

**State of California
Office of Administrative Law**

In re:
Dental Hygiene Committee of California

**NOTICE OF APPROVAL OF REGULATORY
ACTION**

Regulatory Action:

Government Code Section 11349.3

Title 16, California Code of Regulations

OAL File No. 2014-0620-04 S

Adopt sections: 1107

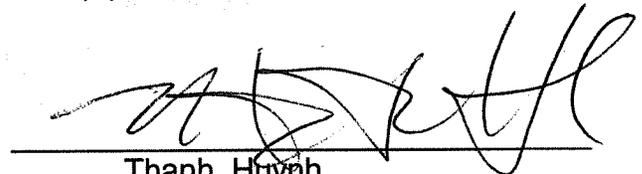
Amend sections:

Repeal sections:

In this regulatory action, the Committee is adopting section 1107 in Title 16 of the California Code of Regulations to establish the requirements for approval of educational courses in the administration of local anesthesia agents, administration of nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. The regulation also requires a course provider to issue a certificate of completion after a student achieved clinical competency of the three procedures. In addition, it prescribes an appeals process for a course provider to contest the denial or approval withdrawal of a course.

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on 8/4/2014.

Date: 8/4/2014



Thanh Huynh
Senior Attorney

For: DEBRA M. CORNEZ
Director

Original: Lori Hubble
Copy: Donna Kantner

NOTICE PUBLICATION/REGULATIONS SUBMISSION

REGULAR

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2013-0625-06	REGULATORY ACTION NUMBER 2014-0620-04S	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	

ENDORSED FILED
IN THE OFFICE OF

2014 AUG -4 PM 1:44

Debra Bowen
DEBRA BOWEN
SECRETARY OF STATE

2014 JUN 20 PM 1:34
OFFICE OF
ADMINISTRATIVE LAW

AGENCY WITH RULEMAKING AUTHORITY
Dental Hygiene Committee of California

AGENCY FILE NUMBER (if any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER 2013, 272	PUBLICATION DATE 7/5/2013

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Expanded Functions Course Approval	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)

SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT 1107
	AMEND
TITLE(S) 16	REPEAL

3. TYPE OF FILING

<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Other (Specify)		

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)
October 9 - October 24, 2013; December 17 - December 31, 2013

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify)		

7. CONTACT PERSON Donna Kantner	TELEPHONE NUMBER 916-263-1978	FAX NUMBER (Optional) 916-263-2688	E-MAIL ADDRESS (Optional) Donna.Kantner@dca.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Lori Hubble</i>	DATE 6-20-14
TYPED NAME AND TITLE OF SIGNATORY Lori Hubble, Executive Officer, Dental Hygiene Committee of California	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

AUG 04 2014

Office of Administrative Law

NOTICE PUBLICATION/REGULATIONS SUBMISSION

(See instructions on reverse)

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NOTICE		REGULATIONS	

AGENCY WITH RULEMAKING AUTHORITY

Dental Hygiene Committee of California

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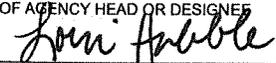
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ACTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT 1107		
	AMEND		
TITLE(S) 16	REPEAL		
3. TYPE OF FILING			
<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §511349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) <input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §511346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only			
4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1) October 9 - October 24, 2013; December 17 - December 31, 2013			
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY <input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) <input type="checkbox"/> Fair Political Practices Commission <input type="checkbox"/> State Fire Marshal <input checked="" type="checkbox"/> Other (Specify) <u>Denise D. Brown, Director, Department of Consumer Affairs</u>			
7. CONTACT PERSON Donna Kantner	TELEPHONE NUMBER 916-263-1978	FAX NUMBER (Optional) 916-263-2688	E-MAIL ADDRESS (Optional) Donna.Kantner@dca.ca.gov

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SIGNATURE OF AGENCY HEAD OR DESIGNEE 	DATE
TYPED NAME AND TITLE OF SIGNATORY LORI HUBBLE, Executive Officer	

Dental Hygiene Committee of California
Department of Consumer Affairs

ORDER OF ADOPTION

Adopt Section 1107 of Division 11 of Title 16 of the California Code of Regulations to read as follows:

§1107. RDH Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage

(a) Approval of Course. The Committee shall approve only those educational courses of instruction in local anesthetic, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage that continuously meet all course requirements. Continuation of approval will be contingent upon compliance with these requirements.

