

REFERENCE TITLE: dental anesthesia; requirements

State of Arizona
Senate
Fifty-sixth Legislature
First Regular Session
2023

SB 1602

Introduced by
Senator Shamp: Representative Smith

AN ACT

AMENDING SECTION 32-1207, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 11, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-1272; AMENDING SECTIONS 32-1403, 32-1606 AND 32-1803, ARIZONA REVISED STATUTES; RELATING TO THE STATE BOARD OF DENTAL EXAMINERS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-1207, Arizona Revised Statutes, is amended to
3 read:

4 32-1207. Powers and duties; executive director; immunity;
5 fees; definitions

6 A. The board shall:

7 1. Adopt rules that are not inconsistent with this chapter for
8 regulating its own conduct, for holding examinations and for regulating
9 the practice of dentists and supervised personnel and registered business
10 entities, provided that:

11 (a) Regulation of supervised personnel is based on the degree of
12 education and training of the supervised personnel, the state of
13 scientific technology available and the necessary degree of supervision of
14 the supervised personnel by dentists.

15 (b) Except as provided pursuant to sections 32-1276.03 and 32-1281,
16 only licensed dentists may perform diagnosis and treatment planning,
17 prescribe medication and perform surgical procedures on hard and soft
18 tissues.

19 (c) Only a licensed dentist, a dental therapist either under the
20 direct supervision of a dentist or pursuant to a written collaborative
21 practice agreement or a dental hygienist in consultation with a dentist
22 may perform examinations, oral health assessments and treatment sequencing
23 for dental hygiene procedures.

24 2. Adopt a seal.

25 3. Maintain a record that is available to the board at all times of
26 its acts and proceedings, including the issuance, denial, renewal,
27 suspension or revocation of licenses and the disposition of complaints.
28 The existence of a pending complaint or investigation shall not be
29 disclosed to the public. Records of complaints shall be available to the
30 public, except only as follows:

31 (a) If the board dismisses or terminates a complaint, the record of
32 the complaint shall not be available to the public.

33 (b) If the board has issued a nondisciplinary letter of concern,
34 the record of the complaint shall be available to the public only for a
35 period of five years after the date the board issued the letter of
36 concern.

37 (c) If the board has required additional nondisciplinary continuing
38 education pursuant to section 32-1263.01 but has not taken further action,
39 the record of the complaint shall be available to the public only for a
40 period of five years after the licensee satisfies this requirement.

41 (d) If the board has assessed a nondisciplinary civil penalty
42 pursuant to section 32-1208 but has not taken further action, the record
43 of the complaint shall be available to the public only for a period of
44 five years after the licensee satisfies this requirement.

1 4. Establish a uniform and reasonable standard of minimum
2 educational requirements consistent with the accreditation standards of
3 the American dental association commission on dental accreditation to be
4 observed by dental schools, dental therapy schools and dental hygiene
5 schools in order to be classified as recognized dental schools, dental
6 therapy schools or dental hygiene schools.

7 5. Establish a uniform and reasonable standard of minimum
8 educational requirements that are consistent with the accreditation
9 standards of the United States department of education or the council on
10 higher education accreditation and that must be observed by denture
11 technology schools in order to be classified as recognized denture
12 technology schools.

13 6. Determine the reputability and classification of dental schools,
14 dental therapy schools, dental hygiene schools and denture technology
15 schools in accordance with their compliance with the standard set forth in
16 paragraph 4 or 5 of this subsection, whichever is applicable.

17 7. Issue licenses to persons who the board determines are eligible
18 for licensure pursuant to this chapter.

19 8. Determine the eligibility of applicants for restricted permits
20 and issue restricted permits to those found eligible.

21 9. Pursuant to section 32-1263.02, investigate charges of
22 misconduct on the part of licensees and persons to whom restricted permits
23 have been issued.

24 10. Issue a letter of concern, which is not a disciplinary action
25 but refers to practices that may lead to a violation and to disciplinary
26 action.

27 11. Issue decrees of censure, fix periods and terms of probation,
28 suspend or revoke licenses, certificates and restricted permits, as the
29 facts may warrant, and reinstate licenses, certificates and restricted
30 permits in proper cases.

31 12. Collect and disburse monies.

32 13. Perform all other duties that are necessary to enforce this
33 chapter and that are not specifically or by necessary implication
34 delegated to another person.

