Scope of Practice for the Registered Nurse in the Administration of Procedural Sedation and the Management of Patients Receiving of Procedural Sedation

The Washington State Nursing Care Quality Assurance Commission affirms that it is within the role and scope of practice for the registered nurse (RN) to administer procedural sedation and to manage patients who are receiving and recovering from procedural sedation. Further, the Commission believes that this role is beyond the scope of practice for the licensed practical nurse or the tasks allowed for unlicensed assistive personnel.

Definition

Procedural sedation, also known as conscious sedation, is produced by the administration of pharmacological agents administered singly or in combination to induce a state that allows a patient to tolerate unpleasant procedures while maintaining cardio-respiratory function. A patient under procedural sedation has a depressed level of consciousness, but retains the ability to independently and continuously maintain a patent airway and respond appropriately to physical stimulation and/or to verbal command. Procedural sedation may easily progress to deep sedation or the loss of consciousness, because of the unique characteristics of the drugs used, as well as the physical status and drug sensitivities of the individual patient.

Process

Procedural sedation is used in short-term, therapeutic, diagnostic or surgical procedures.

The registered nurse administers medications to achieve conscious sedation by executing the order of a licensed independent practitioner with authority to prescribe the medications to be administered.

The registered nurse managing and monitoring the patient receiving procedural sedation shall have no other responsibilities during the procedure that would leave the patient unattended or compromise continuous monitoring.

During procedural sedation, there must be a licensed independent practitioner present who is credentialed by the facility as capable of recognizing and managing airway emergencies.

Competency

The administration of procedural sedation requires continuous monitoring of the patient and the ability to respond immediately to deviation from the norm. Procedural sedation should only be
provided by an individual who is competent in thorough patient assessment, is able to administer
drugs through a variety of routes, is able to identify responses which are a deviation from the
norm, and is able to intervene as necessary to cardiac or respiratory rescue for the patient.

To ensure that nurses assisting in procedural sedation receive appropriate and continuous training
and support with demonstrated competency, the Nursing Commission recommends that all
providers and institutions using registered nurses in procedural sedation have in place written
policies and procedures that contain, at a minimum, the following elements:

2. Protocols for managing potential complications or emergency situations.
3. Specific educational and training requirements with evidence of competency.
4. Specific yearly evaluation and verification of continuing competency requirements.

Excluded from the guidelines in this position statement:

1. Patients receiving inhalation anesthetics (except for the use of Nitronox as an analgesic).
2. Patients who receive analgesia for pain control without sedatives.
4. Patients who are sedated for the purpose of intubation.

**References**


American Nurses Association (September 1991). Position Statement on the Role of the
Registered Nurse in the Management of Patients Receiving IV Conscious Sedation for Short-
Term Therapeutic, Diagnostic, or Surgical Procedures.

Oregon State Board of Nursing (February 1999). Scope of Practice for the Registered Nurse in
the Administration of Conscious Sedation and the Management of Patients Receiving Conscious
Sedation.