(1) A course in local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage is a course that provides instruction in the following duties:

(A) Administration of local anesthetic agents, infiltration and conductive, limited to the oral cavity;

(B) Administration of nitrous oxide and oxygen when used as an analgesic; utilizing fail-safe machines with scavenger systems containing no other general anesthetic agents; and

(C) Periodontal soft tissue curettage.

(2) An applicant course provider shall submit an "Application for Approval of a Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage" (DHCC SLN-01 12/2013) hereby incorporated by reference, accompanied by the appropriate fee, and shall receive approval prior to enrollment of students.

(3) All courses shall be at the postsecondary educational level.

(4) Each approved course shall be subject to review by the Committee at any time.

(5) Each approved course shall submit a biennial report "Report of a Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage" (DHCC SLN-03 09/2013) hereby incorporated by reference.

(b) Requirements for Approval. In order to be approved, a course shall provide the resources necessary to accomplish education as specified in this section. Course providers shall be responsible for informing the Committee of any changes to the course content, physical facilities, and faculty, within 10 days of such changes.

(1) Administration. The course provider shall require course applicants to possess current certification in Basic Life Support for health care providers as required by Title 16, Division 10, Chapter 1, Article 4, Section 1016 (b)(1)(C) of the California Code of Regulations in order to be eligible for admission to the course, and one of the following:

(A) Possess a valid active license to practice dental hygiene issued by the Committee; or,

(B) Have graduated from an educational program for dental hygienists approved by the Commission on Dental Accreditation or an equivalent accrediting body approved by the Committee; or

(C) Provide a letter of certification from the dean or program director of an educational program accredited by the Commission on Dental Accreditation that the course applicant is in his or her final academic term and is expected to meet all educational requirements for graduation. The school seal must be affixed to the letter with the name of the program.

(2) Faculty. Pre-clinical and clinical faculty, including course director and supervising dentist(s), shall:

(A) Possess a valid, active California license to practice dentistry or dental hygiene for at least two (2) years immediately preceding any provision of course instruction;

(B) Provide pre-clinical and clinical instruction only in procedures within the scope of practice of their respective licenses.

(C) Complete an educational methodology course immediately preceding any provision of course instruction and every two years thereafter; and,

(D) Be calibrated in instruction and grading by the course provider.

(3) Facilities and Equipment. Pre-clinical and clinical instruction shall be held at a physical facility. Physical facilities and equipment shall be maintained and replaced in a manner designed to provide students with a course designed to meet the educational objectives set forth in this section. A physical facility shall have all of the following:

(A) A lecture classroom, a patient clinic area, a sterilization facility and a radiology area for use by the students.

(B) Access for all students to equipment necessary to develop dental hygiene skills in these duties.

(C) Infection control equipment shall be provided according to the requirements of CCR Title 16, Division 10, Chapter 1, Article 1, Section 1005.

(D) At least one complete nitrous oxide-oxygen unit shall be provided for each six (6) students enrolled in the course and shall include a fail-safe flowmeter, functional scavenger system and disposable or sterilizable nasal hoods for each laboratory partner or patient. All tubing, hoses and reservoir bags shall be maintained and replaced at regular intervals to prevent leakage of gases. When not attached to a nitrous oxide-oxygen unit, all gas cylinders shall be maintained in an upright position, secured with a chain or in a cart designed for storage of gas cylinders.

(4) Health and Safety. A course provider shall comply with local, state, and federal health and safety laws and regulations.

(A) All students shall have access to the course's hazardous waste management plan for the disposal of needles, cartridges, medical waste and storage of oxygen and nitrous oxide tanks.

(B) All students shall have access to the course's clinic and radiation hazardous communication plan.

