



**COURTESY APPLICATION FOR PEDIATRIC ENDORSEMENT FOR  
 MODERATE SEDATION PERMIT**

<p><b>FEES</b>          Application Fee: \$532.00          (Must be enclosed with application)</p> <p><b>APPLICATION FEES          ARE NON-REFUNDABLE</b></p>
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<p><i>For Office Use Only</i></p> <p>Rec # _____</p> <p>FeePd _____</p> <p>Date          Cashiered _____</p> <p>Entity# _____</p> <p>File # _____</p>
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<p><i>For Office Use Only</i></p>       <p>Date Received</p>
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\*To successfully apply for a Pediatric Endorsement for Moderate Sedation Permit to administer moderate sedation to a patient under 13 years of age and/or 7 years of age, this application must be completed in its entirety unless the information requested is indicated as optional.

\*Any material misrepresentation of any information on the application is grounds for denial or subsequent revocation of the permit.

\*Under Business and Professions Code sections 31 and 494.5, the California Department of Tax and Fee Administration (CDTFA) and the Franchise Tax Board (FTB) may share taxpayer information with the Board. You are required to pay your state tax obligation. This application may be denied, or your permit may be suspended if you have a state tax obligation that is not paid or your name appears on the State Board of Equalization, the CDTFA or FTB certified list of top 500 tax delinquencies.

(PLEASE PRINT CLEARLY OR TYPE)

1. SSN/ITIN	2. DATE OF BIRTH (MM/DD/YYYY)
3. LEGAL NAME: LAST	FIRST MIDDLE
4. MAILING ADDRESS (ADDRESS OF RECORD -- ADDRESS MAY BE A P.O. BOX):	
5. PRIMARY PRACTICE LOCATION (PHYSICAL ADDRESS)	
6. EMAIL ADDRESS [OPTIONAL]:	
7. TELEPHONE NUMBER:	
8. DENTIST LICENSE NUMBER:	

9. MODERATE SEDATION PERMIT NUMBER (if any):	
10. INDICATE THE PEDIATRIC ENDORSEMENT FOR MODERATE SEDATION FOR WHICH YOU ARE APPLYING: <input type="checkbox"/> PEDIATRIC PATIENTS UNDER 13 YEARS OF AGE <input type="checkbox"/> PEDIATRIC PATIENTS UNDER 7 YEARS OF AGE <input type="checkbox"/> BOTH: PEDIATRIC PATIENTS UNDER 13 YEARS OF AGE AND UNDER 7 YEARS OF AGE	
11. ARE YOU SERVING IN, OR HAVE YOU PREVIOUSLY SERVED IN, THE MILITARY?	
12. DO YOU POSSESS THE TRAINING, EQUIPMENT, AND SUPPLIES TO RESCUE A PATIENT FROM AN UNINTENDED DEEPER LEVEL OF SEDATION?	
13. HAVE YOU SUCCESSFULLY COMPLETED A RESIDENCY IN PEDIATRIC DENTISTRY ACCREDITED BY THE COMMISSION ON DENTAL ACCREDITATION (CODA) OR THE EQUIVALENT TRAINING IN PEDIATRIC MODERATE SEDATION, AS DETERMINED BY THE BOARD? IF SO, ATTACH EVIDENCE OF SUCCESSFUL COMPLETION OF SUCH RESIDENCY.	YES <input type="checkbox"/> NO <input type="checkbox"/>
14. DO YOU HAVE CURRENT CERTIFICATION IN PEDIATRIC ADVANCED LIFE SUPPORT (PALS) AND AIRWAY MANAGEMENT AS PROVIDED BY THE AMERICAN RED CROSS (ARC), THE AMERICAN HEART ASSOCIATION (AHA), OR THE AMERICAN SAFETY AND HEALTH INSTITUTE (ASHI)? IF SO, ATTACH EVIDENCE OF SUCH CURRENT CERTIFICATION.	YES <input type="checkbox"/> NO <input type="checkbox"/>
15. FOR A PEDIATRIC ENDORSEMENT TO PROVIDE MODERATE SEDATION TO PATIENTS UNDER 13 YEARS OF AGE, HAVE YOU COMPLETED AT LEAST 20 CASES OF MODERATE SEDATION TO PATIENTS UNDER 13 YEARS OF AGE? IF SO, ATTACH EVIDENCE OF SUCCESSFUL COMPLETION OF SUCH 20 CASES (Use Form PE-1).	YES <input type="checkbox"/> NO <input type="checkbox"/>
16. FOR A PEDIATRIC ENDORSEMENT TO PROVIDE MODERATE SEDATION TO PATIENTS UNDER SEVEN YEARS OF AGE, HAVE YOU COMPLETED AT LEAST 20 CASES OF MODERATE SEDATION TO PATIENTS UNDER SEVEN YEARS OF AGE IN THE 24-MONTH TIME PERIOD DIRECTLY PRECEDING THIS APPLICATION? IF SO, ATTACH EVIDENCE OF SUCCESSFUL COMPLETION OF SUCH 20 CASES (Use Form PE-1).	YES <input type="checkbox"/> NO <input type="checkbox"/>

**Certification** - I certify under the penalty of perjury under the laws of the State of California that the foregoing information, including any attachments, is true and correct.

