification, validating completion of a course or courses totaling 12 hours or more. The course or courses shall include areas of anatomy, physiology, pharmacology, monitoring, and emergency procedures with an emphasis on airway management. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental hygiene program approved by the Division pursuant to Section 1220.250;
  - 3) If the dental hygienist has complied with the provisions set forth in (e)(4), the dental hygienist may complete an additional course or courses totaling 6 hours or more on advanced airway management and monitoring equipment in lieu of the 12 hour course as provided in this section. Proof shall be made available to the Division upon request.
  - 4) The dental hygienist must maintain Basic Life Support for Healthcare Providers (BLS) certification or its equivalent, which will be in addition to the required courses.
- g) Dental hygienists may administer local anesthetics under the following conditions:
- 1) The dental hygienist functions under the supervision of the dentist who remains in the facility.
  - 2) The dental hygienist is responsible for obtaining proof of certification, indicating successful completion of a 32 hour course that contains 24 hours of lecture and 8 hours of clinical training relative to the administration of local anesthetics and submitting certification to the dentist. An individual who graduated from an approved dental hygiene program after January 1, 1999 that contained administration of local anesthetics in the curriculum shall not be required to complete the 32 hour course upon proof to the dentist of the required curriculum. Proof of completion of education shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental or a dental hygiene program approved by the Division pursuant to Section 1220.250. The course shall contain at a minimum the following topics:

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- A) Patient preevaluation, which includes dental and medical health history (e.g., drug interactions/anxiety/pain and a physical evaluation);
  - B) Pharmacology (e.g., drugs/types, vasoconstrictors, dosages, toxicity);
  - C) Recordkeeping;
  - D) Anatomy/Neuroanatomy/Physiology;
  - E) Armamentarium;
  - F) Techniques that include adjunctive use of topical anesthetics, mandibular block and infiltration;
  - G) Complications;
  - H) Post-operative instructions; and
  - I) Clinical experience that includes combining techniques for quadrant anesthesia and practical use of different techniques in all areas of oral cavity.
- 3) A dental hygienist who was licensed in another state and was authorized to administer local anesthesia in that jurisdiction will not be required to complete an additional course. Proof shall be submitted to the dentist and shall be made available to the Division upon request.
- h)g) The licensed dentist need not be present in the facility for a dental hygienist to perform the procedures set forth in this Section (except for the administration and monitoring of nitrous oxide, minimal sedation (anxiolysis), assisting in the provision of moderate sedation, (conscious sedation), deep sedation, and general anesthesia, as defined in Section 1220.500, and the administration of injectable local anesthetics, which must be done under the direct supervision of a dentist as outlined in subsection (e)(1)) on persons who reside in a long-term care facility licensed by the State of Illinois or a mental health or developmental disability facility operated by the Department of Human Services hospital or other similar institution and are unable to travel to a dental office because of illness or

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infirmity. The dentist shall personally examine and diagnose the patient and determine which services are necessary to be performed, which shall be contained in a written order to the hygienist. The order must be implemented within 90 days after its issuance and an updated medical history and oral inspection must be performed by the hygienist immediately prior to beginning the procedures to ensure that the patient's health has not changed in any manner to warrant a re-examination by the dentist.

- ~~i)~~ All intraoral procedures performed by a dental auxiliary, except those provided for in subsections (b) and (g), must be examined by the supervising dentist prior to the dismissal of the patient from the facility that day.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.245 Prescribed Duties of Dental Assistants**

- a) "Dental Assistant" means an appropriately trained person who, under the supervision of a dentist, provides dental services or procedures as authorized by Section 17 of the Illinois Dental Practice Act or as prescribed by this Part. "Appropriately trained" means a person who:
- 1) Has completed formal training as a condition for administering a specific service or procedure as required by the Illinois Dental Practice Act or this Part; and
  - 2) Is considered, for all other authorized or prescribed services or procedures, by the supervising dentist to be competent to render such service or procedure as a result of on-the-job training.
- b) Provided that a dental assistant is appropriately trained pursuant to this Section and is acting under the supervision and full responsibility of a dentist, a dental assistant may perform any dental service or procedure except the following:
- 1) Any and all diagnosis of or prescription for treatment of disease, pain, deformity, deficiency, injury or physical condition of the human teeth or jaws, or adjacent structures.
  - 2) Removal of, restoration of, or addition to the hard or soft tissues of the oral cavity. For purposes of this Section, coronal polishing and acid etching of a tooth surface are not considered removal of hard or soft

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tissues.

- 3) Any and all correction of malformation of teeth or of the jaws.
  - 4) Administration of anesthetics except for topical anesthetics and monitoring of nitrous oxide as specified in this Section.
  - 5) Removal of calculus from teeth.
  - 6) Taking of final impressions for the fabricating of prosthetic appliances, crowns, bridges, inlays, onlays, or other restorative or replacement dentistry.
  - 7) The operative procedure of dental hygiene consisting of oral prophylactic procedures except for coronal polishing as specified in this Section.
  - 8) Making denture adjustments.
  - 9) Condensing or carving amalgam restorations.
  - 10) Placing and finishing composite restorations.
  - 11) Permanently cementing permanent crowns or bridges.
  - 12) Permanently re-cementing permanent crowns or bridges that have come loose.
  - 13) Placement of any chemotherapeutic agent for the management of periodontal disease.
  - 14) Applying cavity bases.
  - 15) Cementing bands and/or bonding brackets.
  - 16) Performing supragingival or subgingival scaling.
  - 17) Performing pulp vitality tests.
- c) A dental assistant, who is at least 18 years of age and has 1000 hours of clinical dental assisting experience or has graduated from a dental assistant program

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accredited by the Commission on Dental Accreditation of the American Dental Association, or is a currently certified dental assistant as designated by the Dental Assisting National Board, Inc., may perform the following services and procedures, but only under the following terms and conditions:

- 1) Monitoring nitrous oxide, provided:
  - A) The dental assistant has completed an approved course of 12 hours relative to nitrous oxide analgesia and has submitted certification to the dentist of valid completion of such course. Such course shall have been completed no earlier than January 1, 1998.