(C) All students shall receive a copy of the course's bloodborne and infectious diseases exposure control plan, which shall include emergency needlestick information.

(5) Clinical Education. As of January 1, 2016, each course's clinical training shall be given at a dental or dental hygiene school or facility approved by the Committee, which has a written contract for such training. Such written contract shall include a description of the settings in which the clinical training may be received and shall provide for direct supervision of such training by faculty designated by the course provider. A facility shall not include a dental office unless such office is an extramural facility of an educational program approved by the Committee.

(6) Recordkeeping. A course provider shall possess and maintain the following for a period of not less than 5 years:

(A) A copy of each approved curriculum, containing a course syllabus.

(B) A copy of completed written examinations, clinic rubrics, and completed competency evaluations.

(C) A copy of faculty calibration plan, faculty credentials, licenses, and certifications including documented background in educational methodology immediately preceding any provision of course instruction and every two years thereafter.

(D) Individual student records, including those necessary to establish satisfactory completion of the course.

(E) A copy of student course evaluations and a summation thereof.

(7) Curriculum Organization and Learning Resources.

(A) The organization of the curriculum for the course shall be flexible, creating opportunities for adjustments to and research of advances in the administration of local anesthetic, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage as provided in the section of this article on Requirements for RDH Programs.

(B) Curriculum shall provide students with an understanding of these procedures as provided in the section of this article on Requirements for RDH Programs and an ability to perform each procedure with competence and judgment.

(C) Curriculum shall prepare the student to assess, plan, implement, and evaluate these procedures as provided and in accordance with the section of this article on Requirements for RDH Programs.

(D) Curriculum shall include a remediation policy, and procedures outlining course guidelines for students who fail to successfully complete the course.

(E) Students shall be provided a course syllabus that contains:

(i) Course learning outcomes,

(ii) Titles of references used for course materials,

(iii) Content objectives,

(iv) Grading criteria which includes competency evaluations and clinic rubrics to include problem solving and critical thinking skills that reflect course learning outcomes, and

(v) A remediation policy and procedures.

(F) Students shall have reasonable access to dental and medical reference textbooks, current scientific journals, audio visual materials and other relevant resources.

(8) General Curriculum Content. Areas of didactic, preclinical and clinical instruction shall include:

(A) Indications and contraindications for all patients of:

(i) periodontal soft tissue curettage;

(ii) administration and reversal of local anesthetic agents;

(iii) nitrous oxide-oxygen analgesia agents

(B) Head and neck anatomy;

(C) Physical and psychological evaluation procedures;

(D) Review of body systems related to course topics;

(E) Theory and psychological aspects of pain and anxiety control;

(F) Selection of pain control modalities;

(G) Pharmacological considerations such as action of anesthetics and vasoconstrictors, local anesthetic reversal agents and nitrous oxide-oxygen analgesia;

(H) Recovery from and post-procedure evaluation of periodontal soft tissue curettage, local anesthesia and nitrous oxide/oxygen analgesia;

(I) Complications and management of periodontal soft tissue curettage, local anesthesia and nitrous oxide-oxygen analgesia emergencies;

(J) Armamentarium required and current technology available for local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage;

(K) Techniques of administration of maxillary and mandibular local infiltrations, field blocks and nerve blocks, nitrous oxide-oxygen analgesia and performance of periodontal soft tissue curettage;

(L) Proper infection control procedures according to the provisions of Title 16, Division 10, Chapter 1, Article 4, Section 1005 of the California Code of Regulations;

(M) Patient documentation that meets the standard of care, including, but not limited to, computation of maximum recommended dosages for local anesthetics and the tidal volume, percentage and amount of the gases and duration of administration of nitrous oxide-oxygen analgesia;

(N) Medical and legal considerations including patient consent, standard of care, and patient privacy;

(O) Student course evaluation mechanism.

(9) Specific Curriculum Content.