35 14. Establish criteria for the renewal of permits issued pursuant
36 to board rules relating to general anesthesia and sedation.

37 B. The board may:

38 1. Sue and be sued.

39 2. Issue subpoenas, including subpoenas to the custodian of patient
40 records, compel attendance of witnesses, administer oaths and take
41 testimony concerning all matters within the board's jurisdiction. If a
42 person refuses to obey a subpoena issued by the board, the refusal shall
43 be certified to the superior court and proceedings shall be instituted for
44 contempt of court.

1 3. Adopt rules:

2 (a) Prescribing requirements for continuing education for renewal
3 of all licenses issued pursuant to this chapter.

4 (b) Prescribing educational and experience prerequisites for
5 administering intravenous or intramuscular drugs for the purpose of
6 sedation or for using general anesthetics in conjunction with a dental
7 treatment procedure.

8 (c) Prescribing requirements for obtaining licenses for retired
9 licensees or licensees who have a disability, including the triennial
10 license renewal fee.

11 4. Hire consultants to assist the board in the performance of its
12 duties and employ persons to provide investigative, professional and
13 clerical assistance as the board deems necessary.

14 5. Contract with other state or federal agencies as required to
15 carry out the purposes of this chapter.

16 6. If determined by the board, order physical, psychological,
17 psychiatric and competency evaluations of licensed dentists, dental
18 therapists and dental hygienists, certified denturists and applicants for
19 licensure and certification at the expense of those individuals.

20 7. Establish an investigation committee consisting of not more than
21 eleven licensees who are in good standing, who are appointed by the board
22 and who serve at the pleasure of the board to investigate any complaint
23 submitted to the board, initiated by the board or delegated by the board
24 to the investigation committee pursuant to this chapter.

25 C. The executive director or the executive director's designee may:

26 1. Issue and renew licenses, certificates and permits to applicants
27 who meet the requirements of this chapter.

28 2. Initiate an investigation if evidence appears to demonstrate
29 that a dentist, dental therapist, dental hygienist, denturist or
30 restricted permit holder may be engaged in unprofessional conduct or may
31 be unable to safely practice dentistry.

32 3. Initiate an investigation if evidence appears to demonstrate
33 that a business entity may be engaged in unethical conduct.

34 4. Subject to board approval, enter into a consent agreement with a
35 dentist, dental therapist, denturist, dental hygienist or restricted
36 permit holder if there is evidence of unprofessional conduct.

37 5. Subject to board approval, enter into a consent agreement with a
38 business entity if there is evidence of unethical conduct.

39 6. Refer cases to the board for a formal interview.

40 7. If delegated by the board, enter into a stipulation agreement
41 with a person under the board's jurisdiction for the treatment,
42 rehabilitation and monitoring of chemical substance abuse or misuse.

43 D. Members of the board are personally immune from liability with
44 respect to all acts done and actions taken in good faith and within the
45 scope of their authority.

1 E. The board by rule shall require that a licensee obtain a permit
2 for applying general anesthesia, semiconscious sedation or conscious
3 sedation, shall establish and collect a fee of not more than \$300 to cover
4 administrative costs connected with issuing the permit and shall conduct
5 inspections to ensure compliance. A LICENSEE WHO HAS NOT OBTAINED A
6 PERMIT PURSUANT TO THIS SUBSECTION MAY PERFORM DENTAL PROCEDURES ON A
7 PATIENT WHO RECEIVES AN ANESTHETIC ADMINISTERED BY A QUALIFIED ANESTHESIA
8 PROVIDER WHO IS EXCLUSIVELY RESPONSIBLE FOR THE PREOPERATIVE,
9 INTRAOPERATIVE AND POSTOPERATIVE ANESTHETIC MANAGEMENT OF THE PATIENT.
10 FOR THE PURPOSES OF THIS SUBSECTION, "QUALIFIED ANESTHESIA PROVIDER"
11 INCLUDES:

12 1. A PHYSICIAN WHO HAS COMPLETED RESIDENCY TRAINING IN
13 ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER 13 OR 17 OF THIS TITLE
14 AND WHO HAS RECEIVED A PERMIT FROM THE ARIZONA MEDICAL BOARD OR THE
15 ARIZONA BOARD OF OSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY TO
16 ADMINISTER ANESTHESIA IN DENTAL OFFICES AND DENTAL CLINICS.