The dental assistant, who has not completed the 12 hour course, shall complete an approved course or courses totaling 6 hours or more relative to monitoring nitrous oxide analgesia and submit certification of successful completion to the dentist. Such course shall be completed within 18 months of the passage of these Rules. Proof shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and have been designed by an educational institution such as a dental school, dental hygiene or dental association program or by an approved CE sponsor. The course shall~~and~~ include areas of anatomy, physiology, monitoring, pharmacology and emergency procedures with an emphasis on airway management~~dental emergencies~~. Courses being offered by approved CE sponsors, as provided for in~~approved pursuant to~~ Section 1220.440(b)(2)(N) must be preapproved by the Division prior to their initial offering and must meet the requirements set forth in this subsection (c)(1). ~~In addition to the required hours, the assistant must be currently certified in CPR;~~

- B) The dental assistant is functioning under the supervision of the dentist who must remain~~remains~~ in the facility;
- C) Only a dentist or dental hygienist qualified pursuant to Section 1220.240(e) shall administer (start the flow of) nitrous oxide to the patient and control the induction of the gas so that the patient is at a level of analgesia, not anesthesia;
- D) Only a dentist or dental hygienist qualified pursuant to Section

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1220.240(e) shall remove the patient from nitrous oxide when the dentist or dental hygienist has completed the procedures on the patient.

- E) If the dental assistant has completed a monitoring course or courses totaling 12 hours or more provided by the American Association of Oral and Maxillofacial Surgeons (AAOMS) or a similar course preapproved by the Division, the dental assistant need not complete the course hours provided in this Section. Such course shall have been completed no earlier than December 31, 2002. Proof shall be made available to the Division upon request;
  - F) The dental assistant must maintain Basic Life Support for Healthcare Providers (BLS) certification or its equivalent, which will be in addition to the required courses.
- 2) Monitoring minimal sedation (anxiolysis) as defined in Section 1220.500, moderate sedation (conscious sedation) as defined in Section 1220.500, deep sedation as defined in Section 1220.500, or general anesthesia as defined in Section 1220.500, provided:
- A) The dental assistant is responsible for obtaining proof of certification validating completion of a course or courses totaling 12 hours or more. The course or courses shall include areas of anatomy, physiology, pharmacology, monitoring, and emergency procedures with an emphasis on airway management. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental hygiene program approved by the Division pursuant to Section 1220.250.
  - B) If the dental assistant has complied with the provisions set forth in (e)(1)(a), the dental assistant shall complete an additional 6 hour course on advanced airway management and monitoring equipment in lieu of the 12 hour course as provided in this section. Proof shall be made available to the Division upon request.
  - C) If the dental assistant has completed a monitoring course or courses totaling 12 hours or more provided by the American Association of Oral and Maxillofacial Surgeons (AAOMS) or a

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similar course or courses preapproved by the Division, the dental assistant need not complete the course hours as provided in this section. Such course shall have been completed no earlier than December 31, 2002. Proof shall be made available to the Division upon request.

- D) The dental assistant is functioning under the supervision of the dentist who must remain in the facility;
- E) The dental assistant must maintain Basic Life Support for Healthcare Providers (BLS) certification or its equivalent, which will be in addition to the required courses.

3) Coronal polishing, provided:

- A) The dental assistant has completed an approved course of 6 hours relative to coronal polishing and has submitted certification of successful completion to the dentist. Such course shall have been completed no earlier than January 1, 1998. Proof shall be made available to the Division upon request. The required hours shall include a minimum of 4 hours of didactic study in areas of anatomy, physiology, pharmacology and dental emergencies and 2 hours of clinical instruction and have been provided by an educational institution such as a dental school, dental hygiene or dental assistant program or by an approved CE sponsor. Courses being offered by CE sponsors approved pursuant to Section 1220.440(b)(2)(N) must be preapproved by the Division prior to their initial offering and must meet the requirements set forth in this subsection (c)(2). The assistant must pass an examination in the didactic portion of the course and the clinical portion must contain experience on human subjects;
- B) Coronal polishing shall be limited to polishing the clinical crown of the tooth and existing restoration, supragingivally;
- C) Coronal polishing shall be limited to the use of slow speed rotary instruments using a rubber cup and/or brush polishing method. The use of air polish by dental assistants is not permitted; and
- D) A dentist shall be limited to supervising 4 dental assistants at any

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one time for the task of coronal polishing.

4)3) Pit and fissure sealant application, provided:

- A) The dental assistant has completed a course of at least 2 hours of didactic study and 2 hours of clinical instruction;
  - B) Prior to being permitted to place sealants in accord with this Section, the supervising dentist has personally observed the dental assistant ~~successfully~~ ~~suecessful~~ place 6 pit and fissure sealants;
  - C) The supervising dentist must document that the training has been completed; and
  - D) The supervising dentist is responsible for examining the patient prior to and following the placement of sealants by a dental assistant.
- d) An individual who graduated from an approved dental assisting program after January 1, 1999 that contained monitoring of nitrous oxide, coronal polishing, and sealant application in the curriculum shall not be required to complete an additional course or courses in these areas as prescribed in this Section upon proof to the dentist of having successfully completed the required curriculum.
- e) All intraoral procedures performed by a dental assistant must be examined by the supervising dentist prior to the dismissal of the patient from the facility that day.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.260 Restoration**

- a) A licensee seeking restoration of a dental hygienist license after it has expired or been placed on inactive status for less than 5 years shall have the license restored by submitting proof of ~~36~~24 hours of continuing education pursuant to Section 1220.440 within ~~3~~2 years prior to application for restoration, proof of certification in Basic Life Support for Healthcare Providers (BLS) or its equivalent ~~cardiopulmonary resuscitation~~ or a statement from a licensed physician indicating that the applicant is physically disabled and unable to obtain certification and payment of \$20 plus all lapsed renewal fees, but not to exceed

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§85. Individuals restoring a license from inactive status shall only be required to pay the current renewal fee.

- b) A licensee seeking restoration of a dental hygienist license after it has expired or been placed on inactive status for 5 years or more shall file an application, on forms supplied by the Division, together with the fees required by Section 21 of the Act, proof of ~~3624~~ hours of continuing education pursuant to Section 1220.440 within ~~32~~ years prior to application for restoration and proof of certification in BLS or its equivalent~~cardiopulmonary resuscitation~~ or a statement from a licensed physician indicating that the applicant is physically disabled and unable to obtain certification. Individuals restoring a license from inactive status shall only be required to pay the current renewal fee. The licensee shall also submit either:
- 1) Certification of lawful active practice in another jurisdiction for at least 3 of the last 5 years. The certification shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of said active practice; or
  - 2) An affidavit attesting to military service as provided in Section 16 of the Act. If an applicant applies for restoration of a license within 2 years of termination of such service, he/she shall have the license restored without paying any lapsed renewal or restoration fees.
- c) If the licensee has not maintained an active practice in another jurisdiction for over 5 years, he/she shall be required to take and pass the clinical examination as provided in Section 1220.220.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.270 Renewal**

