Position Statement

Administration of Sedative and Analgesic Medications for Procedural Sedation by Respiratory Therapists

Respiratory therapists are called upon to assist physicians with the administration of sedative analgesic medications during diagnostic as well as during therapeutic procedures and patient transportation.

The American Association for Respiratory Care respiratory therapists work under qualified medical supervision to assist physicians with the delivery of conscious sedation and analgesia to minimize risks by administering prescribed medications and closely monitoring the patient during diagnostic and therapeutic procedures, and during patient transportation.

The AARC recognizes and supports sponsoring organizations and acknowledges the following:

- The Joint Commission (JC) recognizes the risks involved with sedation and analgesia for procedures and mandates that sedation practices throughout an institution be monitored and evaluated by anesthesia departments.
  - The American Association of Anesthesia (ASA) guidelines should be followed by all respiratory therapists called upon to provide this service.¹
- The clinicians and their facilities have the ultimate responsibility for selecting patients, procedures, medications, and equipment.
- State Respiratory Therapy Practice Act's may regulate the scope of practice for respiratory therapists related to the administration of sedation and analgesic medication. Respiratory therapists who assist physicians with the administration of sedation and/or analgesic medications for procedural sedation should complete a continuing competency assessment program that ensures that:
  - The therapist is knowledgeable about the techniques, medications, side effects, adverse reactions, monitoring devices, and documentation for any specific procedure.
  - The therapists meet qualifications to be certified as competent, in accordance with their facility’s and Respiratory Care Department’s policies, to administer sedatives and analgesics under qualified medical direction.
  - The therapist can respond to a patient’s deteriorating clinical status appropriately.

The AARC affirms that respiratory therapists who have successfully completed a specialized education and continuing competency assessment program on procedural sedation and analgesia based on the ASA’s Guidelines, and who have been certified as competent by the appropriate medical director department head or governing body, should be permitted to provide the service. This should be done in accordance with accepted medical policies and guidelines, facility policies, procedures, protocols, and service operations, hospital accreditation agencies, and state requirements and policies.

¹ The AARC acknowledges that the Joint Commission recognizes the role of all health care workers in monitoring patients receiving sedation and analgesia during procedures. The Joint Commission requires that nurses, respiratory therapists, and other health care workers receive training in the recognition of potential signs and symptoms of patient deterioration during and after sedation and analgesia. Respiratory therapists should have ongoing education and competency assessment in the recognition of potential signs and symptoms of patient deterioration, as well as in the administration of sedation and analgesia.
References


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