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Date Signature of Applicant

**INFORMATION COLLECTION AND ACCESS** Except for the email address, the information requested herein is mandatory to obtain a pediatric endorsement and is maintained by the Dental Board of California (Board), 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, Executive Officer, 916-263-2300, in accordance with Business and Professions Code (BPC) section 1600 et seq. The Board collects the personal information requested on this form as authorized by BPC sections 27, 30, 31, 114.5, 494.5, 1647.3, 1715, and California Code of Regulations, title 16, section 1043.8.1. The Board uses this information to identify and evaluate applicants for permit or licensure, issue and renew licenses, and enforce licensing standards set by law.

Failure to provide all or any part of the requested information will result in the rejection of the application as incomplete. Disclosure of your Individual Taxpayer Identification Number or Social Security Number is mandatory and collection is authorized by BPC sections 29.5, 30, 31, and 494.5 and Pub. L 94-455 (42 U.S.C.A. § 405(c)(2)(C)). Your Individual Taxpayer Identification Number or Social Security Number will be used exclusively for tax enforcement purposes, for compliance with any judgment or order for family support in accordance with Family Code section 17520, measurement of employment outcomes of students who participate in career technical education programs offered by the California Community Colleges as required by BPC section 30, or for verification of licensure or examination status by a licensing or examination board, and where licensing is reciprocal with the requesting state. If you fail to disclose your Individual Taxpayer Identification Number or Social Security Number, you may be reported to the FTB and be assessed a penalty of \$100.

Each individual has the right to review the personal information maintained by the Board unless the records are exempt from disclosure by the Information Practices Act, including Civil Code section 1798.40. The Board makes every effort to protect the personal information you provide us; however, it may be disclosed in response to a California Public Records Act request as allowed by the Information Practices Act, to another government agency as required by state or federal law or Civil Code section 1798.24; or in response to a court or administrative order, a subpoena, or a search warrant. Your name and address of record listed on this application will be disclosed to the public upon request if and when you become licensed.

BUSINESS AND PROFESSIONS CODE § 1647.2. Requirements for administration of moderate sedation on outpatient basis; Requirements for administration to pediatric patients; Applicability

(a) A dentist may administer or order the administration of moderate sedation on an outpatient basis for a dental patient if one of the following conditions is met:

(1) The dentist possesses a current license in good standing and either holds a valid general anesthesia permit or obtains a moderate sedation permit.

(2) The dentist possesses a current permit under Section 1638 or 1640 and either holds a valid general anesthesia permit or obtains a moderate sedation permit.

(b) A dentist shall obtain a pediatric endorsement on the moderate sedation permit prior to administering moderate sedation to a patient under 13 years of age.

(c)(1) A dentist who orders the administration of moderate sedation shall be physically present in the treatment facility while the patient is sedated.

(2) For patients under 13 years of age, there shall be at least two support personnel in addition to the operating dentist present at all times during the procedure involving moderate sedation. The operating dentist and one personnel member shall maintain current certification in Pediatric Advanced Life Support (PALS) and airway management or other board-approved training in pediatric life support and airway management, adopted pursuant to Section 1601.8. The personnel member with current certification in Pediatric Advanced Life Support (PALS) and airway management or other board-approved training in pediatric life support and airway management shall be dedicated to monitoring the patient during the procedure involving moderate sedation and may assist with interruptible patient-related tasks of short duration, such as holding an instrument.

(d) A dentist with a moderate sedation permit or a moderate sedation permit with a pediatric endorsement shall possess the training, equipment, and supplies to rescue a patient from an unintended deeper level of sedation.

(e) This article shall not apply to the administration of local anesthesia, minimal sedation, deep sedation, or general anesthesia.

*(Added Stats 2018 ch 929 § 6 (SB 501), effective January 1, 2019, operative January 1, 2022.)*

§ 1647.3. Moderate sedation permit application procedure and requirements; Pediatric endorsement requirements

(a) A dentist who desires to administer or to order the administration of moderate sedation shall apply to the board on an application form prescribed by the board. The dentist shall submit an application fee and produce evidence showing that he or she has successfully completed training in moderate sedation that meets the requirements of subdivision (c).

(b) The application for a permit shall include documentation that equipment and drugs required by the board are on the premises.

(c) Training in the administration of moderate sedation shall be acceptable if it meets all of the following as approved by the board:

(1) Consists of at least 60 hours of instruction.

(2) Requires satisfactory completion of at least 20 cases of administration of moderate sedation for a variety of dental procedures.