- a) Beginning with the September 30, 2006 renewal, every dental hygienist license issued under the Act shall expire on September 30 every 3 years. The holder of a license may renew the license during the month preceding the expiration date by:
- 1) certifying on the application to completion of ~~3624~~ hours of continuing education pursuant to Section 1220.440 of this Part;

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- 2) certifying to current certification in Basic Life Support for Healthcare Providers or its equivalent cardiopulmonary resuscitation or a statement from a licensed physician indicating that the applicant is physically disabled and unable to obtain certification; and
  - 3) submitting the fee required in Section 21 of the Act.
- b) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee or to renew one's license.
  - c) Practicing or offering to practice on a license that has expired shall be considered unlicensed activity and shall be grounds for discipline pursuant to Section 23 of the Act.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

SUBPART C: DENTAL SPECIALIST

**Section 1220.335 American Board Diplomates**

- a) An applicant for dental specialist licensure as a specialist in Endodontics, Pediatric Dentistry, Periodontics, Prosthodontics, Orthodontics and Dentofacial Orthopedics, Oral Maxillofacial Radiology or Oral and Maxillofacial Surgery who is also certified as an American Board Diplomate in the specialty for which application for licensure is made shall not be required to take the examination for dental specialist licensure as provided for in Section 1220.320 of this Part. To qualify for this exemption from the Division's dental specialty examination, the American Board Diplomate must have passed both the written and oral examinations provided by the specialty board, regardless of whether American Board Diplomate status is conferred by the specialty board without passage of both examinations.
- b) American Board Diplomates applying for dental specialist licensure shall meet the requirements for specialty licensure set forth in Section 1220.310, with the exception of the examination, and shall additionally submit evidence of certification as an American Board Diplomate and proof of passage of both the written and oral examinations provided by the specialty board at time of application for licensure.

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(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

SUBPART D: GENERAL

**Section 1220.440 Continuing Education**

- a) Continuing Education Hours Requirements
  - 1) Beginning with the September 30, 2009 renewal and every renewal thereafter, each person who applies for renewal of a license as a dentist shall have completed 48 hours of continuing education (CE) relevant to the practice of dentistry during the prerenewal period.
  - 2) Beginning with the September 30, 2009 renewal and every renewal thereafter, each person who applies for renewal of a license as a dental hygienist shall have completed ~~36~~<sup>32</sup> hours of CE relevant to the practice of dental hygiene during the prerenewal period.
  - 3) A prerenewal period is the 36 months preceding September 30 of the year of the renewal.
  - 4) A renewal applicant is not required to comply with CE requirements for the first renewal following the original issuance of a dental or dental hygienist license.
  - 5) Continuing education is not required to renew a dental specialty license. The holder of a dental specialty license is, however, required to complete 48 hours to renew the dental license.
  - 6) Dentists or dental hygienist licensed in Illinois but residing in other states shall comply with the CE requirements set forth in this Section.
  - 7) Continuing education credit for hours used to satisfy the CE requirements of another state may be applied to fulfillment of the CE requirements of the State of Illinois.
- b) Approved Continuing Education/Continuing Education Sponsors
  - 1) All CE courses shall be relevant to the treatment and care of patients and

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shall be:

- A) Clinical courses in dentistry and dental hygiene; or
  - B) Nonclinical subjects that relate to the skills necessary to provide dental or dental hygiene services and are supportive of clinical services (i.e., patient management, legal and ethical responsibilities, stress management). Courses not acceptable for the purpose of this definition include, but are not limited to, estate planning, financial planning, investments and personal health.
- 2) CE credit may be earned for verifiable attendance at or participation in any courses that meet the requirements of subsection (b)(1) given by one of the following sponsors:
- A) American Dental Association and National Dental Association, its constituent and component/branch associations and the American Dental Association Continuing Education Recognition Programs;
  - B) American Dental Hygienist's Association and National Dental Hygienist's Association, its constituent and component/branch associations;
  - C) Dental programs approved by the Division as meeting minimum standards for an approved curriculum in dentistry under Section 1220.140 and dental hygiene programs approved under Section 1220.250 of this Part;
  - D) Organizations of specialties recognized by the American Dental Association and its constituent and component/branch associations, such as, but not limited to:
    - i) Oral and Maxillofacial Surgery
    - ii) Endodontics
    - iii) Pediatric Dentistry
    - iv) Prosthodontics

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- v) Orthodontics
  - vi) Periodontology;
  - vii) Oral and Maxillofacial Radiology
- E) Academy of General Dentistry, its constituent and component/branch associations and approved sponsors;
  - F) American Dental Society of Anesthesiology and its constituent and component/branch associations;
  - G) Community colleges with an approved dental hygiene program if offered under the auspices of the dental hygiene program;
  - H) A college or university accredited by an agency approved by the U.S. Office of Education or a community college approved by the Illinois Community College Board;
  - I) A hospital that has been accredited by the Joint Commission on Accreditation of Healthcare Organizations;
  - J) The American Heart Association and the American Cancer Society;
  - K) A medical school that is accredited by the American Medical Association's Liaison Committee for Medical Education;
  - L) American Medical Association (AMA), specialty medical associations/organizations, the Accreditation Council on Continuing Medical Education;
  - M) Federal and State government agencies (i.e., dental division, military dental division, Veterans' Administration, etc.); or
  - N) A person, firm or association approved by the Division in accordance with subsection (c).
- 3) CE credit may be earned for completion of an individual study course (correspondence, audio or video course) sponsored by an approved

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sponsor. Such courses shall include a test that the licensee must pass to obtain credit. No more than 50% of the required CE credit hours during a prerenewal period may be acquired through correspondence courses.

- 4) CE credit may be earned from teleconferencing courses with a moderator present given by an Illinois approved sponsor.
- 5) CE credit may be earned from courses leading to an advanced degree or specialty in dental or dental hygiene. Such courses shall be allotted CE credit at the rate of 15 CE hours for each semester hour and 10 CE hours for each quarter hour of school credit awarded.
- 6) CE credit may be earned as an instructor of continuing education courses given by approved sponsors. Credit will be applied for every hour taught and only for the first presentation of the program (i.e., credit shall not be allowed for repetitious presentations). No more than 50% of the required CE credit hours during a prerenewal period may be acquired through teaching continuing education courses.
- 7) CE credit may be earned for presenting volunteer community oral health education programs. Credit will be applied for each hour of presentation documented by the program director. No more than 2 hours of the required CE credit hours during a prerenewal period may be acquired through presentation of volunteer community oral health education programs.
- 8) ~~Hours for CPR recertification shall not be counted toward meeting CE requirements for dental hygienists.~~ 9) Continuing education hours required by a disciplinary order shall not be used to satisfy the continuing education requirements for license renewal.
- 9)10) If a renewal applicant will be earning or has earned CE hours in another jurisdiction, but is not licensed in that jurisdiction and the course is not presented by an Illinois approved sponsor, the applicant shall submit an individual program approval request form, along with a \$20 processing fee, to have the program reviewed. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (b)(1) of this Section. Applicants may seek individual program approval prior to participation in the course or program. All individual program approval requests shall be submitted prior to the

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expiration date of the license.

