



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

TITLE		POLICY	
Conscious Sedation		DRM-045	
MANUAL	EFFECTIVE DATE	REVIEW DATE	
Drug Room	10-1-2020	10-1-2020	
DEPARTMENT	REFERENCE		
Drug Room			

SCOPE

This policy will apply to all patients receiving conscious sedation at MANGUM REGIONAL MEDICAL CENTER.

PURPOSE

The purpose of conscious sedation is to provide the patient with relief of discomfort and anxiety associated with the proposed procedure so that the patient remains motionless and can cooperate actively following verbal commands throughout the procedure.

DEFINITIONS:

Minimal Sedation (Anxiolysis): Is a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and physical coordination may be impaired, airway reflexes, and ventilatory and cardiovascular functions are unaffected.

Moderate (Conscious) Sedation: Is a drug-induced depression of consciousness during which patients respond purposefully to verbal commands. **NOTE:** *Reflex withdrawal from a painful stimulus is not considered a purposeful response, either alone or accompanied by light tactile stimulation.* No interventions are required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

Routes of Administration for Conscious Sedation:

- Intravenous (IV)
- Oral
- Nasal inhalation
- Rectum

POLICY

To provide guidelines for the safe and effective administration of sedation to patients of all ages. Sedation may be administered by a Physician, Advanced Practice Registered Nurse (APRN), Physician Assistant (PA), or Registered Nurse. The Registered Nurse may administer, manage, and/or monitor conscious sedation (minimal/moderate) of patients for short-term therapeutic or diagnostic procedures within the limitations of licensure and the State Nurse Practice Act. The Licensed Practical Nurse (LPN) functions within the limitations of licensure and the State Nurse Practice Act. The Licensed Practical Nurse is authorized by policy to monitor moderate (conscious) sedation patients during short-term therapeutic, diagnostic or surgical procedures. All personnel who administer, manage, and/or monitor conscious sedation will function within their scope of practice.

PROCEDURE

1. Conscious sedation will be performed by trained and qualified personnel.
2. The Physician must be available on site during the initial and continued administration of sedation or the procedure will not be started.
3. An RN may not administer medications classified as anesthetics. A licensed nurse who is not a Certified Registered Nurse Anesthetist may not administer medications or assess the level of sedation for any drugs used for moderate (conscious) sedation if the drug manufacturer's general warning advises the drug should be administered and/or monitored by persons experienced in general anesthesia who are not involved in the conduct of the surgical and/or diagnostic procedure.
4. Reversal medications such as Romazicon or Narcan will be available for patients undergoing conscious sedation. Prior to the administration of Romazicon, the patient will be evaluated for the use of anti-anxiety medications.
5. Documentation of a Physician examination must be performed by the Physician or Medical Provider immediately prior to the procedure on all patients receiving conscious sedation; to include at a minimum:
 - an examination specific to the procedure to be performed;
 - height and weight (kilogram wt.);
 - level of consciousness and mental status;
 - mobility status;
 - baseline vital signs;
 - examination of heart and lungs by auscultation;
 - indications for procedure requiring sedation;
 - emotional status;
 - communication ability
6. Documentation in the medical record will include the risks, benefits, and alternatives for this type of sedation that have been explained to the patient and informed consent has been executed. The informed consent is the responsibility of the Physician or Medical Provider; nursing staff may witness the signing of the consent.

7. ACLS and PALS personnel skilled in airway management must be present.

Quality Assurance and Performance Improvement

1. The Hospital will maintain evidence of the Medical Providers, RN's, LPN's competency, knowledge and skills related to the management and monitoring of patients who receive sedation on a periodic basis, at least every 2 years.
2. The Quality/Risk Manager and or Chief Clinical Officer will review all episodes of sedation. The findings will be reported to the Quality, Medical Staff, and Governing Board Committees.

REFERENCES

Oklahoma Board of Nursing; Moderate (Conscious Sedation Guidelines for Registered Nurse Managing and Monitoring Patients, and Monitoring of Moderate (Conscious) Sedation Patient by Licensed Practical Nurse Guidelines, Lippincott 12/14/18, American Society of Anesthesiologists, AANA Non-Anesthesia Provider Procedural Sedation and Analgesia 2016, Parents-Society for Pediatric Sedation <https://pedsedation.org/resources/parents/>, Clinical Pharmacology 2019

ATTACHMENTS

Refer to nursing policies.

REVISIONS/UPDATES

Date	Brief Description of Revision/Change