

Measurable Elements of ASC.01.00

1. The hospital provides sedation and anesthesia services that meet the needs of the patients the hospital serves.
 2. The hospital provides sedation and anesthesia services that comply with laws and regulations.
 3. The hospital provides sedation and anesthesia services that comply with professional practice standards for care.
 4. A qualified individual(s) assumes professional responsibility for the anesthesia services provided regardless of the location at the hospital. Responsibilities include the following:
 - Developing, implementing, and maintaining policies and procedures
 - Providing administrative oversight
 - Maintaining any necessary quality improvement programs
 - Monitoring and reviewing all sedation and anesthesia services
 5. This qualified individual(s) is responsible for managing the sedation and anesthesia services, including ensuring the following:
 - Sedation and anesthesia services are uniform throughout the hospital.
 - Sedation and anesthesia services are available at all times for emergencies.
 - The responsibilities for monitoring and reviewing all sedation and anesthesia services are defined and carried out.
 6. ⑩ The hospital has a process for the selection of contract anesthesia services that includes the following:
 - An updated contract anesthesia service list must be used to select contract anesthesia services approved by hospital leaders and the qualified individual(s) professionally responsible for anesthesia services.
 - The contract anesthesia service must have acceptable records of performance and follow applicable laws and regulations.
 - The hospital must have a record of all the completed training and education for each contract anesthesia staff as required by the hospital.
 - There is a current contract in place when contract anesthesia services are used.
- (See also GLD.05.00, ME 3)

Sedation Care

Standard ASC.02.00

The administration of procedural sedation is standardized throughout the hospital.

Intent of ASC.02.00

Procedural sedation is often performed in many areas of the hospital outside of the operating theatre. Clinical practice guidelines and standardization of practices have demonstrated improvement in outcomes; in particular, processes that include protocols and checklists, which have proven to reduce patient harm through standardization and communication. As a result, standardized processes optimize moderate procedural sedation practices regardless of the site where the service is performed; guide appropriate patient selection; decrease the risk of adverse patient outcomes (for example, apnea, airway obstruction, respiratory arrest, cardiac arrest, death); promote sedation education, training, and research; and encourage the use of evidence-based data to promote cross-specialty uniformity for moderate sedation practices.

Procedural sedation is defined as “the technique of administering sedatives or dissociative agents with or without analgesics to an individual, in any setting, by any route, to induce an altered state of consciousness that allows the patient to tolerate painful or unpleasant procedures while preserving cardiorespiratory function.” Regardless

of the medication, dose, or route of administration, when a medication is used for the purposes of altering the patient's cognitive state in order to facilitate a specific procedure, it is considered procedural sedation.

Hospitals develop specific guidelines for how and where procedural sedation may be used. The qualifications of staff participating in the procedure, the medical equipment, the supplies, and the monitoring must be the same wherever procedural sedation is provided in the hospital. Certain medications may be used in conjunction for certain populations (for example nitrous oxide used in conjunction with other analgesics for pediatric patients during moderate and deep sedation). For patients under care for procedural sedation, individuals from both the nursing and the medical staff who are trained in advanced life support and emergency medical equipment and supplies appropriate for the age and history of the patient and the type of procedure being performed are immediately available.

Measurable Elements of ASC.02.00

1. Ⓢ The hospital has established a written policy and standardized processes for procedural sedation throughout the hospital.
2. Ⓢ Policy and practice for procedural sedation are understood by all practitioners permitted to administer procedural sedation, and the policies address at least the following:
 - Areas in the hospital where procedural sedation may occur
 - Special qualifications or skills of staff involved in the procedural sedation process
 - Differences between pediatric, adult, and geriatric populations or other special considerations
 - Medications used in conjunction with certain populations
 - Immediate availability and use of specialized medical equipment, as appropriate to the patient
 - Informed consent process for both the procedure and the use of sedation
 - An individual with advanced life-support training is immediately available for patients under care for procedural sedation or anesthesia.

(See also SQE.01.08, ME 2)

Standard ASC.02.01

Practitioners responsible for procedural sedation and staff responsible for monitoring patients receiving procedural sedation are qualified.

Intent of ASC.02.01

Complications related to procedural sedation primarily include cardiac or respiratory depression. Thus, certification in at least basic life support is essential. In addition, knowledge of the pharmacology of the sedation agents used, as well as reversal agents, decreases the risks of adverse outcomes. The qualifications of the physician, dentist, or other staff responsible for the patient receiving procedural sedation are important. Understanding the methods for procedural sedation as they relate to the patient and the type of procedure performed improves the patient's tolerance of an uncomfortable or painful procedure and decreases the risks of complications.

The health care practitioner performing the procedure should not be responsible for performing continuous monitoring of the patient. A separate, qualified individual, such as an anesthesiologist or a trained and competent nurse, should assume responsibility for providing uninterrupted monitoring of the patient's physiological parameters and assistance in supportive or resuscitative measures.