



January 30, 2023

Alan Felsenfeld, DDS, Board President
Tracy Montez, Ph.D., Executive Officer
Dental Board of California
2005 Evergreen Street, Suite 1550
Sacramento, CA 95815

RE: RDAEF Anesthesia Proposal

Dear Dr. Felsenfeld and Ms. Montez:

The recently reviewed proposal to expand the Registered Dental Assistants in Extended Functions (RDAEF) scope of practice to include local anesthesia and nitrous oxide-oxygen to patients. The California Dental Association supports the safe and effective delivery of care within the scope of practice of one's foundational training. As such, the CDA has significant concerns with the proposal to allow RDAEFs the scope of administering additional local anesthesia and nitrous oxide-oxygen to patients. The eligible dental team members who currently provide this level of sedation have the appropriate level of foundational knowledge in anatomy, pharmacology and anesthesia. Expanding RDAEF scope of practice to include local anesthesia and nitrous oxide-oxygen to patients would not facilitate better access to health care, could potentially create barriers to RDAEF licensure and compromise patient safety.

Access to Care

The proposal for RDAEFs to offer local anesthesia and nitrous oxide-oxygen sedation does not facilitate better access to care, as the patient will already be in the presence of a registered dental hygienist or dentist to perform the rest of the procedure. The current proposal fails to show a need for expanded scope of practice by RDAEFs to deliver local anesthesia and nitrous oxide-oxygen sedation, and patient safety can be compromised if this scope is expanded.

If RDAEF training were to include the foundational education and training to work at this scope, both the cost of training and time to complete competencies would create new barriers to obtaining licensure for no measurable return in patient care accessibility. This proposal could potentially impede access to care if fewer RDAEFs complete their training due to the new foundational education necessary for local anesthesia and nitrous oxide sedation training.

Foundational Knowledge

RDAEF courses do not include the in-depth anatomy and physiology foundational coursework that dentists and registered dental hygienists complete to safely administer local anesthesia. To provide safe and effective local anesthesia and nitrous oxide-oxygen sedation, both registered dental hygienists and licensed dentists are required to take prerequisite courses to set a foundation for their scope of practice and appropriate delivery of sedation:

1. Prerequisite courses for dental and dental hygiene school include chemistry, organic chemistry, biochemistry, anatomy, physiology and microbiology.
2. Required dental hygiene courses include head and neck anatomy, pharmacology and pain management courses with 56 lab hours and anesthesia and nitrous oxide-oxygen sedation practice on student partners. In total, there are at least 72 injections that dental hygiene students must deliver during their coursework.
3. Required dental school courses include oral anatomy, oral pathology and oral histology.
4. Licensed dentists participate in continuing education in local anesthesia with continuing education in local anesthesia available for license renewal. The Commission of Dental Accreditation (CODA) [Standard 2-24](#) part e requires local anesthesia as a competency of general dentistry graduation for doctoral licensure eligibility.

Patient Safety

Although local anesthesia is regarded as a relatively safe procedure, similarly to the provision of any level of anesthesia, it is not without risk. According to a 2016 [Pediatric Dental Anesthesia Report](#) from the Dental Board of California, between 2010-2015, three deaths and nine hospitalizations occurred for pediatric patients who were provided local anesthesia under the care of a licensed dentist. This report is limited to pediatric report statistics; adverse event statistics are currently unknown for adult patients. Patient safety is optimized when the most highly trained members of the dental team are providing care.

Conclusion

An RDAEF does not have the foundational knowledge to safely provide local anesthesia and nitrous oxide-oxygen sedation. Adding foundational knowledge coursework will increase the time and costs to obtain licensure with no measurable benefit to care access. Both dentists and registered dental hygienists have

demonstrated mastery of both foundational knowledge and practice of local anesthesia and nitrous oxide-oxygen sedation for licensure. In a setting where local anesthesia and nitrous oxide-oxygen would be offered to a patient, a dentist or registered dental hygienist would be present for the procedure, and therefore, the most appropriate provider. For the sake of patient safety and care access, we strongly recommend that DBC does not permit RDAEFs to perform sedation duties.

Should you have any questions about CDA's concerns, please contact Mary McCune, Policy Director at mary.mccune@cda.org.

Sincerely,

A handwritten signature in black ink that reads "Mary McCune". The signature is written in a cursive, slightly slanted style.

Mary McCune
Policy Director
California Dental Association