

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)
 - Confirm weight and allergies
 - Baseline sedation score and neuro assessment
 - b. Intra-procedure: TIME OUT
 - V/S every 5 minutes, BP at least once but then at the discretion of the RN due to increased stimulation
 - At least one member of the team must ALWAYS be with the patient
 - c. Post-procedure:
 - 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 hypotension

The **MD administers propofol over 1-2 minutes

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