Conscious Sedation: Nursing Cheat Sheet

Protocol Highlights:

- A QUALIFIED practitioner’s order is required
  - our providers must complete credentialing requirements and residents must be supervised by the qualified attending
- There must be enough qualified staff present
  - Evaluate the patient, assist with the procedure, provide sedation and monitor/recover the patient.
  - The person responsible for monitoring must be in constant attendance.
  - The provider responsible for sedation CANNOT be the person completing the procedure

So what are we responsible for?

1. Are you qualified?
   a. PALS, LMS (+) test, Team STEPPS
2. Room set up: ensure emergency equipment is at the bedside
   a. Bag-valve mask
   b. Pulse ox monitor
   c. Oxygen delivery system (is your Christmas tree there?)
   d. Oral airways, laryngoscope, ET tubes
   e. Suction (does it work?)
   f. Emergency Drugs
   g. BP and cardiac monitoring
   h. End tidal CO2 monitoring
3. Monitoring and Documentation:
   a. Pre-procedure: Patient’s NPO status? (6 hours for solids and formula, 4 hours breast milk, 2 hours approved clear liquids)
      o Confirm weight and allergies
      o Baseline sedation score and neuro assessment
   b. Intra-procedure: TIME OUT
      o V/S every 5 minutes, BP at least once but then at the discretion of the RN due to increased stimulation
      o At least one member of the team must ALWAYS be with the patient
   c. Post-procedure:
      o V/S every 15 minutes until respirations and level of consciousness return to baseline

Can we discharge them?

1. Aldrete score >8? Patient at baseline mental status and maintain oxygenation? **YES**
2. Requiring supplemental oxygen? Use of reversal agents? **Not Yet.**

**If reversal agents are used, patient must be monitored for at least one hour**
Ketamine Fast Facts

Contraindications: <3 months old, known or suspected schizophrenia

Adverse Effects: Vivid Dreams, Increased ICP and ocular pressures

How it works? Dissociated from environment by action on cortex and limbic system

Onset: Within 30 seconds

Dose: Initial: 1.5 - 2mg/kg OVER 1-2 MINUTES

(+) .5 - 1 mg/kg every 5-15 minutes as needed

Other sedation options (FYI)

Nitrous Oxide for Pediatric Sedation- completed by the Pediatric Specialty Care Team (Policy NURS 0602)

Propofol for Sedation- Contraindicated <12 years old. Remember propofol does NOT provide analgesia but does have anti-emetic properties, monitor for hypotenstion

**The MD administers propofol over 1-2 minutes

Pediatric Sedation Policy: https://unchealthcare-uncmc.policystat.com/policy/4868955/latest/