



# CBAHI

المركز السعودي لاعتماد المنشآت الصحية  
Saudi Central Board for Accreditation  
of Healthcare Institutions

- AN.7.1.3 The dosage, time, and route of administration of all medications and anesthetic agents used.
- AN.7.1.4 The techniques used to administer the anesthesia.
- AN.7.1.5 If blood is used, the amount of blood, rationale for administration, and the time given.
- AN.7.1.6 Investigations carried out e.g. blood glucose, blood gases.
- AN.7.1.7 Unusual events or complications.
- AN.7.1.8 The patient's status at the end of the procedure.
- AN.7.1.9 Intravenous fluids given.
- AN.7.1.10 The anesthesiologist and anesthesia assistant(s).

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**Standard Intent:**

The planned anesthesia care must be documented in the patient's medical record and includes important history and physical examination related information as well as the anesthetic agent, the techniques used to administer the anesthesia, the amount of blood and fluids used, and the name of staff performing the anesthesia. At a minimum the information mentioned in substandard AN.7.1.1 through AN.7.1.10 must be documented.

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**AN.8 The patient's physiological status is continuously monitored and documented during anesthesia.**

- AN.8.1 There is a policy and procedure for monitoring of patients during anesthesia (type and frequency).
- AN.8.2 The patient's physiological status is continuously monitored and documented during anesthesia.

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**Standard Intent:**

Physiological monitoring provides reliable information about the patient's status during anesthesia period. Monitoring methods depend on the patient's pre-anesthesia status, anesthesia choice, and complexity of the surgical or other procedure performed during anesthesia. In all cases, however, the overall monitoring during anesthesia is a continuous process, and the results are written into the patient's record.

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**AN.9 Post-anesthesia patients are safely transported to the recovery room.**

- AN.9.1 Patients transported to the recovery room shall be accompanied by a qualified member of the anesthesia care team.
- AN.9.2 The patient shall be continually evaluated and treated during the transport with monitoring and support appropriate to the patient's condition.
- AN.9.3 Upon arrival to the recovery room, the patient is properly handed over and re-evaluated.
- AN.9.4 The patient's status and time of arrival to the recovery room are documented.

**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.

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**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.

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**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.

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**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.

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**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.

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**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.

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**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.

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