(A) Local anesthetic agents curriculum must include at least thirty (30) hours of instruction, including at least fifteen (15) hours of didactic and preclinical instruction and at least fifteen (15) hours of clinical instruction. Preclinical instruction shall include a minimum of two (2) experiences per injection, which may be on another student. Clinical instruction shall include at least four (4) clinical experiences per injection on four different patients, of which only one may be on another student. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltration, field block and nerve block to include

anterior superior alveolar (ASA) nerve block (infraorbital), middle superior alveolar nerve block (MSA), anterior middle superior alveolar nerve block (AMSA), posterior superior alveolar nerve block (PSA), greater palatine nerve block, nasopalatine (P-ASA) nerve block, suprapariosteal, inferior alveolar nerve block (to include Gow-Gates technique), lingual nerve block, buccal nerve block, mental nerve block, incisive nerve block and intraseptal injections. One clinical experience per injection shall be used to determine clinical competency in the course. The competency evaluation for each injection and technique must be achieved at a minimum of 75%.

(B) Nitrous oxide-oxygen analgesia curriculum must include at least eight (8) hours of instruction, including at least four (4) hours of didactic and preclinical instruction and at least four (4) hours of clinical instruction. This includes at least two (2) preclinical experiences on patients, both of which may be on another student, and at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency in the course. Each clinical experience shall include the performance of a dental hygiene procedure while administering at least twenty (20) minutes of nitrous oxide-oxygen analgesia. The competency evaluation must be achieved at a minimum of 75%.

(C) Periodontal soft tissue curettage curriculum must include at least six (6) hours of instruction, including at least three (3) hours of didactic and preclinical instruction and at least three (3) hours of clinical instruction. Education may include use of a laser approved for soft tissue curettage. This includes at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency in the course. The competency evaluation for this procedure must be achieved at a minimum of 75%.

(10) Certificate of Completion. A course provider shall issue a certificate of completion "Certification in Administration of Local Anesthesia, Nitrous Oxide-Oxygen Analgesia, and Periodontal Soft Tissue Curettage (DHCC SLN-02 09/2013), hereby incorporated by reference, only after a student has achieved clinical competency of the three procedures.

(c) Appeals.

(1) The Committee may deny or withdraw its approval of a course. If the Committee denies or withdraws approval of a course, the reasons for withdrawal or denial will be provided in writing within ninety (90) days.

(2) Any course provider whose approval is denied or withdrawn shall be granted an informal conference before the Executive Officer or his or her designee prior to the effective date of such action. The course provider shall be given at least ten days' notice of the time and place of such informal conference and the specific grounds for the proposed action.

(3) The course provider may contest the denial or withdrawal of approval by either:

(A) Appearing at the informal conference. The Executive Officer shall notify the course provider of the final decision of the Executive Officer within ten days of the informal conference. Based on the outcome of the informal conference, the

course provider may then request a hearing to contest the Executive Officer's final decision. A course provider shall request a hearing by written notice to the Committee within 30 calendar days of the postmark date of the letter of the Executive Officer's final decision after informal conference. Hearings shall be held pursuant to the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code. Or;
(B) Notifying the Committee in writing the course provider's election to forego the informal conference and to proceed with a hearing pursuant to the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code. Such notification shall be made to the Committee before the date of the informal conference.

Note Authority cited: Sections 1905, 1906, 1909, and 1944, Business and Professions Code. Reference: Sections 1905, 1909, 1917, and 1944, Business and Professions Code.



DENTAL HYGIENE COMMITTEE OF CALIFORNIA
2005 Evergreen Street Suite 1050, Sacramento, CA 95815
P (916) 263-1978 | F (916) 263-1978 | www.dhcc.ca.gov



Application for Approval of Course in
Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and
Periodontal Soft Tissue Curettage
Business & Professions Code §1909, 16 CCR §1107.

Non-Refundable Fee: \$300 (Must accompany application)

Receipt _____ RC _____
Date filed _____ \$ _____
Approved _____ Denied _____
RP# _____

Course Provider _____ Phone Number _____
Email Address _____
Name and Title of Course Director _____
Affiliated Dental Hygiene or Dental Program _____
Mailing Address of Course Provider* _____ City _____ State _____ Zip _____
Clinical Facility Address (if different from above) _____ City _____ State _____ Zip _____

*Course provider mailing address is public. If you wish to provide a P.O. Box, you must also provide a physical address and be sure to specify that the physical address is not to be used as the address of record.