- c) Sponsor Application Pursuant to Subsection (b)(2)(M)
  - 1) Entities seeking approval as CE sponsors pursuant to subsection (b)(2)(M) shall file an application, on forms supplied by the Division, along with the fee set forth in Section 1220.415(a)(9). The applicant shall certify on the application the following:
    - A) That all programs offered by the sponsor for CE credit will comply with the criteria in subsection (b)(1) and all other criteria in this Section;
    - B) That the sponsor will be responsible for providing a certificate of attendance and will maintain attendance records for at least 5 years. The certificate of attendance shall contain:
      - i) The name and address of the sponsor;
      - ii) The name, address and license number of the participant;
      - iii) A brief statement of the subject matter;
      - iv) The number of hours attended in each program;
      - v) An indication of whether the program fulfills CE requirements for dentist, dental hygienist or both;
      - vi) The date and place of the program; and
      - vii) The signature of the sponsor;
    - C) That, upon request by the Division, the sponsor will submit evidence (e.g., certificate of attendance or course materials) as is necessary to establish compliance with this Section. Evidence shall be required when the Division has reason to believe that there is not full compliance with this Part and that the information is necessary to ensure compliance.
  - 2) To maintain approval as a sponsor, each sponsor shall submit to the

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Division by September 30 of each even-numbered year a renewal application, the fee set forth in Section 1220.415(b)(5) and a list of courses and programs offered within the last 24 months. The list shall include a brief description, location, date and time of each course given.

- 3) The sponsor shall be responsible for ensuring that any dentist or dental hygienist who will be performing some type of procedure as a part of a continuing education course shall have a current license in Illinois or another jurisdiction.
- d) Certification of Compliance with CE Requirements
- 1) Each renewal applicant shall certify, on the renewal application, to full compliance with the CE requirements set forth in subsection (a).
  - 2) The Division may require additional evidence (e.g., certificate of attendance, transcripts, proof of registration) demonstrating compliance with the CE requirements. It is the responsibility of each renewal applicant to retain or otherwise produce evidence of such compliance. The evidence shall be retained for at least 5 years following the renewal period in which the CE was taken.
  - 3) The Division may conduct random audits to verify compliance with CE requirements.
  - 4) When there is evidence of a lack of compliance with CE requirements, an applicant shall be notified in writing and may request a hearing before the Board. The Division may recommend that steps be taken to begin the formal disciplinary proceedings as required by Section 10-65 of the Illinois Administrative Procedure Act [5 ILCS 100/10-65].
- e) Waiver of CE Requirements
- 1) Any renewal applicant seeking renewal of the license or certificate without having fully complied with these CE requirements shall file with the Division a renewal application, a statement setting forth the facts concerning such noncompliance, a request for waiver of the CE requirements on the basis of such facts and, if desired, a request for an interview before the Board. If the Division finds from such statement or any other evidence submitted, that good cause has been shown for

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granting a waiver of the CE requirements, or any part thereof, the Division shall waive enforcement of such requirements for the renewal period for which the applicant has applied.

- 2) Good cause shall be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:
  - A) Full-time service in the armed forces of the United States of America during a substantial part of such period;
  - B) A temporary, An incapacitating illness documented by a licensed physician. A second, consecutive request for a CE waiver pursuant to this subparagraph shall be prima facie proof that the renewal applicant has a physical or mental illness, including, but not limited to, deterioration through the aging process, or loss of motor skills which results in the dentist's inability to practice dentistry with reasonable judgment, skill or safety, in violation of Subsection 23(24) of the Act, and shall be grounds for denial of the renewal or other discipline;
  - C) Temporary undueUndue hardship (e.g., prolonged hospitalization, being disabled and unable to practice dentistry or dental hygiene on a temporary basis);
  - D) ~~Being retired from practice and not performing any dental or dental hygiene services (if a dentist or dental hygienist wishes to still practice occasionally, he/she shall be required to fulfill the requirements of continuing education as he/she is actively functioning in a professional capacity, albeit infrequently); or~~
  - E) ~~Being disabled and unable to practice dentistry or dental hygiene.~~
- 3) If an interview is requested at the time the request for waiver is filed with the Division, the renewal applicant shall be given at least 20 days written notice of the date, time and place of the interview by certified mail, return receipt requested.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

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SUBPART E: ANESTHESIA PERMITS

**Section 1220.500 Definitions**

"Minimal Sedation" or "Anxiolysis or Mood Altering Sedation" means a pharmacologically induced, altered state of consciousness (altered mood; reduced anxiety) where an individual is awake but has decreased anxiety to facilitate coping skills, retaining interaction ability.

"Moderate Sedation" or "Conscious Sedation" means a pharmacologically induced depressed state of consciousness (altered consciousness; signs of sleep) under which an individual retains the ability to independently and continuously maintain an airway and respond appropriately to light tactile physical stimulation and oral verbal commands.

"Deep Sedation" means a pharmacologically induced depressed controlled state of ~~depressed~~ consciousness, accompanied by partial loss of protective reflexes, including the inability to respond purposefully to oral commands. The purposeful response to painful stimulation is maintained. Cardiovascular function is usually maintained verbal command, produced by a pharmacologic method.

