



Requirements for Moderate Sedation Privileges

Applicants must complete & provide requested documentation if Moderate Sedation privileges are requested.

- For Initial Application: Documentation of twenty (25) cases performed using moderate sedation in the past year. If documentation is lacking, taking and successfully passing a test on moderate sedation is required (A score of 90% is required to PASS the test). Completion of “Requirements for Moderate Sedation Privileges” form.
- For Reappointment Application: Documentation of fifty (50) cases performed using moderate sedation in the past two years. If documentation is lacking, taking and successfully passing a test on moderate sedation is required (A score of 90% is required to PASS the test). Completion of “Requirements for Moderate Sedation Privileges” form.

_____ I attest that I have read and understand the *ASA Practice Guidelines for Sedation and Analgesia by Non-Anesthesiologists and Continuum of Depth of Sedation: Definition of General Anesthesia and Levels of Sedation/Analgesia*.

AND

_____ I attest that I have received training for and/or have experience in moderate sedation.

AND

_____ I attest that I am personally capable of managing or directing the management of any/all complications associated with moderate sedation.

AND

_____ I attest that I have reviewed the hospital policy on moderate sedation and have taken the test or provided the documentation of the required cases for moderate sedation.

AND

_____ A copy of current ACLS certification card (For Adult Moderate Sedation)

OR

_____ A copy of current PALS certification card (For Pediatric Moderate Sedation)

AND/OR

_____ A copy of current NRP certification card (For Neonate Moderate Sedation)

Printed Name: _____

Signature: _____

Date: _____

Anesthesia Department Chair: _____

Date: _____



MIDLAND MEMORIAL HOSPITAL

TEST FOR MODERATE SEDATION CREDENTIALING

Answers are in materials provided with this test

1. The IV route of administration is the preferred route for medication used for moderate sedation for a procedure because small, incremental doses may be titrated to most safely achieve the appropriate level of patient comfort. Maintaining or establishing IV access for administration of additional sedative/analgesic or resuscitation drugs is necessary.

True False
2. The respiratory depression effects of benzodiazepine sedation given together with narcotics are:
(Circle one)
 - a. Unrelated
 - b. Synergistic
3. Centers for Medicaid and Medicare Services (CMS) guidelines consider the use of Propofol or Etomidate as deep sedation and cannot be used for moderate sedation.

True False
4. What are the minimum monitoring requirements for moderate sedation? (circle one or more):
 - a. O₂ saturation
 - b. Heart rate
 - c. Respiratory rate
 - d. Blood pressure
 - e. EKG (for patients with cardiovascular disease)
5. The physician performing the procedure is responsible for (circle one or more):
 - a. Prescribing the medication used to achieve moderate sedation
 - b. Selection and evaluation of the patient prior to giving sedation and performing the procedure
 - c. Supervision and instruction of the individual(s) monitoring the patient
6. On pre-procedure evaluations, it is noted that a patient can only open their mouth 1 cm because of temporomandibular joint disease. Which of the following is most likely to occur during moderate sedation?
 - a. The patient will have difficulty breathing with supplemental oxygen.
 - b. It may be difficult to rescue the patient if he/she stops breathing.
 - c. The patient is likely to become hypoxic during minimal sedation (anxiolysis).
 - d. The patient will require a greater-than-expected dose of sedative medications.
7. Following administration of midazolam and meperidine for colonoscopy, a patient becomes sedated to the point where his/her airway is partially obstructed, but responds purposefully following painful stimulation. This corresponds to which of the following levels of sedation:
 - a. Minimal sedation
 - b. Moderate sedation
 - c. Deep sedation
 - d. General anesthesia
8. Which is an example of an acceptable light meal consumed 6hrs before moderate sedation?
 - a. One slice of bacon and two eggs
 - b. 2 pancakes with butter and syrup
 - c. Dry toast and coffee without cream
 - d. All of the above

9. An otherwise healthy patient requires moderate sedation for elective cardiac catheterization. She/he should not consume clear liquids for a minimum of how many hours before the beginning of the procedure?
- 1
 - 2
 - 4
 - 6
10. Continuous electrocardiographic monitoring is recommended for each of the following EXCEPT:
- Healthy patient undergoing moderate sedation
 - Healthy patient undergoing deep sedation
 - Patient with congestive heart failure undergoing moderate sedation
 - Patient with irregular pulse undergoing moderate sedation
11. A patient who is breathing supplemental nasal oxygen develops complete airway obstruction during moderate sedation. Which of the following is likely to occur first?
- Decrease in oxygen saturation reading by pulse oximeter
 - Cessation of breath sounds
 - Sinus bradycardia on electrocardiogram
 - Hypotension on automated blood pressure cuff
12. Flumazenil will antagonize the respiratory depression associated with which of the following medications?
- Meperidine
 - Methohexital
 - Midazolam
 - Propofol
13. During moderate sedation with meperidine and midazolam, a patient stops breathing and becomes unresponsive to verbal or tactile stimulation. The pulse oximeter reads 86%. Which of the following is most likely to improve the patient's oxygenation?
- Positive pressure ventilation
 - Supplemental nasal oxygen
 - Sternal rub
 - Call CAT
14. A patient receives midazolam and meperidine for sedation and analgesia. Breathing is labored and the patient is completely unresponsive to both verbal and painful stimulation. This corresponds most closely to a state of:
- Anxiolysis
 - Moderate sedation
 - Deep sedation
 - General anesthesia
15. The use of supplemental oxygen during sedation and analgesia _____.
- Increases the likelihood of hypoxia
 - Delays the detection of apnea by pulse oximetry
 - Should be avoided during moderate sedation
 - Decreases the likelihood of airway obstruction
16. Which of the following must be immediately available when administering moderate sedation? (circle one or more)
- Pharmacological antagonists
 - Intravenous starting equipment
 - Emergency medications
 - Basic airway management equipment

17. Naloxone will antagonize the respiratory depression associated with which of the following medications?
- a. Meperidine
 - b. Methohexital
 - c. Midazolam
 - d. Propofol
18. Which of the following are true? (circle one or more)
- a. During minimal sedation (anxiolysis), patient responds to verbal stimulation.
 - b. During moderate sedation/analgesia, there is a purposeful response to verbal or tactile stimulation.
 - c. During deep sedation/analgesia, there is purposeful response after painful stimulation.
 - d. During general anesthesia, there is no response to verbal or painful stimulation.
19. Some factors which may be associated with difficulty in airway management are: (circle one or more)
- a. Significant obesity
 - b. Trisomy 21, advance rheumatoid arthritis and jaw abnormalities
 - c. Short neck, limited neck extension and decreased thyromental distance
 - d. Previous problems with anesthesia and sedation
20. Monitoring of O₂ saturation is an appropriate substitute for monitoring a patient's respirations.
- True False
21. In situations where patient positioning, equipment, or draping inhibits the ability to observe the patients respirations, ET CO₂ monitoring is recommended.
- True False

I understand that I must pass the test to be granted privileges for moderate sedation.

Printed Name: _____

Signature: _____

Date: _____

(For internal use only: Test Score (check one): [Pass] [Fail]