17 2. A CERTIFIED REGISTERED NURSE ANESTHETIST WHO HAS A NATIONAL
18 BOARD CERTIFICATION IN ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER
19 15 OF THIS TITLE AND WHO HAS RECEIVED A PERMIT FROM THE ARIZONA STATE
20 BOARD OF NURSING TO ADMINISTER ANESTHESIA IN DENTAL OFFICES AND DENTAL
21 CLINICS.

22 F. The board by rule may establish and collect fees for license
23 verification, board meeting agendas and minutes, published lists and
24 mailing labels.

25 G. This section does not prohibit the board from conducting its
26 authorized duties in a public meeting.

27 H. For the purposes of this section:

28 1. "Good standing" means that a person holds an unrestricted and
29 unencumbered license that has not been suspended or revoked pursuant to
30 this chapter.

31 2. "Record of complaint" means the document reflecting the final
32 disposition of a complaint or investigation.

33 Sec. 2. Title 32, chapter 11, article 3, Arizona Revised Statutes,
34 is amended by adding section 32-1272, to read:

35 32-1272. Dental anesthesia; requirements

36 A. A DENTAL OFFICE OR DENTAL CLINIC AT WHICH GENERAL ANESTHESIA OR
37 DEEP SEDATION IS ADMINISTERED MUST CONTAIN THE FOLLOWING PROPERLY
38 OPERATING EQUIPMENT AND SUPPLIES WHEN ADMINISTERING GENERAL ANESTHESIA OR
39 DEEP SEDATION:

40 1. EMERGENCY DRUGS, INCLUDING ADVANCED CARDIAC LIFE SUPPORT
41 PROTOCOL DRUGS.

42 2. AN ELECTROCARDIOGRAPH MONITOR.

43 3. A PULSE OXIMETER.

44 4. A CARDIAC DEFIBRILLATOR OR AUTOMATED EXTERNAL DEFIBRILLATOR.

45 5. POSITIVE PRESSURE OXYGEN AND SUPPLEMENTAL OXYGEN.

1 6. SUCTION EQUIPMENT, INCLUDING AN ENDOTRACHEAL, TONSILLAR OR
2 PHARYNGEAL AND AN EMERGENCY BACKUP MEDICAL SUCTION DEVICE.

3 7. A LARYNGOSCOPE, MULTIPLE BLADES, BACKUP BATTERIES AND BACKUP
4 BULBS.

5 8. ENDOTRACHEAL TUBES AND APPROPRIATE CONNECTORS.

6 9. MAGILL FORCEPS.

7 10. OROPHARYNGEAL AND NASOPHARYNGEAL AIRWAYS.

8 11. AUXILIARY LIGHTING.

9 12. A STETHOSCOPE.

10 13. A BLOOD PRESSURE MONITORING DEVICE.

11 14. A CAPNOGRAPHY MONITORING DEVICE.

12 B. THE HEALTH CARE PERSONNEL AT A DENTAL OFFICE OR DENTAL CLINIC AT
13 WHICH GENERAL ANESTHESIA OR DEEP SEDATION IS ADMINISTERED MUST BE CAPABLE
14 OF HANDLING PROCEDURES RELATED TO COMPLICATIONS AND EMERGENCY INCIDENTS.
15 THE HEALTH CARE PERSONNEL INVOLVED IN ADMINISTERING AND MONITORING GENERAL
16 ANESTHESIA OR DEEP SEDATION SHALL HOLD A CURRENT HEALTH CARE PROVIDER
17 LEVEL COURSE COMPLETION CONFIRMATION IN CARDIOPULMONARY RESUSCITATION.

18 C. WITHIN THE TWO YEARS BEFORE ADMINISTERING GENERAL ANESTHESIA OR
19 DEEP SEDATION IN A DENTAL OFFICE OR DENTAL CLINIC, A QUALIFIED ANESTHESIA
20 PROVIDER MUST HAVE COMPLETED COURSEWORK IN ONE OR MORE OF THE FOLLOWING:

21 1. ADVANCED CARDIAC LIFE SUPPORT.

22 2. PEDIATRIC ADVANCED LIFE SUPPORT, IF WORKING IN A PRACTICE
23 TREATING PEDIATRIC PATIENTS.

24 3. A RECOGNIZED CONTINUING EDUCATION COURSE IN ADVANCED AIRWAYS
25 MANAGEMENT.

