



PERMANENT ADMINISTRATIVE ORDER

OMB 2-2025
CHAPTER 847
OREGON MEDICAL BOARD

FILED

01/13/2025 1:58 PM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Updates office-based surgery requirements for lipoplasty procedures.

EFFECTIVE DATE: 01/13/2025

AGENCY APPROVED DATE: 01/09/2025

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AMEND: 847-017-0003

RULE TITLE: Classification of Office-Based Surgery

NOTICE FILED DATE: 10/09/2024

RULE SUMMARY: The rule amendment updates the requirements for lipoplasty procedures involving more than 500 cc volume of supernatant fat to add, "whether temporarily or permanently removed, or surgeries involving prone, semi-prone, or any positioning which would compromise the patient's airway must be performed as a Level II or Level III surgical procedure." Already by rule lipoplasty procedures may not result in the removal of more than 5% of total body weight or 4500 cc or more volume of supernatant fat, whichever is less. The rule amendment clarifies this includes temporary or permanent removal.

RULE TEXT:

Office-based surgeries are classified by complexity.

(1) Level I are minor surgical procedures performed without anesthesia or under topical, local, or minor conduction block anesthesia not involving drug-induced alteration of consciousness, other than minimal sedation utilizing preoperative oral anxiolytic medications.

(a) The licensee must pursue continuing medical education in the field for which the services are being provided and in the proper drug dosages, management of toxicity, and hypersensitivity to local anesthetic and other drugs.

(b) The licensee must maintain active American Heart Association Basic Life Support (BLS) certification or equivalent CPR course that includes a practical skills evaluation.

(2) Level II are minor or major surgical procedures performed under moderate sedation/analgesia, such as oral, parenteral, or intravenous sedation or under analgesic or dissociative drugs.

(a) In addition to the requirements in section (1) of this rule, the licensee must:

(A) Maintain board certification or board eligibility in a specialty recognized by the American Board of Medical Specialties (ABMS), the American Osteopathic Association's Bureau of Osteopathic Specialists (AOA-BOS), the American Board of Podiatric Medicine (ABPM), the American Board of Foot and Ankle Surgery (ABFAS) or the National Commission on Certification of Physician Assistants (NCCPA), or

(B) Obtain fifty hours each year of accredited continuing medical education (CME) relevant to the Level II surgical procedures to be performed in the office-based facility. This requirement may not be satisfied with cultural competency

CME or other CME that is only generally relevant to the licensee's practice.

(b) The licensee must maintain active American Heart Association Advanced Cardiovascular Life Support (ACLS) certification or equivalent ACLS course that includes a practical skills evaluation. The licensee must be on site at all times when patients are under the effects of anesthetic.

(c) The licensee administering anesthesia must evaluate and document the ASA Physical Status of the patient.

(d) The patient must be appropriately monitored as defined in 847-017-0005.

(3) Level III are major surgical procedures that require deep sedation/analgesia, general anesthesia, or regional blocks, and require support of vital bodily functions.

(a) In addition to the requirements in section (1) of this rule, the licensee must:

(A) Have staff privileges to perform the same procedure in a hospital or ambulatory surgical center, or

(B) Maintain board certification or board eligibility in an appropriate specialty recognized by the ABMS, the AOA-BOS, the ABPM, the ABFAS or the NCCPA.

(b) The licensee must maintain active American Heart Association Advanced Cardiovascular Life Support (ACLS) certification or equivalent ACLS course that includes a practical skills evaluation. The licensee must be on site at all times when patients are under the effects of anesthetic.

(c) The licensee administering anesthesia must evaluate and document the ASA Physical Status of the patient.

(d) The patient must be appropriately monitored as defined in 847-017-0005.

(e) The licensee performing the procedure may not administer anesthesia other than additional local anesthesia and may not be primarily responsible for monitoring anesthesia during the procedure.

(4) Procedures or treatments involving the injection of a medication or substance for cosmetic purposes are the practice of medicine and must be performed as an office-based surgical procedure.

(5) Lipoplasty involving the removal of 500 cc or less volume of supernatant fat may be performed as a Level I surgical procedure. Office-based lipoplasty involving more than 500 cc volume of supernatant fat, whether temporarily or permanently removed, or surgeries involving prone, semi-prone, or any positioning which would compromise the patient's airway must be performed as a Level II or Level III surgical procedure.

(a) The performance of lipoplasty in an office-based setting may not result in the temporary or permanent removal of more than 5% of total body weight or 4500 cc or more volume of supernatant fat, whichever is less.

(b) The licensee may not use more than 55 mg/kg of Lidocaine or 70 mcg/kg of epinephrine for tumescent anesthesia. The concentration of epinephrine in tumescent solutions may not exceed 1.5 mg/L.

(6) The following may not be performed in an office-based surgical facility:

(a) Procedures that may result in blood loss of more than 4% of the estimated blood volume in a patient with a normal hemoglobin;

(b) Procedures requiring intracranial, intrathoracic, or abdominal cavity entry;

(c) Joint replacement procedures; and

(d) Level II or Level III procedures on patients with an ASA Physical Status IV or higher.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.265