

## Measurable Elements of ASC.02.01

1. Health care practitioners responsible for providing procedural sedation show evidence of competence in at least the following:
  - Techniques and various modes of sedation
  - Pharmacology of sedation drugs and the use of reversal agents
  - Monitoring requirements
  - Response to complications
  - Airway assessment

*(See also SQE.01.03, ME 1)*
2. The individual responsible for patient monitoring during procedural sedation is competent in at least the following:
  - Monitoring requirements from the active administration phase during the procedure through the recovery phase after the procedure
  - Response to complications
  - Use of reversal agents
  - Recovery criteria
  - Airway assessment

*(See also SQE.01.03, ME 1)*
3. ⓐ Procedural sedation competencies for all staff involved in sedation are documented in the personnel records.

## Standard ASC.02.02

Procedural sedation is administered and monitored according to professional practice guidelines and documented in the patient's medical record.

### Intent of ASC.02.02

Many factors influence the patient's response to sedation and can affect the degree to which a patient is sedated. The presedation assessment helps identify any factors that may impact the patient's response to procedural sedation and also helps to identify what findings from monitoring during and after the procedure may be significant. The degrees of sedation occur on a continuum from mild to deep sedation, and a patient may progress from one degree to another. Factors include the medications administered, the route and dosages, the age of the patient (pediatric, adult, or geriatric), and the patient's health history. For example, history of impairment of major organs, current medications that may interact with sedating medications, drug allergies, previous adverse response to anesthesia or sedation, and substance abuse may each have an impact on patient response to procedural sedation. If the patient's physical status is high risk, consideration is given to the additional clinical needs of the patient and the appropriateness of procedural sedation. These factors are included in the presedation assessment performed by a qualified individual and documented in the patient's medical record.

Patients undergoing procedural sedation require monitoring of their level of consciousness, ventilator and oxygenation status, and hemodynamic variables at a frequency based on the type and amount of medication administered, the length of the procedure, and the type and condition of the patient. Important considerations during the sedation procedure include the patient's ability to maintain protective reflexes; an independent, continuous patent airway; and the capability to respond to physical stimulation or verbal commands. A qualified individual is responsible for performing uninterrupted monitoring of the patient's physiological parameters and assistance in supportive or resuscitation measures until the patient has been safely recovered.

When the procedure has been completed, patients may continue to be at risk for complications due to delay in the full absorption of the sedating drug, respiratory depression, and/or lack of stimulation from the procedure. Patients continue to require monitoring until they have reached near their baseline level of consciousness and

hemodynamic parameters. Complications associated with moderate sedation and analgesia may be avoided if signs and symptoms of adverse drug effects such as cardiovascular decompensation or cerebral hypoxia are detected and treated in a timely manner. Patient monitoring includes strategies for the following:

- Monitoring patient level of consciousness assessed by the response of patients during procedures performed with moderate sedation/analgesia
- Monitoring patient ventilation and oxygenation, including ventilatory function, by observation of qualitative clinical signs, capnography, and pulse oximetry
- Hemodynamic monitoring, including blood pressure, heart rate, and electrocardiography
- Contemporaneous recording of monitored parameters
- Availability/presence of an individual responsible for patient monitoring

In addition to monitoring the physiological criteria, other important strategies to include are the frequency of monitoring and documentation, and general guidance and/or parameters for recovery goals. Objective established criteria help identify patients who are recovered and/or ready for discharge and are used by qualified individuals who are not qualified anesthesiologists but authorized by the individual(s) responsible for managing the anesthesia services.

### **Measurable Elements of ASC.02.02**

1. A presedation assessment is performed that includes at least the following criteria when evaluating risk and appropriateness of procedural sedation for the patient:
  - Identify airway problems that may influence the type of sedation used.
  - Evaluate at-risk patients for appropriateness of procedural sedation.
  - Select and plan the type and level of sedation needed based on the patient assessment, identified risks, and type of procedure being performed.
  - Safely administer sedation based on the plan.
  - Interpret findings from patient monitoring during procedural sedation and recovery.
2. A qualified individual monitors the patient during the period of sedation and documents the monitoring in the medical record.
3. Established criteria are used and documented for the recovery and discharge from procedural sedation when a patient is discharged by an authorized individual other than a fully qualified anesthesiologist.
4. The presedation assessment is performed by an individual(s) qualified to do so and documented in the patient's medical record.
5. ⑩ The following criteria are based on professional practice guidelines and defined in hospital policy:
  - Scope and content of the presedation assessment
  - Criteria for the recovery and discharge from procedural sedation, including criteria for monitoring

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### **Standard ASC.02.03**

The risks, benefits, and alternatives related to procedural sedation are discussed with the patient, their family, or those who make decisions for the patient.

### **Intent of ASC.02.03**

Adequate information and education must be provided to the patient, their family, and/or decision-makers on the risks, benefits, and alternatives related to procedural sedation so an informed decision can be reached when obtaining consent for the procedure. The procedural sedation planning process includes this information and education. This discussion occurs as part of the process to obtain consent for procedural sedation as required in Standard PCC.03.00. A qualified individual provides this education.