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## **AB-2235 (Thurmond) CA Dental Board Pediatric Anesthesia Study Report - Part 2 ([Read Part 1](#))**

### **Back to Sacramento...**

The California Dental Board (CDB) Stakeholder's meeting in July 2016 was followed up with the CDB, Board of Director's meeting in August. This was a two-day meeting held in Sacramento. On the second day, they discussed the 'Pediatric Anesthesia Study (PAS).' This section of the CDB meeting was started with a PowerPoint presentation, which provided a brief overview of the history of dentistry and anesthesia from the late 1880s to present time, as well as providing highlights of the PAS. Dr. Witcher from the CDB concluded by saying that these adverse events are rare; however, they would like them to be rarer. Next, they took comments from the public.

In advance of this meeting, Kris Calvin, CEO for AAP-CA sent a letter to the CDB reviewing our recommendations. The main point from all groups, including ours, was asking them to change the model of one clinician performing both the dental procedure(s) as well as the sedation with airway management to a team approach with a second trained provider for the anesthesia component. With this, the AAP-CA added a new request. Given the lengthy timeline for this working document for the final conclusions and eventual recommendations from the CDB, the AAP-CA had a new request. The AAP-CA urged that during this time, the CDB call for a moratorium on these single practitioner procedures.

My experience in Sacramento was amazing. As people began to speak during the public comment period, the CDB began to enforce a 3-minute time limit.

The Oral Maxillary and Facial Surgeons discussed their team approach to dental procedures, where there is never a single provider performing both the procedure and the anesthesia. They stated that overall there are many anesthesia events with very few bad outcomes.

A representative from the American Academy of Pediatric Dentistry (AAPD) submitted a letter providing corrections for the CDB document (PAS). The CDB in the original PAS stated that the AAPD wrote the AAP-AAPD guidelines without any involvement of the AAP, just getting a stamp of approval from the AAP. The AAPD stated this was not the case. Indeed, the AAP and others were actively involved in the entire document with total transparency.

The lobbyist from the California Dental Association spoke, as there was not a medical provider representative member available to provide testimony this time. She stated that the fact that these patients may have a mouth full of dental caries with concurrent infection as possibly leading to a bad outcome may have nothing to do with their single dual provider model.

The California Society of Anesthesiologists (CSA) submitted a letter in advance to the CDB. They discussed the highlights of this letter and provided further testimony. One example provided was that for every pediatric death, there may be 10 near-misses that were not reported. This highlighted that the true statistics are not known.

The next speaker was the brave and courageous aunt of Caleb, who is the Caleb mentioned in AB-2355 (Thurmond) "Caleb's Law." As she began to speak the members of the CDB stopped her at points stating that they could not discuss the details of that particular case during the meeting. Caleb's aunt is a surgeon and well versed regarding medical and surgical procedures. Personally, I wanted to wait until some others had had a chance to speak before going forward. Caleb's aunt motioned to me that she wanted to go first as we both seemed to stand at the same time. I too, had wanted to follow the CSA as their testimony was very knowledgeable, educational, and articulate.

Next, I seized my opportunity. My heart had been pounding in my chest as I reviewed my page on talking points as well as items that I wanted to make sure to include. Trying to remain cool and collected, I thought about mindfulness. I thought about my experiences during ice skating competitions and testing sessions in terms of maintaining composure. Then I thought about relishing this moment and appreciating how few times we find ourselves in positions where we get to feel our heart beat in anticipation and excitement. Maybe that is why I am an emergency physician...

At the moment of the testimony, I had the AB-2355 support comments in hand as well as many other notes. I thought about how they were limiting the time on the clock per person. I realized I did not need to repeat or summarize what others had just said.

Therefore, I made the executive decision to start with the summation points of our letter. Our major talking points had already been said as well as available in our written letters and in that of others. I did not want to rush through that most important part. Of course, I introduced myself and thanked them for allowing me to speak. I stated our mission regarding the whole child before, during, and after anesthesia as well as the fact that the AAP-CA has NO financial stake in the Pediatric Anesthesia Study.

Our key areas of focus were to recommend that the CDB follow the AAP-AAPD joint policy statement, which calls for a second trained person during these procedures that they had referenced in the PAS. The CSA also provided a letter in advance that they had just referenced and reviewed during their testimony. After I referenced those two points, I moved on to our final recommendation in our letter, the concept of a moratorium.

I referenced the comments made by Dr. Witcher from the dental board at the conclusion of his synopsis of the PAS. While he felt these events were rare, he wished they could be rarer. I thanked him for that comment and mentioned that with the timeline spanning into early next year, the AAP-CA was requesting a moratorium on the single operator dental procedure anesthesia model. There was a lady on the dental board who looked up at me. Her eyes widened with a furrowed brow. Suddenly, they all just stared at me. Sensing the moment and this newfound attention focused on my statement, I said, " This is really important. Let me say this again" I repeated the request for a moratorium. People just looked at me in disbelief. At that point, I stopped. Everyone understood what I was saying on behalf of the AAP-CA. Not one more child should die a potentially avoidable death during this process. I felt trying to run out my 3 minutes would be counter productive.

Afterwards, I gave a very long interview with NBC. In more simplistic terms, "You can't text and drive. Why should one be able to perform dentistry and anesthesia at the same time when they are far more complex?"

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You may view Sacramento's ABC 10 report, [here](#).