



Conscious Sedation Checklist

Refer to Restraints Clinical Standard and Behavioral & Excited Delirium COG.

Conscious Sedation Checklist	
<input type="checkbox"/>	Obtain OLMC Approval
<input type="checkbox"/>	Ensure additional ALS provider is involved in patient care and assign care roles
<input type="checkbox"/>	Ensure patient is placed on EtCO ₂ , 4 lead ECG, SpO ₂ , baseline BP and set to cycle at minimum q 3 min
<input type="checkbox"/>	Ensure patent IV access
<input type="checkbox"/>	Ensure patient is placed on HF NC or NRB at flush rate
<input type="checkbox"/>	Ensure airway, ventilation, and suction equipment are available and operational
<input type="checkbox"/>	Confirm medications, dosing, and plan for escalating dosing
<input type="checkbox"/>	If conscious sedation is being performed for an elective non-life threatening intervention, then obtain verbal consent as scripted below.
<input type="checkbox"/>	Administer medication(s) and dose(s) as directed by online/offline medical control
<input type="checkbox"/>	Once sedation is achieved, then perform procedure along with continuous monitoring of patient
<input type="checkbox"/>	Recover patient and continue to monitor until conscious sedation is completely resolved
<input type="checkbox"/>	Document in ePCR

Verbal Consent Script & Guideline:

Prior to reading this to you, we have discussed the risks, benefits, and alternatives to [PROCEDURE] performed at this time to the best of my abilities.

This includes explaining why this [PROCEDURE] is to be performed on your [Right or Left] [Anatomical Location].

I have explained the procedure to you as well as the medications that will be used, including the risks of respiratory failure, decreased blood pressure, and other medication side effects.

Additionally, I have explained the steps that will be taken to continuously monitor your condition and vital signs.

With [Identify 2nd Provider] as witness, do you have any questions or concerns that have not been addressed or do I have your verbal consent to proceed?

1. If patient has additional questions or concerns that can be resolved, then do so and again read the consent.
2. If patient has additional questions or concerns that cannot be resolved, then consult OLMC as needed and continue care alternative to the procedure.
3. If patient provides verbal consent and is witnessed, then proceed with procedure.

This consent process must be specifically and thoroughly documented in the ePCR.