Requirements for Course

A course must be approved prior to operation. Each approved course must submit a biennial report. Course records shall be subject to inspection by the Committee at any time. The Committee may withdraw approval at any time that it determines that a course does not meet the requirements of the law. Course providers must inform the Committee of any changes to course content, faculty and physical facilities within 10 days.

1. Will the course provide instruction in administration of local anesthetic agents limited to the oral cavity, administration of nitrous oxide-oxygen used as an analgesic utilizing fail-safe type machines containing no other general anesthetic agents, and periodontal soft tissue curettage? Include a copy of your curriculum.

[] Yes [] No

2. Will the course be established at or contracted with a California dental or dental hygiene school? Include your written contract and if applicable, the extramural site agreement.

[] Yes [] No

3. Course Faculty Information

Name	License Type	License #	License Expiration	Date of Teaching Educational Methodology

Course director and clinical and preclinical faculty must possess a valid, active California license for at least two years. If faculty listed above has ever been licensed in another state or territory to practice dental hygiene or dentistry, a license certification is required. Attach copies of each license and proof of education in educational methodology for all faculty and faculty calibration plan.

4. Will there be a lecture classroom, patient clinic area and radiology area for use by students? Attach a facility site map indicating each of these areas.

Yes No

5. Will all students have access to equipment necessary to develop dental hygiene skills in the duties being taught? Attach a list.

Yes No

6. Will all students have access to the hazardous waste management plan for disposal of needles, cartridges, medical waste, storage of nitrous oxide and oxygen tanks and the course's clinic and radiation hazardous communication plan? Attach a copy of both the hazardous waste management and hazardous communication plan.

Yes No

7. Will all students receive a copy of the bloodborne and infectious diseases exposure control plan, including the emergency needlestick information? Attach a copy as provided to students.

Yes No

8. Will the course clearly state curriculum subject matter, specific instruction hours in the individual areas of didactic, pre-clinical and clinical instruction, and include written course and specific instructional learning outcomes that will be accomplished within the framework of the course, including theoretical aspects of each subject as well as practical application in accordance with Title 16, California Code of Regulations §1107 and a copy be provided to students? Attach a copy of curriculum, including student evaluation mechanism and remediation policy and procedures.

Yes No

9. Will the course's duration allow a student to develop competence in administration of local anesthesia, administration of nitrous oxide-oxygen analgesia, and performance of periodontal soft tissue curettage? Attach a course schedule.

Yes No

10. Will instruction in periodontal soft tissue curettage total at least 6 hours including at least 3 hours of didactic and pre-clinical instruction and at least 3 hours of clinical instruction that includes a minimum of 3 (three) clinical experiences on three different patients of which only one may be on another student?

Yes No

11. Will instruction in the administration of local anesthetic agents total at least 30 hours, including at least 15 hours of didactic and pre-clinical and at least 15 hours of clinical instruction that includes a minimum of 2 preclinical experiences per injection, which may be on another student and 4 clinical experiences on four different patients of which only one may be on another student?

Yes No

12. Will instruction in the administration of nitrous oxide-oxygen total at least 8 hours including at least 4 hours of didactic and pre-clinical instruction and 4 hours of clinical instruction that includes a minimum of 3 clinical experiences on 3 different patients of which only one may be on another student?

Yes No

13. Specify the total number of hours for all three areas within the course that will be taught in the categories listed below:

Didactic _____ Pre-clinical _____
Clinical _____

14. Will continuing education (CE) be offered for this course? If yes, provide your California continuing education provider number below.

Yes No

Recordkeeping

15. Will you retain for at least 5 years copies of curriculum, syllabi, exams, sample test questions, clinic rubrics, copies of faculty credentials, faculty calibration plan and individual student records including evaluations and summations thereof pursuant to Title 16, California Code of Regulations §1107(b)(6)?

