

Standard Intent:

Post-anesthesia patients are safely transported to the recovery room under the supervision of a qualified staff. Physiological monitoring must be carried out during transfer till the patient is handed over and re-evaluated. The overall monitoring process, and the results must be documented in the patient's record.

AN.10 Qualified staff members provide post-anesthesia care in the recovery room.

AN.10.1 Qualified anesthesiologist is in charge of the recovery room at all times.

AN.10.2 Qualified staff members provide post-anesthesia care in the recovery room.

Standard Intent:

Qualified anesthesiologist should be in charge of the recovery room. The post-anesthesia care in the recovery room must be provided by a qualified member of staff.

AN.11 Post-anesthesia patients are continuously monitored and managed in the recovery room.

AN.11.1 A policy defines the monitoring requirements for patients during post-anesthesia phase.

AN.11.2 There is a recovery from anesthesia record for documentation of monitoring findings and services provided in the recovery room.

Standard Intent:

There must be a policy that defines the continuous monitoring and management of patients in the recovery room and its documentation in the patient medical record.

AN.12 Patients are safely discharged from the recovery room.

AN.12.1 There are written criteria for the discharge of patients from the recovery room.

AN.12.2 Staff in the recovery room are familiar with the discharge criteria.

AN.12.3 Patients are discharged from the recovery room when the discharge criteria are met.

AN.12.4 Patients are discharged from the recovery room by a qualified anesthesiologist or another qualified individual.

AN.12.5 Time of discharge from the recovery room and the handover process to unit staff are documented.

Standard Intent:

Discharge from the post-anesthesia recovery areas or discontinuation of recovery monitoring must be carried out by a fully qualified anesthesiologist according to an approved criterion. The time of discharge and the handover process to the unit must be documented in the patient medical record.

AN.13 Moderate and deep sedation/analgesia are performed only in areas identified in a hospital policy.

AN.13.1 The hospital identifies in a policy where moderate and deep sedation/analgesia are performed.

AN.13.2 The areas where moderate and deep sedation/analgesia are performed have adequate equipment and supplies that include at a minimum:

AN.13.2.1 Wall suction or suction machine.

AN.13.2.2 Oxygen source.

AN.13.2.3 Pulse oximetry.

AN.13.2.4 Automated blood pressure monitor or means of taking blood pressure.

AN.13.2.5 ECG Monitor.

AN.13.2.6 Crash cart with defibrillator, medications, IV access, and intubation equipment that is appropriate to the age of the patient.

Standard Intent:

Sedation—in particular, moderate and deep sedation—poses risks to patients and thus needs to be provided in areas identified in a hospital policy. These approved and privileged areas must include but not limited to:

- Wall suction or suction machine.
- Oxygen source.
- Pulse oximetry.
- Automated blood pressure monitor or means of taking blood pressure.
- ECG Monitor

AN.14 There are policies and procedures for moderate and deep sedation/analgesia in the hospital.

AN.14.1 Policies are collaboratively developed and approved by the head of anesthesia in collaboration with relevant disciplines.

AN.14.2 Policies for moderate and deep sedation/analgesia identify the permissible medications, dosage, route of administration, reversal agents and pediatric considerations.

AN.14.3 Moderate and deep sedation/analgesia is only used for patients having short diagnostic or therapeutic procedures.

Standard Intent:

The organization must have a policy for providing anesthesia services (including moderate and deep sedation) collaboratively developed and approved by the head of anesthesia in collaboration with relevant disciplines. The policy must clearly state the type of anesthesia, the medications used and fact that deep sedation is only used for patients having short diagnostic or therapeutics procedures.
