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BILL ANALYSIS

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House Bill 5025 (as reported without amendment)
Sponsor: Representative Dave Hildenbrand
House Committee: Health Policy
Senate Committee: Health Policy

Date Completed: 12-6-05

RATIONALE

Under the Public Health Code, if the completion of continuing education is a condition for renewal of a license or registration issued under Article 15 of the Code (which governs health occupations), the appropriate board must, by rule, require an applicant for renewal to complete an appropriate number of hours or courses in pain and symptom management.

These provisions do not apply to an individual licensed to engage in the practice as a dental hygienist under Part 166 (which governs dental practitioners). Under Rule 338.11704 of the Michigan Administrative Code, dental hygienists are subject to continuing education requirements for the renewal of a license; there is no requirement, however, that any of the courses pertain specifically to pain and symptom management.

Over the last several years, amendments to the Public Health Code have been enacted to allow dental hygienists to administer nitrous oxide analgesia and local anesthesia. In light of this expanded scope of practice, it has been suggested that dental hygienists should be subject to training in pain and symptom management.

CONTENT

The bill would amend the Public Health Code to remove an exemption for dental hygienists from a requirement that health professionals complete training in pain and symptom management for license renewal.

MCL 333.16204

ARGUMENTS

(Please note: The arguments contained in this analysis originate from sources outside the Senate Fiscal Agency. The Senate Fiscal Agency neither supports nor opposes legislation.)

Supporting Argument

Dental hygienists currently are exempt from the pain and symptom management continuing education requirement to which other health professionals are subject. Dental hygienists, however, engage in pain management on a daily basis, and, over the last few years, their scope of practice has been expanded to include the administration of local anesthesia and nitrous oxide analgesia. The bill would not mandate any additional continuing education credits, but simply would require that an appropriate number of hours or courses, to be determined by the Board of Dentistry, be dedicated to pain and symptom management. Particularly since the alleviation of discomfort and pain is an integral part of a hygienist's duties, the exemption should be eliminated.

Opposing Argument

The Code requires a dental hygienist who wishes to administer local anesthesia or nitrous oxide to fulfill additional educational requirements and pass a State or regional board-written exam to receive certification to perform those functions from the Department of Community Health. The Code specifies that application for certification is at the discretion of each individual hygienist; thus, it would be unnecessary to require all dental hygienists to complete courses in pain and symptom management.

Response: Regardless of whether a hygienist chooses to obtain certification to

administer local anesthesia or nitrous oxide, alleviating discomfort and pain is a central component of the occupation. All hygienists could benefit from the training, and patient care would be improved.

Opposing Argument

There are other health concerns that could be addressed through curriculum requirements that are just as significant as the management of pain, such as infection control, latex allergies, recognizing signs of physical abuse, the detrimental effects of tobacco, or responding appropriately to adverse events in dental offices. According to an article entitled, "Adverse Sedation Events in Pediatrics: A Critical Incident Analysis of Contributing Factors" (*Pediatrics*, April 2000), many critical incidents related to pediatric sedation in a nonhospital setting have occurred in dentists' offices. Of the 95 adverse reaction cases studied, 32 occurred in dental offices. Of those, 29 patients suffered permanent neurological injury or died. Critical incidents can occur even when pain medication has been administered correctly. What matters most in these situations is the health professional's ability to resuscitate a person who has had a severe adverse reaction. If legislation is going to mandate specific curricula, pain management might not be the most appropriate topic. Pain management inherently is an essential component in the training of dental hygienists, even though it is not required by statute. Furthermore, the Code specifies that the course required for certification to administer local anesthesia and nitrous oxide must include the selection of pain control modalities, if such a course is available. Given the training in pain and symptom management that dental hygienists already receive as part of their education, it is not likely that one additional course would result in a significant improvement in patient care.

Response: Perhaps requiring other course content should be examined; however, that patient care might be improved by requiring training in other areas does not mean that dental hygienists should continue to be exempt from a requirement that applies to other health professionals.

Legislative Analyst: Julie Koval

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.