"General Anesthesia" means a pharmacologically induced controlled state of unconsciousness accompanied by a partial or complete loss of protective reflexes, including the inability to independently maintain an airway and respond purposefully to painful physical stimulation or oral commands verbal command, produced by a pharmacologic method.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.505 Minimal Sedation (Anxiolysis) in the Dental Office Setting**

- a) Minimal sedation (anxiolysis) Anxiolysis or mood altering sedation includes the prescription or administration of a pharmacologic anxiolytic anxiolysis either with or without concomitant concomitant use of nitrous oxide dental analgesia. The drugs and/or techniques used must carry a margin of safety wide enough never to render a depressed level of consciousness beyond minimal sedation.
- b) No permit is required beyond the D.D.S. or D.M.D. degrees.
- c) Minimal monitoring of the patient is to be by clinical observation and

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appropriately documented in the patient's record.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.510 Moderate Sedation (Conscious Sedation) in the Dental Office Setting**

- a) Moderate sedation (conscious ~~Conscious~~ sedation) includes the prescription or administration of pharmacologic~~pharmacologic~~ agents to be used for the purposes of moderate ~~conscious~~-sedation. Moderate sedation (conscious ~~Conscious~~ sedation) must be administered by an individual qualified under this Section. (See Appendix D for characteristics of levels of anesthesia.) The drugs and/or techniques used must carry a margin of safety wide enough to render unintended loss of consciousness unlikely.
- b) A licensed dentist seeking a Permit A for moderate sedation (conscious sedation) administration privileges shall file an application with the Division, on forms provided by the Division, that shall include~~includes~~:
- 1) Certification of completion of an anesthesiology training program that meets the following requirements~~; set forth in Section 1220.540(a)~~:
    - A) Include a minimum of 75 hours of didactic and clinical study that includes training in moderate sedation (conscious sedation), physical evaluation, venipuncture, advanced airway management, technical administration, recognition and management of complications and emergencies, and monitoring with additionally supervised experience in providing conscious sedation to 20 or more patients; and
    - B) Be an organized sequence of study operated by one entity and completed in less than one calendar year.
  - 2) A signed affidavit certifying that the dentist will practice in a facility properly equipped in accordance with subsection (g)~~(h)~~ of this Section for the administration of moderate sedation (conscious sedation). The facility shall be~~and~~ staffed with a supervised team that will remain in the treatment room. The team shall consist~~consists~~ of a minimum of 2 dental hygienists, dental assistants, or combination thereof~~individuals~~ per patient capable of assisting with the procedures, problems and emergencies incident to the administration of such sedation and~~, in addition to the~~

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dentist who holds the Permit A. The dentist permit holder shall remain immediately available to the patient being treated under moderate sedation (conscious sedation). All members of the anesthesia team, including the dentist, must maintain current certification in, capable of assisting with procedures, problems and emergencies incident to the administration of such sedation (e.g., Basic Life Support for Healthcare Providers (BLS) or its equivalent. BLS certification shall be in addition to the required 9 anesthesia CE hours per renewal cycle); and

- 3) Proof of current Advanced Cardiac Life Support (ACLS) certification or Pediatric Advanced Life Support (PALS) certification; and
  - 4) The required fee set forth in Section 21 of the Act.
- c) Dentists who have a current valid permit for moderate sedation (conscious sedation) issued by the Division shall be permitted to administer without additional application.
- d) ~~Dentists who need to obtain a permit will be required to complete the required training and apply for the permit by December 1, 2003.~~e) Upon review and recommendation of the Board in accordance with the standards set forth in this Section, the Division will:
- 1) Issue a moderate sedation (conscious sedation) permit (Permit A).
  - 2) Re-issue a moderate sedation (conscious sedation) permit to Permit A holders who attest to completing continuing education.
- e)f) Licensees qualified to administer deep sedation (Permit B) pursuant to Section 1220.520 may administer moderate sedation (conscious sedation) without a Permit A.
- f)g) If the accuracy, relevance or sufficiency of any submitted documentation is questioned by the Division or the Board, because of discrepancies or conflicts in information, needing further clarification, and/or missing information, additional documentation may be required and/or an on-site evaluation of the facilities, equipment and personnel may be conducted by the Division or a member of the Board's Advisory Panel.
- g)h) A properly equipped facility for the administration of moderate sedation

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(conscious sedation) shall include at minimum:

- 1) Sphygmomanometer and stethoscope;
- 2) An oxygen delivery system with full face masks and connectors appropriate to the patient population being served that is capable of delivering oxygen to the patient under positive pressure, with an emergency backup system;
- 3) Emergency drugs and equipment appropriate to the medications administered;
- 4) Suction equipment, including an emergency backup suction system;
- 5) An emergency ~~backup~~back-up lighting system that will permit the completion of any operation underway; ~~and~~
- 6) A pulse oximeter;-
- 7) Laryngoscope complete with selection of blades and spare batteries and bulbs in sizes appropriate to the patient population being served;
- 8) Advanced airway devices that would isolate the trachea and facilitate positive pressure oxygen administration in sizes appropriate for the patient population being served (e.g. endotracheal tubes or laryngeal mask airway);
- 9) Tonsillar or pharyngeal suction tips adaptable to all office outlets;
- 10) Nasal and oral airways in sizes appropriate to the patient population being served;
- 11) Defibrillator (An Automated External Defibrillator is an acceptable defibrillator);
- 12) Equipment for the establishment of an intravenous infusion;
- 13) An operating table or an operating chair that permits appropriate access to the patient and provides a firm platform for the management of cardiopulmonary resuscitation; and

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- 14) A recovery area that has available oxygen, lighting, suction, and electrical outlets. The Permit A holder shall remain with the patient until the patient retains the ability to independently and consciously maintain an airway and respond appropriately to physical stimulation and oral commands. The recovery area may be the operating theatre.
- h) The following records shall be kept during the administration of moderate sedation (conscious sedation):
- 1) Medical history of the patient and consent for administration of anesthesia prior to the performance of any procedure;
  - 2) Preoperative, intraoperative, and pre-discharge monitoring of blood pressure, pulse, respiration and oxygen saturation; a time based record shall be entered into the patient's chart;
  - 3) Drugs and dosages of these drugs used during the operative procedure, including the identification of the person administering drugs and times of their administration over the course of the procedure. Documentation of the anesthetic encounter will be consistent with currently accepted standards of anesthetic practice.
- i) The dentist who holds the Permit A shall report adverse occurrences to the Division and the Board as required by Section 1220.405.
- j) A licensed dentist shall hold Permit A in order to perform dentistry while a licensed certified nurse anesthetist administers moderate sedation (conscious sedation). A nurse anesthetist for purposes of this Section is a licensed certified nurse anesthetist who holds a license as an advanced practice nurse under the ~~Nurse Illinois Nursing and Advanced Practice Nursing Act~~ [225 ILCS 65]. The dentist shall enter into a written practice agreement with the nurse anesthetist in accordance with Section 15-25 of the ~~Nurse Illinois Nursing and Advanced Practice Nursing Act~~ and 68 Ill. Adm. Code ~~1300.1305~~.
- k) Proof of 9 4-hours of continuing education per renewal cycle in sedation techniques, including medications and recognition and management of complications and emergencies, is required for renewal of Permit A.
- l) A treating dentist does not need to hold Permit A to perform dentistry when

