

SUPERSEDES: 2/04/08

CODE NO. 416A



## POLICY &amp; PROCEDURE MANUAL

SECTION: 400 - CARE OF THE PATIENT

SUBJECT: PEDIATRIC PROCEDURAL  
SEDATION/ANALGESIA

**ADDENDUM IV**  
**Sedation-Analgesia Privileges**

Name \_\_\_\_\_ Department \_\_\_\_\_

**PLEASE NOTE:**

- All physicians must be properly credentialed before they can administer sedation-analgesia to adults and/or pediatric patients. If you do not have this privilege, you cannot provide sedation-analgesia for diagnostic/therapeutic procedures nor render approval of a sedation-analgesia plan.
- If requesting sedation-analgesia privileges, this form must be completed at the time of original application, and renewed at each reappointment (biannual).
- If you do not wish to receive sedation-analgesia privileges, you do not have to complete this form.

**Definitions:**

**Sedation-Analgesia** is defined as the administration of any pharmacological agent which will likely cause a medically controlled state of depressed consciousness. Sedation-analgesia includes level I-III. This state would be limited to short periods and utilized for diagnostic and therapeutic procedures that 1) allow protective reflexes to be maintained, 2) retain the patient's ability to maintain a patent airway, respiratory rate and rhythm and 3) permit expected responses by the patient to physical stimulation and repeated verbal command. Administration of such agents, at doses not expected to cause a state of depressed consciousness, for the purpose of controlling pain or reducing anxiety, is outside the scope of this policy. Administration of such agents to ICU ventilated patients is also outside the scope of this policy.

**Level IV Sedation (General Anesthesia)** is a state of depressed consciousness as the result of drug administration in which the patient does not demonstrate a purposeful response to verbal or painful stimulation and has inhibition of normal airway reflexes. The administration of anesthesia is solely reserved for individuals properly credentialed by the institution in the administration of general anesthesia.

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SEDATION/ANALGESIA**REQUIREMENTS**

1. Current ACLS and/or PALS (NRP for Neonatology) certification or equivalent.
2. Completion of the Adult and/or Pediatric Sedation-Analgesia Course and satisfactory completion of the post-course test. The course may be viewed on the Jackson Health System Intranet at MyMedEd.

**FOR RENEWAL OF PRIVILEGES**

1. Current ACLS and/or PALS (NRP for Neonatology) certification or equivalent.
2. Completion of the Adult and/or Pediatric Sedation-Analgesia Course and post-course test **within three (3) months prior to the date of reappointment.**

**PLEASE NOTE:** Sedation-Analgesia Course includes:

- viewing the on line course on MyMedEd
- completing the sedation-analgesia test
- submitting the test score

**Please check:**

\_\_\_\_\_ My ACLS and/or PALS (NRP) is current as per the instructions noted in #1 above.

\_\_\_\_\_ I have reviewed the sedation course and have satisfactorily completed the post-course test as per the instructions noted in #2 above.

I certify that I have completed the requirements for sedation-analgesia as outlined above within the last year and I am requesting privileges for the administration of sedation-analgesia.

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_

**Departmental Chair Approval**

I have reviewed the requested privileges for sedation-analgesia for the above named applicant, and recommend credentialing based on the applicant's current licensure, training and/or experience, current competence and ability to perform the requested privilege.

Department Chairman \_\_\_\_\_ Date \_\_\_\_\_

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