

Deep Sedation Policy

Purpose: Guidelines for Deep Sedation Administered by Emergency Medicine and Pediatric Critical Care Physicians

General credentialing in procedural sedation: Procedural sedation, moderate and deep, is considered a **core privilege** of physicians trained in and/or certified in emergency medicine and/or pediatric critical care, by nature of training and certification.

Special circumstances: Use of propofol

- 1) Use of propofol is restricted to practitioners who have been trained by an individual with privileges in the use of propofol.
- 2) The physician must demonstrate competency in the cognitive aspect of the procedure related to propofol and patient assessment. This can be achieved in EITHER of the following manners:
 - a. For the use of propofol observe at least 5 procedures provided by an individual credentialed for deep sedation with propofol and then perform 5 procedures under deep sedation with propofol that are observed by an individual already credentialed in deep sedation with propofol.
 - b. Emergency Medicine or Pediatric Critical Care physicians who have previously been credentialed in the use of propofol from other institutions.

Any variation or alteration of this training is permitted, as long as there is mutual agreement between anesthesiology and emergency medicine or anesthesiology and pediatric critical care. Any variation or alteration will be in writing, and cosigned by the chief of anesthesiology and the chief of emergency medicine or chief of pediatrics, as appropriate.

- 3) The physician must read the materials provided by the Department of Anesthesiology related to the use of propofol. These readings may be updated and changed in collaboration between Anesthesiology and Emergency Medicine or Pediatrics Critical Care. After completion of the readings, the physician will take a written examination prepared by the Department of Anesthesiology.
- 4) After successful completion of 2 and 3, the physician will be considered by the respective departmental credentials committee for privileges in the use of propofol. Review and recommendation for privileges will follow the process delineated in the Medical Staff Bylaws
- 5) The Departments of Anesthesiology and Emergency Medicine and Pediatrics will conduct Quality Assurance reviews of sedation in a fashion mutually agreeable to the involved both departments and the Chief Quality Officer. These agreements will be in writing, and signed by chiefs from the respective departments. As needed, a focused review will be conducted in those cases where the patient required tracheal intubation, has respiratory or cardiac arrest, has an aspiration or requires blood pressure support.