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another dentist, who holds Permit A or Permit B, or a physician assists the treating dentist by administering moderate sedation (conscious sedation). Physician for purposes of this Section means a physician who is licensed to practice medicine in all of its branches under the Medical Practice Act [225 ILCS 60] and is authorized to provide anesthesia services in a licensed hospital or licensed ambulatory surgical treatment center or is a Board certified anesthesiologist. The treating dentist shall be prepared to provide affidavits to the following if requested by the Division:

- 1) ~~Proof of Basic Life Support (BLS) training;~~ 2) That the facility used for sedation meets the criteria of subsection (f)(g) of this Section;
- ~~2)3)~~ 3) That the dentist shall staff the facility with a supervised team that includes a minimum of 32 individuals ~~(in addition to the provider sedating)~~ per patient. The team shall be composed of 1 dental hygienist or dental assistant capable of assisting with procedures, problems and emergencies incident to the administration of such sedation; the treating dentist; and the physician or a dentist who holds a Permit A or B providing the anesthesia services. All members of the team, including the treating dentist (non Permit holder) must maintain current (e.g., BLS certification or its equivalent).
- 3) In addition, the dentist shall report adverse occurrences to the Division as set forth in Section 1220.405 and accept the responsibility to verify the certification and licensure of any licensed provider present during the moderate sedation (conscious sedation) of a patient who is receiving dental care; and-
- m) A dentist holding a Permit A shall maintain current Advanced Cardiac Life Support (ACLS) certification or Pediatric Advanced Life Support (PALS) certification. ACLS or PALS certification shall be in addition to the required 9 hours of anesthesia CE per renewal cycle.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.520 Deep Sedation and General Anesthesia in the Dental Office Setting**

Deep sedation and general anesthesia must be administered by an individual qualified under this Section. (See Appendix D for characteristics of levels of anesthesia.)

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- a) A licensed dentist seeking a permit to administer deep sedation or general anesthesia shall make application to the Division, on forms provided by the Division, that shall include:
- 1) Certification of meeting one or more of the following:
    - A) Completion of a minimum of 2 years of advanced training in anesthesiology ~~or related academic subjects, or its equivalent,~~ beyond the pre-doctoral level, in a training program approved by the American Dental Association, Commission on Dental Education, as outlined in Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students Part 2 of Teaching the Comprehensive Control of Pain and Anxiety in an Advanced Education Program, published by the American Dental Association, Commission Council on Dental Education, dated October 2007December 2002.
    - B) Be a diplomate of the American Board of Oral and Maxillofacial Surgery.
    - C) Have an active, approved application with the American Board of Oral and Maxillofacial Surgery to obtain diplomate status.
    - D) Have~~Has~~ a specialty license in oral and maxillofacial surgery issued by the Division.
    - D) ~~Has a current valid permit for deep sedation or general anesthesia administration issued by the Division;~~
  - 2) A signed affidavit certifying that the dentist will practice in a facility properly equipped in accordance with subsection (d) of this Section for the administration of deep sedation and general anesthesia staffed with a supervised team that includes a minimum of 2 dental hygienists, dental assistants, or combination thereof per patientindividuals, in addition to the dentist who holds the Permit B, capable of assisting with procedures, problems and emergencies incident to the administration of such sedation. All members of the anesthesia team, including the dentist must maintain current (e.g., Basic Life Support for Healthcare Providers (BLS) certification or its equivalent. BLS certification shall be in addition to the required 9 anesthesia CE hours per renewal cycle); and

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- 3) Proof of current Advanced Cardiac Life Support (ACLS) certification or Pediatric Advanced Life Support (PALS) certification; and
- 4) The required fee set forth in Section 1220.415.
- b) Upon review and recommendation of the Board in accordance with the standards set forth in this Section, the Division will issue a deep sedation or general anesthesia permit (Permit B).
- c) If the accuracy, relevance or sufficiency of any submitted documentation is questioned by the Division or the Board because of discrepancies or conflicts in information needing further clarification, and/or missing information, additional documentation may be required and/or an on-site evaluation of the facilities, equipment and personnel may be conducted by the Division or a member of the Board's Advisory Panel.
- d) A properly equipped~~Each~~ facility for the administration of where deep sedation or general anesthesia is administered shall include at a minimum be equipped with equipment specified in Section 1220.510(g) as well as the following:
  - 1) Sphygmomanometer and stethoscope;
  - 2) An oxygen delivery system with full face masks and connectors appropriate to the patient population being served that is capable of delivering oxygen to the patient under positive pressure, with an emergency backup system;
  - 3) Emergency drugs and equipment appropriate to the medications administered;
  - 4) Suction equipment, including an emergency backup suction system;
  - 5) An emergency backup lighting system that will permit the completion of any operation underway;
  - 6) Laryngoscope complete with selection of blades and spare batteries and bulbs in sizes appropriate to the patient population being served;
  - 7) Endotracheal tubes and connectors and face masks in sizes appropriate for

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the patient population being served ~~and a device capable of delivering positive pressure ventilation;~~

- ~~8)3)~~ Tonsillar or pharyngeal suction tips adaptable to all office outlets;
- ~~9)4)~~ Nasal and oral airways in sizes appropriate to the patient population being served;
- ~~10)5)~~ Device for monitoring temperature (e.g., temperature strips, thermometer);
- ~~11)6)~~ Electrocardioscope and defibrillator (An Automated External Defibrillator is an acceptable defibrillator);
- ~~12)7)~~ Pulse oximeter;
- ~~13)8)~~ Equipment for the establishment of an intravenous infusion;
- ~~9)~~ ~~Emergency drugs and equipment appropriate to the medications administered;~~
- ~~14)10)~~ An operating table or an operating chair that permits appropriate access to the patient and provides a firm platform for the management of cardiopulmonary resuscitation; and
- ~~15)11)~~ A recovery area that has available oxygen, lighting, suction, and electrical outlets. ~~The Permit B holder shall~~ patient should remain with the patient in the recovery area until the patient individual retains the ability to independently and consciously maintain an airway and respond appropriately to physical stimulation and oral commands verbal command. The recovery area may be the operating theatre; ~~and~~
- ~~12)~~ ~~An emergency back-up lighting system that will permit the completion of any operation underway.~~

- e) The following records shall be kept when administering deep sedation and general anesthesia:
  - 1) Medical history and patient evaluation prior to the performance of any procedure;

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- 2) Preoperative, intraoperative, and pre-discharge monitoring of blood pressure, pulse, respiration and oxygen saturation; a time based record shall be entered into the patient's chart;
- 3) EKG monitoring during the entire procedure;
- 4) Drugs and dosages of agents used during the operative procedure, including nitrous oxide and oxygen, and including identification of the person administering drugs and times of their administration over the course of the procedure.