Yes No

16. Will each student be issued a certificate of successful completion after achievement of a minimum of 75% in each clinical competency and has been deemed competent in each of the 3 (three) procedures?

Yes No

Acknowledgement

17. Have you reviewed Business & Professions Code §1909 and Title 16, Division 11 of the California Code of Regulations?

Yes No

18. Do you agree to abide by the requirements set forth in Business & Professions Code §1909, and Title 16, Division 11 of the California Code of Regulations? Do you acknowledge that failure to do so may result in loss of course approval?

Yes No

The Committee may approve or deny approval of any course. If the Committee denies approval of a course, the reasons for denial will be provided in writing within 90 days.

Certification

I certify under the penalty of perjury under the laws of the State of California that the statements made in the application are true and correct.

Signature of Course Director or designee

Date

Printed Name of Course Director or designee

INFORMATION COLLECTION AND ACCESS

The information requested herein is mandatory and is maintained by the Dental Hygiene Committee of California, 2005 Evergreen Street, Suite 1050, Sacramento, CA 95815, Executive Officer, 916-263-1978, in accordance with Business & Professions Code, §1900 et seq. The information requested will be used to determine eligibility. Failure to provide all or any part of the requested information will result in the rejection of the application as incomplete. Each individual has the right to review his or her own personal information maintained by the agency as set forth in the Information Practices Act unless the records are exempt from disclosure. Applicants are advised that the names(s) and address(es) submitted may, under limited circumstances, be made public.

DENTAL HYGIENE COMMITTEE OF CALIFORNIA

**CERTIFICATION IN ADMINISTRATION OF LOCAL ANESTHESIA,
NITROUS OXIDE-OXYGEN ANALGESIA, AND PERFORMANCE OF
PERIODONTAL SOFT TISSUE CURETTAGE**

PLEASE TYPE OR PRINT

COURSE PARTICIPANT NAME

LAST

FIRST

MIDDLE

DATE OF BIRTH

--	--	--	--

ADDRESS

CITY	STATE	ZIP
------	-------	-----

HOME PHONE

CELL PHONE

EMAIL ADDRESS

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DENTAL HYGIENE COMMITTEE OF CALIFORNIA (DHCC) COURSE PROVIDER

DATES OF COURSE

ADDRESS (Course provider mailing address is public. If you wish to provide a P.O. Box, you must also provide a physical address and be sure to specify that the physical address is not to be used as the address of record.)

CITY	STATE	ZIP
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PHONE

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COURSE PROVIDER'S EMAIL ADDRESS

I HEREBY CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE COURSE PARTICIPANT ABOVE SUCCESSFULLY COMPLETED A DHCC-APPROVED COURSE AND DEMONSTRATED CLINICAL COMPETENCY IN THE ABOVE LISTED DUTIES PURSUANT TO CALIFORNIA CODE OF REGULATIONS §1107(b)(9).

PRINTED NAME OF COURSE INSTRUCTOR OR DIRECTOR

[STAMP OR SEAL OF
COURSE PROVIDER
OR INSTITUTION]

SIGNATURE



**Local Anesthesia, Nitrous Oxide and Periodontal Soft Tissue Curettage
 Course Provider Biennial Report**

Date:

COURSE PROVIDER	PROVIDER NO.
MAILING ADDRESS	PHONE NO.
NAME OF COURSE DIRECTOR	EMAIL ADDRESS
NAME OF COURSE	
DATES COURSE OFFERED	NUMBER OF HOURS
NUMBER OF ATTENDEES	NUMBER OF CERTIFICATES ISSUED
CHANGES IN COURSE SINCE THE LAST BIENNIAL REPORT, OR, IF THIS IS THE FIRST BIENNIAL REPORT, SINCE COURSE APPROVAL.	

IN COMPLETING THIS FORM, PLEASE CONSULT THE REGULATIONS GOVERNING COURSES IN Local Anesthesia, Nitrous Oxide, And Periodontal Soft Tissue Curettage AT SECTION 1107 OF TITLE 16 OF THE California Code of Regulations.