(3) Complies with the requirements of the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students of the American Dental Association, including, but not limited to, certification of competence in rescuing patients from a deeper level of sedation than intended, and managing the airway, intravascular or intraosseous access, and reversal medications.

(d) A dentist may apply for a pediatric endorsement for a moderate sedation permit by confirming all of the following:

(1) Successful completion of residency in pediatric dentistry accredited by the Commission on Dental Accreditation (CODA) or the equivalent training in pediatric moderate sedation, as determined by the board.

(2) Successful completion of at least 20 cases of moderate sedation to patients under 13 years of age to establish competency in pediatric moderate sedation, both at the time of the initial application and at renewal. The applicant or permit holder shall maintain and shall provide proof of these cases upon request by the board for up to three permit renewal periods.

(3) In order to provide moderate sedation to children under seven years of age, a dentist shall establish and maintain current competency for this pediatric population by completing 20 cases of moderate sedation for children under seven years of age in the 24-month period immediately preceding application for the pediatric endorsement and for each permit renewal period.

(4) Current certification in Pediatric Advanced Life Support (PALS) and airway management or other board-approved training in pediatric life support and airway management, adopted pursuant to Section 1601.8.

(e) A permit holder shall maintain current and continuous certification in Pediatric Advanced Life Support (PALS) and airway management or other board-approved training in pediatric life support and airway management, adopted pursuant to Section 1601.8, for the duration of the permit.

(f) Applicants for a pediatric endorsement who otherwise qualify for the pediatric endorsement but lack sufficient cases of moderate sedation to patients under 13 years of age may administer moderate sedation to patients under 13 years of age under the direct supervision of a general anesthesia or moderate sedation permit holder with a pediatric endorsement. The applicant may count these cases toward the 20 required in order to qualify for the applicant's pediatric endorsement.

(g) Moderate sedation permit holders with a pediatric endorsement seeking to provide moderate sedation to children under seven years of age, but who lack sufficient cases of moderate sedation to patients under seven years of age pursuant to paragraph (3) of subdivision (d), may administer moderate sedation to patients under seven years of age under the direct supervision of a permit holder who meets those qualifications.

*(Added Stats 2018 ch 929 § 6 (SB 501), effective January 1, 2019, operative January 1, 2022.)*

CALIFORNIA CODE OF REGULATIONS, TITLE 16, § 1043.8.1. Application for Pediatric Endorsement; Documentation of 20 General Anesthesia or Moderate Sedation Cases; Additional Requirements for Applicant Investigation; Legible Copies of Records.

(a) For the purposes of Sections 1646.2(c) and 1646.9 of the Code, submission of a completed application to the Board for a pediatric endorsement for a general anesthesia permit shall include the following information and documents:

(1) Name, mailing address or address of record, physical address, dental or medical license number, and applicant's general anesthesia permit number, if any;

(2) A certificate of completion or other documentary evidence showing completion of a residency training program as required by Section 1646.2 for a dental licensee or Section 1646.9 for a physician and surgeon licensee;

(3) A completed Form PE-1 (05/2021) "Documentation of Deep Sedation and General Anesthesia or Moderate Sedation Cases for Pediatric

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Endorsement,” which is hereby incorporated by reference;

(4) A certificate or other documentary evidence of current certification in Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) as provided by the American Red Cross (ARC), the American Heart Association (AHA), or the American Safety and Health Institute (ASHI);

(5) An application fee as set forth in section 1021; and,

(6) A certification, under penalty of perjury, by the applicant that the information on the application is true and correct.

(b) For the purpose of Section 1647.3(d) of the Code, submission of a completed application to the Board for a pediatric endorsement for a moderate sedation permit for patients under thirteen years of age shall include the following information and documents:

(1) Name, mailing address or address of record, physical address, dental license number, and applicant’s moderate sedation permit number, if any;

(2) A certificate of completion or other documentary evidence showing completion of a residency training program as required by Section 1647.3 of the Code;

(3) A completed Form PE-1 as provided in this section;

(4) A certificate or other documentary evidence of current certification in Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) as provided by the American Red Cross (ARC), the American Heart Association (AHA), or the American Safety and Health Institute (ASHI);

(5) An application fee as set forth in section 1021; and,

(6) A certification, under penalty of perjury, by the applicant that the information on the application is true and correct.

(c) Upon request by the Board in any investigation of the information provided on Form PE-1, applicants shall also provide documentation or patient records for each deep sedation and general anesthesia or moderate sedation pediatric case listed on Form PE-1, including preoperative evaluation, medical history, monitoring of vital signs throughout the procedure, and condition at discharge.

(d) Applicants shall submit legible copies of the information required by this section with pediatric patient identifying information redacted.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 27, 108, 1611.5, 1646.1, 1646.2, 1647.2 and 1647.3, 1646.9, Business and Professions Code.