Documentation of the anesthetic encounter will be consistent with currently accepted standards of anesthetic practice.

- f) The dentist who holds the Permit B shall report adverse occurrences to the Division and the Board as required by Section 1220.405.
- g) A licensed dentist shall hold a Permit B in order to perform dentistry while a licensed certified nurse anesthetist administers deep sedation or general anesthesia. A nurse anesthetist for purposes of this Section is a licensed certified nurse anesthetist who holds a license as an advanced practice nurse under the Nurse~~Illinois Nursing and Advanced Practice Nursing~~ Act [225 ILCS 65]. The dentist shall enter into a written collaborative practice agreement with the nurse anesthetist in accordance with Section ~~65-3515-25~~ of the Nurse~~Illinois Nursing and Advanced Practice Nursing~~ Act and 68 Ill. Adm. Code 13001305.
- h) Proof of 9 ~~4~~ hours of continuing education per renewal cycle in sedation techniques, including medications and recognition and management of complications and emergencies, is required for renewal of Permit B.
- i) A treating dentist does not need to hold Permit B to perform dentistry when another dentist, who holds Permit B, or a physician assists the treating dentist by administering deep sedation or general anesthesia. Physician for purposes of this Section means a physician who is licensed to practice medicine in all of its branches under the Medical Practice Act of 1987 [225 ILCS 60] and is authorized to provide anesthesia services in a licensed hospital or licensed ambulatory surgical treatment center or is a Board certified ~~an~~ anesthesiologist. The dentist shall be prepared to provide affidavits attesting to the following if requested by the Division:

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- 1) ~~Proof of Basic Life Support (BLS) training;~~ 2) That the facility used for sedation meets the criteria of subsection (d) of this Section;
- 2)3) That ~~the dentist shall staff the facility~~ ~~staffing of the deep sedation or general anesthesia is~~ with a supervised team that ~~includes~~ consists of a minimum of 3 ~~2~~ individuals per patient. ~~In, in~~ addition to the treating dentist, the team shall be composed of any 2 of the following, as appropriate: a dental hygienist or dental assistant capable of assisting with handling procedures, problems and emergencies incident to the administration of such sedation; a nurse anesthetist, a Permit B holder; and/or a physician providing the anesthesia. All members of the anesthesia team, including the treating dentist (non Permit B holder) must maintain certification in (e.g., BLS or its equivalent).
- 3) In addition, the dentist shall report severe adverse occurrences to the Division as set forth in Section 1220.405 and accept the responsibility for verifying certification and licensure of any licensed provider present during the deep sedation or general anesthesia of a patient receiving dental care.
- j) A dentist holding a Permit B shall maintain current Advanced Cardiac Life Support (ACLS) certification or Pediatric Advanced Life Support (PALS) certification. ACLS or PALS certification shall be in addition to the required 9 hours of anesthesia CE per renewal cycle.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.525 Renewal**

- a) Beginning with the September 30, 2006 renewal, every anesthesia permit issued under the Act shall expire on September 30 every 3 years. The holder of a permit may renew the permit during the month preceding the expiration date by paying the required fee in Section 1220.415 and completing the following:
  - 1) 9 ~~4~~ hours of continuing education as required in Section 1220.510(k) or 1220.520(h);
  - 2) Certification that the renewal applicant has performed at least 10 anesthesia cases per year appropriate to the Permit held. If the permit holder has not performed at least 10 cases per year prior to the expiration

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of the renewal period, his or her application may be reviewed by the Division to determine whether the applicant is still capable of administering anesthetics with requisite competency. Where the Division determines that the applicant is no longer qualified, the license shall automatically expire and the applicant will need to restore pursuant to Section 1220.560.

- 3) Certification that the renewal applicant has held at least semi-annual emergency drills with staff that participates in Permit A or B related activities. These drills shall consist of the staff actively going through simulated emergencies which may occur during the administration of anesthesia. It is incumbent upon the permit holder to design the emergency drills to ensure adequate preparation of staff in the case of a real emergency. Documentation of the semi-annual drills shall be provided to the Division upon request.
- b) No anesthesia permit shall be renewed if the dental license of the permit holder is expired, revoked, suspended or otherwise subject to discipline under Section 23 of the Act.
- c) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee or to renew one's license.
- d) Certification of Anesthesia Cases
  - 1) Each renewal applicant shall certify, on the renewal application, that the renewal applicant has performed at least 10 anesthesia cases per year appropriate to the Permit held.
  - 2) The Division may require additional evidence demonstrating compliance. It is the responsibility of each renewal applicant to retain or otherwise produce evidence of compliance. The evidence shall be retained by the licensee for at least 5 years following the renewal period in which the anesthesia cases were performed.
  - 3) The Division may conduct random audits to verify compliance.
  - 4) When there is evidence of a lack of compliance, an applicant shall be notified in writing and may request a hearing before the Board. The

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Division may recommend that steps be taken to begin the formal disciplinary proceedings as required by Section 10-65 of the Illinois Administrative Procedure Act [5 ILCS 100/10-65].

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.530 Anesthesia Review Panel (~~Repealed~~)**

- a) The Director may appoint an Anesthesia Review Panel that shall consist of six members.
- b) The members shall meet the following minimum requirements:
  - 1) Each member shall be a licensed dentist in the State of Illinois whose license is active and in good standing;
  - 2) Three members shall hold an active Permit A;
  - 3) Three members shall hold an active Permit B;
- c) The Panel shall:
  - 1) Meet only at the direction of the Director;
  - 2) Be reimbursed for all legitimate, necessary and authorized expenses incurred in attending the meetings of the panel;
  - 3) Review Permit A and Permit B applications at the request of the Director;
  - 4) Recommend to the Director the eligibility of applicants;
  - 5) Recommend to the Director when an on-site inspection may be necessary and conduct inspection with a Board member present;
  - 6) Evaluate results of on-site inspection and make recommendation to the Director as to eligibility of applicants; and
  - 7) Advise the Director in regard to anesthesiology related matters that include mortality and morbidity statistics.

