CHARLESTON AREA MEDICAL CENTER, INC. (CAMC) INSTITUTIONAL CRITERIA FOR ADDITIONAL OR REAPPOINTMENT PRIVILEGES FOR MODERATE SEDATION BY NON-ANESTHESIOLOGISTS

(Applicable to all non-anesthesiologists granted moderate sedation privileges after approval of this criteria by the CAMC Board of Trustees)

Moderate Sedation: A drug-induced depression of consciousness during which patients respond purposefully to verbal commands, 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.

Non-anesthesiologist Sedation Practitioner: A licensed physician (allopathic or osteopathic); dentist, oral surgeon or podiatrist, who has not completed postgraduate training in anesthesiology but is specifically trained and privileged to personally administer or supervise the administration of moderate sedation.

Basic Requirements: Degree of MD, DO, DDS, DMD, or DPM

Minimal Formal Training:

Successful completion of an ACGME or AOA accredited residency training program

Education and Training Requirements:

- The non-anesthesiologist sedation practitioner who is to supervise or personally administer medications for moderate sedation should have satisfactorily completed a formal training program in:
 - The safe administration of sedative and analgesic drugs used to establish a level of moderate sedation and;
 - Rescue of patients who exhibit adverse physiologic consequences of a deeper-thanintended level of sedation.

This training may be part of a recently completed residency or fellowship training (within the last two (2) years), or may be a separate educational program.

- <u>NOTE</u>: A knowledge based test may be used to verify the practitioners understanding of these concepts.
- ACLS, ATLS, PALS, NRP or equivalent training in cardiopulmonary resuscitation at initial request

References:

- If the applicant has completed residency/fellowship training within the previous two (2) years, a letter of reference must come from the director of the applicant's training program which includes verification of competency to administer moderate sedation, verification of airway management skills, and a case log which documents the minimum number of sedation procedures have been performed within the required timeframe described above, including documentation of outcomes.
- Alternatively, a letter of reference may come from the applicable department chair and/or clinical service chief at the facility where the applicant most currently practiced within the past two (2) years which includes verification of competency to administer moderate sedation, verification of airway management skills and a case log which documents that the minimum number of sedation procedures have been performed within the required timeframe described above, including documentation of outcomes.

NOTE: If detailed information is not available or satisfactory from the reference(s):

- A minimum of three (3) proctored cases must be completed with further appropriate proctoring if indicated until competency is demonstrated. Cases may be proctored by an anesthesiologist, Certified Registered Nurse Anesthetist, or a non-anesthesia physician who holds moderate sedation privileges at CAMC.
- **Note:** The proctor's role is to observe, validate and document the physician's technical skill and ability to perform moderate sedation in a competent manner. It should be understood that the proctor is not expected to perform any portion of the procedure for which he/she is proctoring unless an emergency arises. In case of emergency the proctor may administer emergency treatment to the extent permitted by his or her license.

Practice Based Pathway:

- Granted clinical privileges for Moderate Sedation
- Satisfactory completion of a formal training program in (1) the safe administration of sedative and analgesic drugs used to establish a level of moderate sedation, and (2) rescue of patients who exhibit adverse physiologic consequences of a deeper-than-intended level of sedation. (training program must be approved by CAMC)
- A minimum of three (3) proctored cases must be completed with further appropriate proctoring if indicated until competency is demonstrated. Cases may be proctored by an anesthesiologist, Certified Registered Nurse Anesthetist, or a non-anesthesia physician who holds moderate sedation privileges at CAMC.

Maintenance of Competence for Reappointment

- 1. Completion of a formal training program every (2) years in (1) the safe administration of sedative and analgesic drugs used to establish a level of deep sedation, and (2) rescue of patients who exhibit adverse physiologic consequences of a deeper-than-intended level of sedation. (training program must be approved by CAMC)
- 2. ACLS, ATLS, PALS, NRP or equivalent training in cardiopulmonary resuscitation must be maintained
- 3. The physician must submit documentation that he or she has maintained competence in the administration of moderate sedation by demonstrating satisfactory performance on an annual basis of a minimum of four (4) moderate sedation cases. Any of the following events will be referred to the Sedation Quality Committee for evaluation: (a) cardiac arrest, (b) use of reversal agents, (c) utilization of ventilation requiring bag-valve-mask, laryngeal mask or endotracheal airways and (d) progress to deep sedation or general anesthesia.
 - If an issue is found with use of assistance with ventilation requiring bag-valve-mask or laryngeal or endotracheal airways, re-evaluation of competency in airway management will be required. The physician's performance of airway management will be reviewed by an anesthesiologist, Certified Registered Nurse Anesthetist, or a non-anesthesiologist sedation physician who is currently privileged to administer moderate sedation. The physician must arrange for the review to occur.
 - If four (4) moderate sedation cases have not been performed annually, the physician will be required to have the following:
 - A minimum of two (2) proctored cases must be completed with further appropriate proctoring if indicated until competency is demonstrated. Cases may be proctored by an anesthesiologist, Certified Registered Nurse Anesthetist, or a non-anesthesia provider who holds moderate sedation privileges at CAMC.

REFERENCES

American Association of Critical Care Nurses: Sedation Guidelines; March 2002

Credentialing Resource Center Clinical Privilege White Paper: Moderate Sedation; June 2010

American Society of Gastrointestinal Endoscopy Guidelines for Conscious Sedation and Monitoring During Gastrointestinal Endoscopy; Volume 58, No. 3, 2003; pages 317 -322

Mayo Clinic Health System: Moderate Sedation at May Clinic Health System

American Society of Anesthesiologists: Practice Guidelines for Sedation and Analgesia by Non-Anesthesiologists: Special Article: An Updated Report by the American Society of Anesthesiologists Task Force on Sedation and Analgesia by Non-Anesthesiologists; Anesthesiology, V 96, No 4, April 2002; Pages 1004 - 1017

Statement on Granting Privileges from Administration of Moderate Sedation to Practitioners who are Not Anesthesia Professionals: Committee of Origin: Ad Hoc Committee on Credentialing (Approved by the ASA House of Delegates on October 25, 2005, and amended on October 18, 2006)

UTMB Handbook of Operating Procedures: Moderate Sedation (Conscious Sedation); December 19, 2012, Pages 1 - 10

CHARLESTON AREA MEDICAL CENTER, INC. (CAMC) APPLICATION FOR ADDITIONAL OR REAPPOINTMENT PRIVILEGES FOR MODERATE SEDATION FOR NON-ANESTHESIOLOGISTS

Name:	 Date:

Initial Request

Reappointment Request

- □ I wish to apply/reapply for privileges to perform moderate sedation at CAMC and have attached appropriate documentation as required in the Institutional Criteria for Moderate Sedation for Non-Anesthesiologists.
- □ I certify that I have read and understand the CAMC Policy for moderate sedation for short term therapeutic and diagnostic procedures and agree to abide by the policy requirements.
- □ I understand that my education, experience, and performance will be reviewed by and must be satisfactory to the Chief of Anesthesia prior to privileges being recommended by my Department Chief.

Signature

Date

Printed Name

Anesthesiology Department Chief Approval

Date