26 D. A QUALIFIED ANESTHESIA PROVIDER SHALL ENSURE THAT THE DENTAL
27 OFFICE OR DENTAL CLINIC AT WHICH GENERAL ANESTHESIA OR DEEP SEDATION IS
28 ADMINISTERED COMPLIES WITH THE REQUIREMENTS OF SUBSECTIONS A AND B OF THIS
29 SECTION BEFORE ADMINISTERING GENERAL ANESTHESIA OR DEEP SEDATION. THE
30 QUALIFIED ANESTHESIA PROVIDER SHALL SUBMIT A COMPLETED AFFIDAVIT VERIFYING
31 COMPLIANCE WITH SUBSECTIONS A, B AND C OF THIS SECTION TO BOTH THE STATE
32 BOARD OF DENTAL EXAMINERS AND THE REGULATORY BOARD THAT LICENSES THE
33 QUALIFIED ANESTHESIA PROVIDER. THE STATE BOARD OF DENTAL EXAMINERS MAY
34 CONDUCT AN ON-SITE EVALUATION OF ANY DENTAL OFFICE OR DENTAL CLINIC AT
35 WHICH GENERAL ANESTHESIA OR DEEP SEDATION IS ADMINISTERED TO VERIFY
36 COMPLIANCE.

37 E. A QUALIFIED ANESTHESIA PROVIDER WHO IS LICENSED BY THE BOARD AND
38 WHO FAILS TO COMPLY WITH THE REQUIREMENTS OF THIS SECTION COMMITS AN ACT
39 THAT CONSTITUTES A DANGER TO THE HEALTH, WELFARE OR SAFETY OF THE PUBLIC
40 PURSUANT TO SECTION 32-1201.01.

41 F. IF A QUALIFIED ANESTHESIA PROVIDER WHO IS NOT LICENSED BY THE
42 STATE BOARD OF DENTAL EXAMINERS FAILS TO COMPLY WITH THE REQUIREMENTS OF
43 THIS SECTION, THE STATE BOARD OF DENTAL EXAMINERS SHALL PROMPTLY REPORT
44 THE QUALIFIED ANESTHESIA PROVIDER'S CONDUCT TO THE REGULATORY BOARD THAT
45 LICENSES THE QUALIFIED ANESTHESIA PROVIDER. IF AN ADVERSE ANESTHESIA

1 OUTCOME INVOLVES A QUALIFIED ANESTHESIA PROVIDER WHO IS NOT LICENSED BY
2 THE STATE BOARD OF DENTAL EXAMINERS, THE STATE BOARD OF DENTAL EXAMINERS
3 SHALL PROMPTLY REPORT THE ADVERSE ANESTHESIA OUTCOME TO THE REGULATORY
4 BOARD THAT LICENSES THE QUALIFIED ANESTHESIA PROVIDER.

5 G. IF A QUALIFIED ANESTHESIA PROVIDER WHO IS LICENSED BY THE STATE
6 BOARD OF DENTAL EXAMINERS IS INVOLVED IN AN ADVERSE ANESTHESIA OUTCOME
7 THAT RESULTS IN THE DEATH OF A PATIENT, THE STATE BOARD OF DENTAL
8 EXAMINERS SHALL SUSPEND THE QUALIFIED ANESTHESIA PROVIDER'S PERMIT TO
9 ADMINISTER ANESTHESIA UNTIL THE INVESTIGATION INTO THE ADVERSE ANESTHESIA
10 OUTCOME IS COMPLETE. IF A QUALIFIED ANESTHESIA PROVIDER WHO IS NOT
11 LICENSED BY THE STATE BOARD OF DENTAL EXAMINERS IS INVOLVED IN AN ADVERSE
12 ANESTHESIA OUTCOME THAT RESULTS IN THE DEATH OF A PATIENT, THE STATE BOARD
13 OF DENTAL EXAMINERS SHALL PROMPTLY REPORT THE DEATH TO THE REGULATORY
14 BOARD THAT LICENSES THE QUALIFIED ANESTHESIA PROVIDER, AND THE QUALIFIED
15 ANESTHESIA PROVIDER'S REGULATORY BOARD SHALL SUSPEND THE QUALIFIED
16 ANESTHESIA PROVIDER'S PERMIT TO ADMINISTER ANESTHESIA UNTIL THE
17 INVESTIGATION INTO THE ADVERSE ANESTHESIA OUTCOME IS COMPLETE.

