Administration of Sedative and Analgesic Medications by Respiratory Therapists

The American Association for Respiratory Care (AARC) recognizes the fact that Respiratory Therapists are called upon to assist physicians with the administration of sedative and analgesic medications during diagnostic and therapeutic procedures and patient transportation.

"Sedation" and "analgesia" describe a physical state in which the patient is able to tolerate unpleasant procedures, while maintaining adequate cardiorespiratory cardiopulmonary function, and the ability to respond purposefully to verbal commands and tactile stimulation. This is commonly referred to as moderate, conscious, or procedural sedation. The AARC believes that Respiratory Therapists working under qualified medical supervision can assist physicians to minimize risks by administering prescribed medications and closely monitoring the patient during diagnostic and therapeutic procedures, and and patient transportation, and help to minimize risks by administering prescribed medications and closely monitoring the patient.

The AARC recognizes and acknowledges the following:

- The Joint Commission recognizes the patient safety risks involved with sedation and analgesia for procedures; and mandates that sedation practices throughout an institution be monitored and evaluated by the department of anesthesia.
- The American Society of Anesthesiologist (ASA) has published the document "Practice Guidelines for Sedation and Analgesia by Non-anesthesiologists."
   Reference: Anesthesiology, 2002; 96: 1004-1017.
  - The purpose of the ASA document is to allow clinicians to provide their patients with the benefits of sedation and analgesia while minimizing associated risks.
  - The ASA Guidelines should be followed by all Respiratory Therapists called upon to provide this service.

- Organizations determine the education, training, and experience required for clinicians to perform procedures using moderate sedation. Individuals who are privileged to administer sedation must be able to rescue patients from a deeper level of sedation or anesthesia than planned.
- The clinicians and their facilities have the ultimate responsibility for selecting patients, procedures, medications, and equipment.
- Respiratory e <u>C</u>are education programs approved by the <u>Commission on the</u>
   Accreditation of Allied Health Education Programs/Committee on Accreditation for
   Respiratory Care (or <u>their its</u> successor organizations) provide appropriate
   pharmacologic and technologic training to enable Respiratory Therapists to safely
   administer sedatives and analgesics by following the ASA Guidelines.
- State Respiratory Therapy Practice Acts may regulate the practices of

  Respiratory Therapists related to the administration of sedation and analgesic medications.

Following successful completion of a specialized education and competency assessment program the Respiratory Therapists must:

- Be knowledgeable about the techniques, medications, side effects, <u>adverse</u>
   <u>reactions</u>, monitoring devices, <u>response or untoward effects of medications</u>, and documentation for any specific procedure.
- Meet qualifications to be certified as competent, in accordance with her/his their facility's and Respiratory Care Department's policies, to administer sedatives and analgesics under qualified medical direction.
- Be able to respond to a patient's deteriorating clinical status.

The AARC affirms that Respiratory Therapists who have successfully completed a specialized education and competency assessment program on sedation and analgesia based on the ASA's Guidelines, and who have been certified as competent by the appropriate medical director and department head or governing body, should be permitted to provide the service. This should be done in accordance with ASA's

Guidelines; facility policies, procedures, protocols, and service operations; as well as and with Joint Commission hospital accreditation agencies; and state requirements and policies.

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