



AN.15 Qualified staff perform moderate and deep sedation/analgesia.

- AN.15.1 Physicians who perform moderate and deep sedation/analgesia have competency-based privileges granted to perform moderate and deep sedation/analgesia.
 - AN.15.2 Clinical staff who participate in caring for patients receiving moderate or deep sedation are certified in advanced life support as appropriate to the age of the patients served.
 - AN.15.3 Clinical staff who participate in conducting sedation must successfully complete a proper education/training on moderate and deep sedation.
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Standard Intent:

The physician or dentist responsible for the patient receiving moderate and deep sedation must be qualified and have competency-based privileges. They must be certified in advanced life support as appropriate to the patient's age and successfully complete education/training on moderate and deep sedation.

AN.16 Patients going for procedures under moderate or deep sedation are properly prepared.

- AN.16.1 Informed consent is obtained after the physician educates the patient regarding the risk and benefits of the sedation and the consent is signed by the patient, guardian, or next of kin if the patient is unable to sign.
 - AN.16.2 An intravenous access is inserted and maintained until the patient is fully recovered.
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Standard Intent:

All patients going for procedures under moderate or deep sedation should sign an informed consent is obtained after the physician educates them regarding the risk and benefits of the sedation. An intravenous access must be inserted and maintained until the patient is fully recovered. ?

AN.17 A pre-moderate and deep sedation/analgesia assessment is completed by a qualified physician.

- AN.17.1 The pre-sedation assessment is performed by a qualified physician and includes:
 - AN.17.1.1 History and physical examination.
 - AN.17.1.2 History of medication allergy and adverse experience with sedation and analgesia as well as with anesthesia.
 - AN.17.1.3 History of systemic illness or major organ impairment.
 - AN.17.1.4 Verification of the patient (NPO) status.
 - AN.17.1.5 American Society of Anesthesiologists (ASA) physical status class.
 - AN.17.1.6 Vital signs.
 - AN.17.1.7 Age and weight.
 - AN.17.1.8 ECG findings.



AN.17.2 The pre-sedation assessment is documented in the patient's medical record.

Standard Intent:

The pre-moderate and deep sedation assessment must be carried by a qualified physician and documented in the patient medical record. The assessment includes:

- History and physical examination.
 - History of medication allergy and adverse experience with sedation and analgesia as well as with anesthesia.
 - History of systemic illness or major organ impairment.
 - Verification of the patient (NPO) status.
 - American Society of Anesthesiologists (ASA) physical status class.
 - Vital signs.
 - Age and weight.
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AN.18 Patients are continuously monitored during and after moderate and deep sedation/analgesia.

AN.18.1 Patients are monitored during and after moderate and deep sedation/analgesia, including the following parameters:

- AN.18.1.1 Vital signs.
- AN.18.1.2 Oxygen saturation.
- AN.18.1.3 Skin color.
- AN.18.1.4 Level of consciousness/response to stimuli.
- AN.18.1.5 ECG findings.

AN.18.2 Patient monitoring is continued during the recovery period until the patient is stable and adequate function is restored.

AN.18.3 Findings of monitoring are documented in the patient's medical record.

AN.18.4 The patient is always attended by a physician and nurse during and immediately after procedures involving moderate and deep sedation/analgesia.

Standard Intent:

Monitoring of patients receiving moderate and deep sedation is a continuous process that extends to the complete recovery from sedation. Monitoring findings must be documented in the patient medical record. It includes but not limited to the following:

- Vital signs.
- Oxygen saturation.
- Skin color.
- The level of consciousness/response to stimuli.