18 H. FOR THE PURPOSES OF THIS SECTION, "QUALIFIED ANESTHESIA
19 PROVIDER" MEANS ANY OF THE FOLLOWING:

20 1. A LICENSEE WHO HOLDS A PERMIT TO ADMINISTER ANESTHESIA AND DEEP
21 SEDATION FROM THE BOARD PURSUANT TO SECTION 32-1207.

22 2. A PHYSICIAN WHO HAS COMPLETED RESIDENCY TRAINING IN
23 ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER 13 OR 17 OF THIS TITLE
24 AND WHO HAS RECEIVED A PERMIT FROM THE ARIZONA MEDICAL BOARD OR THE
25 ARIZONA BOARD OF OSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY TO
26 ADMINISTER ANESTHESIA IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO
27 SECTION 32-1403 OR 32-1803.

28 3. A CERTIFIED REGISTERED NURSE ANESTHETIST WHO HAS A NATIONAL
29 BOARD CERTIFICATION IN ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER
30 15 OF THIS TITLE AND WHO HAS RECEIVED A PERMIT FROM THE ARIZONA STATE
31 BOARD OF NURSING TO ADMINISTER ANESTHESIA IN DENTAL OFFICES AND DENTAL
32 CLINICS PURSUANT TO SECTION 32-1606.

33 Sec. 3. Section 32-1403, Arizona Revised Statutes, is amended to
34 read:

35 32-1403. Powers and duties of the board; compensation;
36 immunity; committee on executive director
37 selection and retention

38 A. The primary duty of the board is to protect the public from
39 unlawful, incompetent, unqualified, impaired or unprofessional
40 practitioners of allopathic medicine through licensure, regulation and
41 rehabilitation of the profession in this state. The powers and duties of
42 the board include:

43 1. Ordering and evaluating physical, psychological, psychiatric and
44 competency testing of licensed physicians and candidates for licensure as
45 may be determined necessary by the board.

- 1 2. Initiating investigations and determining on ~~its~~ THE BOARD'S own
2 motion whether a doctor of medicine has engaged in unprofessional conduct
3 or provided incompetent medical care or is mentally or physically unable
4 to engage in the practice of medicine.
- 5 3. Developing and recommending standards governing the profession.
- 6 4. Reviewing the credentials and the abilities of applicants whose
7 professional records or physical or mental capabilities may not meet the
8 requirements for licensure or registration as prescribed in article 2 of
9 this chapter in order for the board to make a final determination whether
10 the applicant meets the requirements for licensure pursuant to this
11 chapter.
- 12 5. Disciplining and rehabilitating physicians.
- 13 6. Engaging in a full exchange of information with the licensing
14 and disciplinary boards and medical associations of other states and
15 jurisdictions of the United States and foreign countries and the Arizona
16 medical association and its components.
- 17 7. Directing the preparation and circulation of educational
18 material the board determines is helpful and proper for licensees.
- 19 8. Adopting rules regarding the regulation and the qualifications
20 of doctors of medicine.
- 21 9. Establishing fees and penalties as provided pursuant to section
22 32-1436.
- 23 10. Delegating to the executive director the board's authority
24 pursuant to section 32-1405 or 32-1451. The board shall adopt substantive
25 policy statements pursuant to section 41-1091 for each specific licensing
26 and regulatory authority the board delegates to the executive director.
- 27 11. Determining whether a prospective or current Arizona licensed
28 physician has the training or experience to demonstrate the physician's
29 ability to treat and manage opiate-dependent patients as a qualifying
30 physician pursuant to 21 United States Code section 823(g)(2)(G)(ii).
- 31 12. ISSUING PERMITS TO ADMINISTER GENERAL ANESTHESIA AND DEEP
32 SEDATION IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272
33 TO DOCTORS OF MEDICINE WHO HAVE COMPLETED RESIDENCY TRAINING IN
34 ANESTHESIOLOGY.
- 35 B. The board may appoint one of its members to the jurisdiction
36 arbitration panel pursuant to section 32-2907, subsection B.
- 37 C. There shall be no monetary liability on the part of and no cause
38 of action shall arise against the executive director or such other
39 permanent or temporary personnel or professional medical investigators for
40 any act done or proceeding undertaken or performed in good faith and in
41 furtherance of the purposes of this chapter.
- 42 D. In conducting its investigations pursuant to subsection A,
43 paragraph 2 of this section, the board may receive and review staff
44 reports relating to complaints and malpractice claims.

