Guidelines for Decisions Regarding the Provision of Sedation and General Anesthesia Services

The decision about whether dental care is best delivered using general anesthesia or sedation and whether the best site for using those modalities is a hospital, surgical center, or dental office requires professional judgment and careful consideration of medical, physical, behavioral and social factors for each individual. In order to make informed decisions regarding hospital dentistry, anesthesia, and sedation, providers should consider the following concepts:

1. Factors to consider in decision making about anesthesia and sedation.
2. Deciding on anesthesia, sedation, and sites for delivering care.

Factors to Consider in Decision Making about Anesthesia and Sedation

Medical and Physical Considerations: Decisions regarding the location of where dental care is best delivered requires professional judgment and careful consideration of medical, physical, behavioral and social factors for each individual. The following is a list of general factors to consider in making a decision about the appropriate level of anesthesia or sedation and the appropriate site for delivering dental care using these modalities.

1. American Society of Anesthesiologists (ASA) Physical Status Classification – This system describes six status categories:
   - ASA Physical Status 1 – A normal healthy patient
   - ASA Physical Status 2 – A patient with mild systemic disease
   - ASA Physical Status 3 – A patient with severe systemic disease
   - ASA Physical Status 4 – A patient with severe systemic disease that is a constant threat to life
   - ASA Physical Status 5 – A moribund patient who is not expected to survive without the operation
   - ASA Physical Status 6 – A declared brain-dead patient whose organs are being removed for donor purposes

2. Other Medical Factors – There are other factors that may influence the outcome of anesthesia, including but not limited to:
   - The patient’s age, where there is a higher risk for the very young and very old;
   - History of major organ disease (heart, lung, kidney);
   - Emergency surgery;
   - The type of operation with more invasive operations carrying a higher risk;
   - Smoking;
   - High blood pressure;
• Diabetes;
• Medications that may increase bleeding or have other implications for anesthesia or sedation;
• History of heavy alcohol use;
• Drug allergies; and/or
• History of adverse reactions to anesthesia.

3. Physical Factors - There are several physical factors that may influence the difficulty of administering anesthesia and therefore increase risks associated with the procedure. These generally relate to difficulty with intubation or maintaining an airway. Some factors include, but are not limited to:
• Mallampati score;
• Obesity;
• History of obstructive sleep apnea;
• Extent of mouth opening;
• Temporomandibular joint mobility;
• Cervical spine mobility or Atlantoaxial instability;
• Diseased, loose or artificial, teeth; and/or
• Thyro-mental distance.

Behavioral and/or Cooperation Considerations: There are a number of conditions that can be predictive of an individual having difficulty cooperating with the procedures needed to deliver safe anesthesia and sedation due to cognitive or physical limitations. Some examples of people who may not be able to cooperate well with sedation or anesthesia procedures due to cognitive or physical limitations include, but are not limited to:
1. Young children;
2. Children and adults with cognitive disabilities;
3. People with neurodegenerative or musculo-skeletal disorders or conditions; and/or
4. People with a history of stroke.

Social Considerations: Care givers may assist with patients in the following situations:
1. Patient has cooperation difficulties;
2. Patient has a limited ability to perform Activities of Daily Living themselves; and/or
3. Patient needs to be monitored for postoperative complications that may arise.

Deciding on Anesthesia, Sedation, and Sites for Delivering Care
Level of Anesthesia or Sedation: Levels vary from light sedation, where the patient is conscious and able to respond purposefully to commands, to deep sedation and general anesthesia, where the patient does not respond to stimulation or commands. The following decisions depend on the factors described and the length and extent of the planned procedures:
1. Which modality should be used; and
2. The most appropriate site to deliver the applicable level of anesthesia.
Sites for Administration of Anesthesia or Sedation:

1. Hospital Operating Rooms provide the highest level of expertise, equipment, and other resources for delivering anesthesia or sedation for dental procedures, it can be considered the safest location for delivering care to individuals with high risk factors. Hospital operating rooms may be considered for people with:
   - ASA Risk Status 3 or above;
   - Serious major organ disease;
   - Requirement for an overnight stay;
   - Requirement for extensive pre-operative or postoperative care;
   - Significant physical limitations predicting difficulty with intubation or airway management;
   - Inadequate caregiver support who may require more support from medical personnel or more concern with early discharge; and/or
   - Morbid obesity (BMI > 40)

2. Ambulatory Surgery Centers have most or even all of the expertise, equipment and other resources available in a hospital operating room for delivering anesthesia or sedation for dental procedures.
   - These facilities may not have the resources needed to care for individuals with the most complicated medical, physical, or behavioral conditions.
   - These facilities may not be ideal sites for people who require a planned pre or post-operative overnight stay or who are likely not to be ready for discharge on the evening of surgery and require an unplanned overnight stay.

3. Dental Office Based Anesthesia and Sedation – Some advantages of this approach are decreased medical and dental costs, decreased scheduling times, decreased exposure to hospital acquired infection, and increased patient privacy and continuity of care, and medical anesthesiologists and dental anesthesiologists are the main anesthesia providers. Anesthesia providers bring portable hospital grade medical equipment to dental offices and administer anesthesia or sedation while the dentist performs the dental procedures. In general, this delivery method is chosen for people with fewer or less significant risk factors and can be considered for people with:
   - ASA Status 1 or 2 or ASA 3 at the discretion of the anesthesia provider;
   - The ability to cooperate for induction and administration of anesthesia or sedation;
   - Minimal airway risks as determined by airway examination;
   - The need for light sedation or short procedures requiring deeper sedation or anesthesia;
   - BMI < 40;
   - The absence of obstructive sleep apnea;
   - No requirement for an overnight stay; and/or
   - No requirement for extensive preoperative and/or postoperative care.

4. Dental Office with Dentist Administering Anesthesia or Sedation - Some dentists and dental specialists have obtained a “conscious sedation” permit from the California Dental Board and are able to administer conscious sedation with modalities that go beyond the use of oral medications or nitrous oxide/oxygen.
5. Combining Factors to arrive at a Recommendation - The final decision regarding the use of anesthesia or sedation requires gathering and analyzing the data. Making this decision requires professional judgment and careful consideration of medical, physical, behavioral and social factors for each individual.
- These guidelines can be used by dental and medical personnel for initial triage or decision making.
- In circumstances where a decision remains unclear a consultation with an anesthesiologist may be helpful.

Please continue to check the Denti-Cal website frequently for additional updates and program changes regarding the provision of IV sedation and general anesthesia services.

For more information please call the Denti-Cal Provider Service Line at 1-800-423-0507.