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d) Each Panel member shall serve a 4 year term and may be appointed once.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.540 Approved Programs in Anesthesiology (Repealed)**

a) ~~Conscious Sedation in the Dental Office Setting~~

~~The anesthesiology training program shall:~~

- ~~1) Include a minimum of 60 hours of didactic and clinical study that includes training in conscious sedation (both light and deep), physical evaluation, venipuncture, technical administration, recognition and management of complications and emergencies, and monitoring with additionally supervised experience in providing conscious sedation to 20 or more patients; and~~
- ~~2) Be an organized sequence of study operated by one entity and completed in less than one calendar year.~~

b) ~~Deep Sedation or General Anesthesia~~

- ~~1) An approved training program in anesthesiology to administer deep sedation or general anesthesia shall be 2 calendar years that includes a minimum of 200 hours of didactic and 2,000 hours of clinical training.~~
- ~~2) The didactic aspect may precede the clinical training or it may be offered in an integrated manner. The trainee must receive the equivalent of 2 calendar years, on a consecutive basis, not to exceed 3 years, as the minimum required to provide an acceptable clinical and didactic program in comprehensive pain control. Both lectures and seminars are appropriate for providing the didactic training. The didactic subject matter shall include:
  - A) ~~The basic sciences (physiology, pharmacology, anatomy, biochemistry). The instruction shall not be based only on its relationship to a limited technical practice of anesthesia but shall also provide the opportunity for a thorough understanding of the processes of respiration, circulation, kidney function and liver function;~~~~

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- ~~B) Patient evaluation (physical diagnosis and internal medicine);~~
  - ~~C) Psychological aspects of human behavior and management of pain;~~
  - ~~D) Techniques of pain control, including physical, psychological and pharmacological methods; and~~
  - ~~E) Management of related emergencies and complications.~~
- 3) ~~If the advanced training is obtained in a hospital based residency in anesthesiology, the training shall be restricted to those hospitals having anesthesia training programs approved by the Council on Medical Education of the American Medical Association or American Dental Association or American Dental Society of Anesthesiology.~~
- e) ~~An anesthesiology training program shall be based in a university or hospital.~~

(Source: Repealed at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

**Section 1220.560 Restoration of Permits**

- a) A licensee seeking restoration of a permit after it has expired for 5 years or less shall have the permit restored upon payment of \$20 plus the current renewal fee. The licensee shall also submit proof of:
  - 1) for permits expired less than 12 months, performing at least 10 anesthesia cases per year prior to the expiration of the permit, as appropriate to the Permit being restored. If the restoration applicant has not performed at least 10 cases per year prior to the expiration of the permit, he or she must submit proof of at least 10 anesthesia cases directly supervised by a dentist who holds the same permit as the one being restored. Anesthesia cases performed within 12 months prior to the expiration of the Permit may be used in compiling a total of 10 cases.
  - 2) for permits expired more than 12 months but less than 5 years, remedial training as referenced in subsection (b)(3) or (b)(4) as appropriate to the Permit being restored.
- b) A licensee seeking restoration of a permit after it has expired for more than 5

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years shall file an application, on forms supplied by the Division, together with the fees required by Section 1220.415. The licensee shall also submit:

- 1) Sworn evidence of lawful active practice in another jurisdiction. Such evidence shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of said active practice; or
  - 2) An affidavit attesting to military service as provided in Section 16 of the Act. If an applicant applies for restoration of the permit within 2 years after termination of such service, he/she shall have the permit restored without paying any lapsed renewal or restoration fees; or
  - 3) For Permit A restoration, proof of the training set forth in Section 1220.540(a) taken 2 years prior to application; or
  - 4) For Permit B restoration, proof of the training set forth in Section 1220.520(a)(1)~~1220.540(b)~~ taken 2 years prior to application.
- c) When proof of remedial training is provided, the permit shall not be restored unless and until the Board has reviewed and approved the training. The Board may require the renewal applicant to obtain additional training where it finds that the training completed was not sufficient.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

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**Section 1220.APPENDIX D Characteristics of Levels of Anesthesia\***

Factors	<u>Minimal Sedation/Anxiolysis</u> (No Permit required)	<u>Moderate/Conscious Sedation</u> (Permit A)	Deep Sedation (Permit B)	General Anesthesia (Permit B)
Goal	Decrease anxiety; facilitate coping skills	Decrease or eliminate anxiety; facilitate coping skills	Eliminate anxiety; coping skills overridden	Eliminate cognitive, sensory and skeletal motor activity
Definition	Pharmacologically induced, altered state of consciousness (altered mood; reduced anxiety) where an individual is awake but has decreased anxiety to facilitate coping skills, retaining interaction ability <u>Ventilatory and cardiovascular functions are unaffected</u>	Pharmacologically induced <del>depressed</del> state of <del>depressed</del> consciousness (altered consciousness, signs of sleep) under which an individual retains the ability to independently and continuously maintain an airway and respond appropriately to <u>light tactile<del>physical</del> stimulation and oral<del>verbal</del> commands</u>	Pharmacologically induced controlled state of depressed consciousness, accompanied by partial loss of protective reflexes, including inability to respond purposefully to <u>oral commands</u> . <u>The purposeful response to painful stimulation is maintained.</u> <u>Cardiovascular function is usually maintained</u> <del>verbal command</del>	Pharmacologically induced controlled state of unconsciousness accompanied by a partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to <u>painful<del>physical</del> stimulation or oral commands</u> <del>verbal command</del>

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Personnel	1 (treating dentist)	3 (treating dentist with Permit A; trained person to monitor patient or nurse anesthetist; trained assistant) OR 3 (treating dentist w/o Permit A/B; physician or dentist with Permit A/B; trained assistant)	3 (treating dentist with Permit B; trained person to monitor patient or nurse anesthetist; trained assistant) OR 3 (treating dentist w/o Permit B; physician or dentist with Permit B; trained assistant)	3 (treating dentist with Permit B; trained person to monitor patient or nurse anesthetist, trained assistant) OR 3 (treating dentist w/o Permit B; physician or dentist <del>or dentist</del> with Permit B; trained assistant)
Monitoring	Clinical observation and monitoring as appropriate	Preoperative, intraoperative and pre-discharge monitoring of BP, pulse, respiration and oxygen saturation	Preoperative, intraoperative, and pre-discharge monitoring of BP, pulse, respiration and oxygen saturation, EKG monitoring, <u>Defibrillator</u> ; <del>defibrillator</del> required	Preoperative, intraoperative, and pre-discharge monitoring of BP, pulse, respiration and oxygen saturation, EKG monitoring, <u>Defibrillator</u> ; <del>defibrillator</del> required

\*Chart adapted from American Academy of Pediatric Dentistry, Reference Manual 2000-2001, Templates of Definitions and Characteristics for Levels of Sedation and General Anesthesia and the American Dental Association, Guidelines for the Use of Sedation and General Anesthesia by Dentists. October, 2007.

(Source: Amended at 33 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)