1 E. The board shall establish a program that is reasonable and
2 necessary to educate doctors of medicine regarding the uses and advantages
3 of autologous blood transfusions.

4 F. The board may make statistical information on doctors of
5 medicine and applicants for licensure under this article available to
6 academic and research organizations.

7 G. The committee on executive director selection and retention is
8 established consisting of the Arizona medical board and the chairperson
9 and vice chairperson of the Arizona regulatory board of physician
10 assistants. The committee is a public body and is subject to the
11 requirements of title 38, chapter 3, article 3.1. The committee is
12 responsible for appointing the executive director pursuant to section
13 32-1405. All members of the committee are voting members of the
14 committee. The committee shall elect a chairperson and a vice chairperson
15 when the committee meets but ~~not~~ NOT more frequently than once a year. The
16 chairperson shall call meetings of the committee as necessary, and the
17 vice chairperson may call meetings of the committee that are necessary if
18 the chairperson is not available. The presence of eight members of the
19 committee at a meeting constitutes a quorum. The committee meetings may
20 be held using communications equipment that allows all members who are
21 participating in the meeting to hear each other. If any discussions occur
22 in an executive session of the committee, notwithstanding the requirement
23 that discussions made at an executive session be kept confidential as
24 specified in section 38-431.03, the chairperson and vice chairperson of
25 the Arizona regulatory board of physician assistants may discuss this
26 information with the Arizona regulatory board of physician assistants in
27 executive session. This disclosure of executive session information to
28 the Arizona regulatory board of physician assistants does not constitute a
29 waiver of confidentiality or any privilege, including the attorney-client
30 privilege.

31 H. The officers of the Arizona medical board and the Arizona
32 regulatory board of physician assistants shall meet twice a year to
33 discuss matters of mutual concern and interest.

34 I. The board may accept and expend grants, gifts, devises and other
35 contributions from any public or private source, including the federal
36 government. Monies received under this subsection do not revert to the
37 state general fund at the end of a fiscal year.

38 Sec. 4. Section 32-1606, Arizona Revised Statutes, is amended to
39 read:

40 32-1606. Powers and duties of board

41 A. The board may:

42 1. Adopt and revise rules necessary to carry into effect this
43 chapter.

- 1 2. Publish advisory opinions regarding registered and practical
2 nursing practice and nursing education.
- 3 3. Issue limited licenses or certificates if it determines that an
4 applicant or licensee cannot function safely in a specific setting or
5 within the full scope of practice.
- 6 4. Refer criminal violations of this chapter to the appropriate law
7 enforcement agency.
- 8 5. Establish a confidential program for monitoring licensees who
9 are chemically dependent and who enroll in rehabilitation programs that
10 meet the criteria established by the board. The board may take further
11 action if the licensee refuses to enter into a stipulated agreement or
12 fails to comply with its terms. In order to protect the public health and
13 safety, the confidentiality requirements of this paragraph do not apply if
14 the licensee does not comply with the stipulated agreement.
- 15 6. On the applicant's or regulated party's request, establish a
16 payment schedule with the applicant or regulated party.
- 17 7. Provide education regarding board functions.
- 18 8. Collect or assist in collecting workforce data.
- 19 9. Adopt rules to conduct pilot programs consistent with public
20 safety for innovative applications in nursing practice, education and
21 regulation.
- 22 10. Grant retirement status on request to retired nurses who are or
23 were licensed under this chapter, who have no open complaint or
24 investigation pending against them and who are not subject to discipline.
- 25 11. Accept and spend federal monies and private grants, gifts,
26 contributions and devises to assist in carrying out the purposes of this
27 chapter. These monies do not revert to the state general fund at the end
28 of the fiscal year.
- 29 B. The board shall:
 - 30 1. Approve regulated training and educational programs that meet
31 the requirements of this chapter and rules adopted by the board.
 - 32 2. By rule, establish approval and reapproval processes for nursing
33 and nursing assistant training programs that meet the requirements of this
34 chapter and board rules.
 - 35 3. Prepare and maintain a list of approved nursing programs to
36 prepare registered **NURSES** and practical nurses whose graduates are
37 eligible for licensing under this chapter as registered nurses or as
38 practical nurses if they satisfy the other requirements of this chapter
39 and board rules.
 - 40 4. Examine qualified registered **NURSE** and practical nurse
41 applicants.
 - 42 5. License and renew the licenses of qualified registered **NURSE** and
43 practical nurse applicants and licensed nursing assistants who are not
44 qualified to be licensed by the executive director.
 - 45 6. Adopt a seal, which the executive director shall keep.

