

Georgia Composite Medical Board

Executive Director
Daniel R. Dorsey, MBA



Chairperson
Matthew Norman, MD

Vice Chairperson
Andrew Reisman, MD

2 Peachtree Street, NW • 6th Floor • Atlanta, Georgia 30303 • (404) 656-3913 • www.medicalboard.georgia.gov

NOTICE OF INTENT TO AMEND AND/OR ADOPT RULES

TO ALL INTERESTED PARTIES:

Notice is hereby given that pursuant to the authority set forth below, the Georgia Composite Medical Board (hereinafter "Board") proposes amendments to the Georgia Composite Medical Board Rules by creating **Chapter 360-41 "Sedation in Physician Offices and Medispas"** and adopting **Rule 360-41-.01 "Definitions."** An exact copy of the proposed rule is attached to this Notice.

This notice, together with an exact copy of the proposed rules and a synopsis of the proposed amendments may be reviewed between 8:00 a.m. and 4:00 p.m., Monday through Friday, except official state holidays, at 2 Peachtree Street, NW, 6th Floor, Atlanta, GA 30303. These documents can also be reviewed online at <https://medicalboard.georgia.gov/board/notice-intent-amendadopt-rules>.

A public hearing is scheduled to begin at **8:30 a.m. on January 5, 2023, via TEAMS** to provide the public an opportunity to comment upon and provide input into the proposed rules. At the public hearing, any interested person may present data, make a statement or comment, or offer a viewpoint or argument orally or in writing. Lengthy statements and statements of a considerable technical or economic nature, as well as previously recorded messages, must be submitted for the official record. Oral statements should be concise and will be limited to five minutes per person. Additional comments should be presented in writing. To ensure their consideration, submit all written comments by **December 22, 2022, to Kierra.Battle@dch.ga.gov** or via mail to the Georgia Composite Medical Board Rules Committee at 2 Peachtree Street, NW, 6th Floor, Atlanta, Georgia 30303.

The Board voted to adopt this Notice of Intent on **December 1, 2022**. Upon conclusion of the public hearing on **January 5, 2023**, the Board will consider whether the formulation and adoption of these proposed rule amendments imposes excessive regulatory costs on any license or entity, and whether any cost to comply with the proposed rule amendments could be reduced by a less expensive alternative that accomplishes the objectives of the statutes which are the basis of the proposed rule. Additionally, the Board will consider whether it is legal or feasible in meeting the objectives of the applicable laws to adopt or implement differing actions for businesses as listed in O.C.G.A. § 50-13-4(3)(A), (B), (C), and (D).

This Notice is adopted and posted in compliance with O.C.G.A. § 50-13-4 of the Georgia Administrative Procedures Act. A synopsis of the proposed rules and an economic impact statement are attached to this Notice. The authority for promulgation of these rules is O.C.G.A. Secs. 43-34-5, 43-34-103, and 43-34-108.

Issued this day December 1, 2022.

Daniel R. Dorsey
Executive Director

ECONOMIC IMPACT AND SYNOPSIS FOR

RULE CHAPTER 360-41 Sedation in Physician Offices and Medispas

ECONOMIC IMPACT:

The attached rules are promulgated under the authority of the Medical Practice Act, Title 43, Chapter 34. The Georgia Composite Medical Board licenses and regulates nine professions. The formulation and adoption of these rules do not impose excessive regulatory cost on any licensee, and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. Additionally, it is not legal or feasible to meet the objectives of the Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated to adopt or implement differing actions for businesses listed in O.C.G.A. §50-13-4(a)(3)(A), (B), (C) and (D).

RULE SYNOPSIS:

Rule 360-41-.01 “Definitions”

Purpose/Main Features: The purpose of the proposed rule is to provide guidance for the use of sedation, analgesia and/or anesthesia in physician offices and medispas.

Authority: O.C.G.A. § 43-34-47

Rule 360-41-.01 Definitions

For purposes of this Chapter, the following definitions apply:

- (1) "Deep sedation/analgesia" means a drug-induced depression of consciousness during which the patient cannot be easily aroused but can respond purposefully following repeated or painful stimulation.
- (2) "General anesthesia" means a state of unconsciousness intentionally produced by anesthetic agents with absence of pain sensation over the entire body, in which the patient's protective airway reflexes may be impaired and the patient may be unable to maintain a patent natural airway. Sedation that progresses to the point at which the patient's protective airway reflexes are impaired and the patient is unable to maintain a patent natural airway is considered general anesthesia.
- (3) "Major conduction anesthesia" means the administration of a drug or combination of drugs to interrupt nerve impulses without loss of consciousness, such as epidural, caudal, or spinal anesthesia, lumbar or brachial plexus blocks, and intravenous regional anesthesia. Major conduction anesthesia does not include isolated blockade of small peripheral nerves, such as digital nerves.
- (4) "Medispa" means a facility that offers a range of services for the purpose of improving an individual's well-being or appearance including medical and surgical procedures such as liposuction, laser procedures, intense pulsed light, and injection of cosmetic filling agents and neurotoxins in a nontraditional setting.
- (5) "Minimal sedation" means a drug-induced state during which the patient responds normally to verbal commands.
- (6) "Moderate sedation/analgesia" means a drug-induced depression of consciousness during which the patient responds purposefully to verbal commands, either alone or accompanied by tactile stimulation.
- (7) "Office based surgery" means any surgery or invasive medical procedure requiring sedation, when performed in a location other than a hospital, hospital associated surgical center, or an ambulatory surgical facility, including but not limited to, physicians' offices and medispas.
- (8) "Rescue" means an intervention by a practitioner proficient in airway management and advanced life support to correct adverse physiologic consequences of the deeper-than-intended level of sedation and to return the patient to the originally intended level of sedation.
- (9) "Sedation" means minimal sedation, moderate sedation/analgesia, deep sedation/analgesia, or general anesthesia. This term shall not include local infiltration.