1 7. Keep a record of all proceedings.

2 8. For proper cause, deny or rescind approval of a regulated
3 training or educational program for failure to comply with this chapter or
4 the rules of the board.

5 9. Adopt rules to approve credential evaluation services that
6 evaluate the qualifications of applicants who graduated from an
7 international nursing program.

8 10. Determine and administer appropriate disciplinary action
9 against all regulated parties who are found guilty of violating this
10 chapter or rules adopted by the board.

11 11. Perform functions necessary to carry out the requirements of
12 THE nursing assistant and nurse aide training and competency evaluation
13 program as set forth in the omnibus budget reconciliation act of 1987
14 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic
15 coverage act of 1988 (P.L. 100-360; 102 Stat. 683). These functions shall
16 include:

17 (a) Testing and registering certified nursing assistants.

18 (b) Testing and licensing licensed nursing assistants.

19 (c) Maintaining a list of board-approved training programs.

20 (d) Maintaining a registry of nursing assistants for all certified
21 nursing assistants and licensed nursing assistants.

22 (e) Assessing fees.

23 12. Adopt rules establishing ~~those~~ acts that may be performed by a
24 registered nurse practitioner or certified nurse midwife, except that the
25 board does not have authority to decide scope of practice relating to
26 abortion as defined in section 36-2151.

27 13. Adopt rules that prohibit registered nurse practitioners,
28 clinical nurse specialists or certified nurse midwives from dispensing a
29 schedule II controlled substance that is an opioid, except for an
30 implantable device or an opioid that is for medication-assisted treatment
31 for substance use disorders.

32 14. Adopt rules establishing educational requirements to certify
33 school nurses.

34 15. Publish copies of board rules and distribute these copies on
35 request.

36 16. Require each applicant for initial licensure or certification
37 to submit a full set of fingerprints to the board for the purpose of
38 obtaining a state and federal criminal records check pursuant to section
39 41-1750 and Public Law 92-544. The department of public safety may
40 exchange this fingerprint data with the federal bureau of investigation.

41 17. Except for a licensee who has been convicted of a felony that
42 has been designated a misdemeanor pursuant to section 13-604, revoke a
43 license of a person, revoke the multistate licensure privilege of a person
44 pursuant to section 32-1669 or not issue a license or renewal to an
45 applicant who has one or more felony convictions and who has not received

1 an absolute discharge from the sentences for all felony convictions three
2 or more years before the date of filing an application pursuant to this
3 chapter.

4 18. Establish standards to approve and reapprove REGISTERED nurse
5 practitioner and clinical nurse specialist programs and provide for
6 surveys of REGISTERED nurse practitioner and clinical nurse specialist
7 programs as ~~†~~ THE BOARD deems necessary.

8 19. Provide the licensing authorities of health care institutions,
9 facilities and homes with any information the board receives regarding
10 practices that place a patient's health at risk.

11 20. Limit the multistate licensure privilege of any person who
12 holds or applies for a license in this state pursuant to section 32-1668.

13 21. Adopt rules to establish competency standards for obtaining and
14 maintaining a license.

15 22. Adopt rules to qualify and certify clinical nurse specialists.

16 23. Adopt rules to approve and reapprove refresher courses for
17 nurses who are not currently practicing.

18 24. Maintain a list of approved medication assistant training
19 programs.

20 25. Test and certify medication assistants.

21 26. Maintain a registry and disciplinary record of medication
22 assistants who are certified pursuant to this chapter.

23 27. Adopt rules to establish the requirements for a clinical nurse
24 specialist to prescribe and dispense drugs and devices consistent with
25 section 32-1651 and within the clinical nurse specialist's population or
26 disease focus.

27 28. ISSUE PERMITS TO ADMINISTER GENERAL ANESTHESIA AND DEEP
28 SEDATION IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272
29 TO CERTIFIED REGISTERED NURSE ANESTHETISTS WHO HAVE NATIONAL BOARD
30 CERTIFICATION IN ANESTHESIOLOGY.

31 C. The board may conduct an investigation on receipt of information
32 that indicates that a person or regulated party may have violated this
33 chapter or a rule adopted pursuant to this chapter. Following the
34 investigation, the board may take disciplinary action pursuant to this
35 chapter.

36 D. The board may limit, revoke or suspend the privilege of a nurse
37 to practice in this state granted pursuant to section 32-1668.

38 E. Failure to comply with any final order of the board, including
39 an order of censure or probation, is cause for suspension or revocation of
40 a license or a certificate.

41 F. The president or a member of the board designated by the
42 president may administer oaths in transacting the business of the board.

1 Sec. 5. Section 32-1803, Arizona Revised Statutes, is amended to
2 read:

3 32-1803. Powers and duties

4 A. The board shall:

5 1. Protect the public from unlawful, incompetent, unqualified,
6 impaired and unprofessional practitioners of osteopathic medicine.

7 2. Issue licenses, conduct hearings, place physicians on probation,
8 revoke or suspend licenses, enter into stipulated orders, issue letters of
9 concern or decrees of censure and administer and enforce this chapter.

10 3. Maintain a record of its acts and proceedings, including the
11 issuance, denial, renewal, suspension or revocation of licenses to
12 practice according to this chapter. The board shall delete records of
13 complaints only as follows:

14 (a) If the board dismisses a complaint, the board shall delete the
15 public record of the complaint five years after ~~it~~ THE BOARD dismissed the
16 complaint.

17 (b) If the board has issued a letter of concern but has taken no
18 further action on the complaint, the board shall delete the public record
19 of the complaint five years after ~~it~~ THE BOARD issued the letter of
20 concern.

21 (c) If the board has required additional continuing medical
22 education pursuant to section 32-1855 but has not taken further action,
23 the board shall delete the public record of the complaint five years after
24 the person satisfies this requirement.

25 4. Maintain a public directory of all ~~osteopathic~~ physicians and
26 surgeons who are or were licensed pursuant to this chapter that includes:

27 (a) The name of the physician.

28 (b) The physician's current or last known address of record.

29 (c) The date and number of the license issued to the physician
30 pursuant to this chapter.

31 (d) The date the license is scheduled to expire if not renewed or
32 the date the license expired or was revoked, suspended or canceled.

33 (e) Any disciplinary actions taken against the physician by the
34 board.

35 (f) Letters of concern, remedial continuing medical education
36 ordered and dismissals of complaints against the physician until deleted
37 from the public record pursuant to paragraph 3 of this subsection.

38 5. Adopt rules regarding the regulation, qualifications and
39 training of medical assistants. The training requirements for a medical
40 assistant may be satisfied through a training program that meets all of
41 the following:

42 (a) Is designed and offered by a physician.

43 (b) Meets or exceeds any of the approved training program
44 requirements specified in rule.

- 1 (c) Verifies the entry-level competencies of a medical assistant as
2 prescribed by rule.
- 3 (d) Provides written verification to the individual of successful
4 completion of the program.
- 5 6. Discipline and rehabilitate osteopathic physicians.
- 6 7. Determine whether a prospective or current Arizona licensed
7 physician has the training or experience to demonstrate the physician's
8 ability to treat and manage opiate-dependent patients as a qualifying
9 physician pursuant to 21 United States Code section 823(g)(2)(G)(ii).
- 10 8. ISSUE PERMITS TO ADMINISTER GENERAL ANESTHESIA AND DEEP SEDATION
11 IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272 TO
12 PHYSICIANS WHO HAVE COMPLETED RESIDENCY TRAINING IN ANESTHESIOLOGY.
- 13 B. The public records of the board are open to inspection at all
14 times during office hours.
- 15 C. The board may:
- 16 1. Adopt rules necessary or proper to administer this chapter.
- 17 2. Appoint one of its members to the jurisdiction arbitration panel
18 pursuant to section 32-2907, subsection B.
- 19 3. Accept and spend federal monies and private grants, gifts,
20 contributions and devises. These monies do not revert to the state
21 general fund at the end of a fiscal year.
- 22 4. Develop and publish advisory opinions and standards governing
23 the profession.
- 24 D. The board shall adopt and use a seal, the imprint of which,
25 together with the signature of either the president, vice president or
26 executive director, is evidence of its official acts.
- 27 E. In conducting investigations pursuant to this chapter, the board
28 may receive and review confidential internal staff reports relating to
29 complaints and malpractice claims.
- 30 F. The board may make available to academic and research
31 organizations public records regarding statistical information on doctors
32 of osteopathic medicine and applicants for licensure.