UNM SRMC
MODERATE AND DEEP SEDATION CLINICAL PRIVILEGES

Name:
Effective Dates: ____________ To: ____________

[ ] Initial Appointment
[ ] Reappointment

Instructions
For some practitioners, the privilege of PROCEDURAL SEDATION is requested as a non-core privilege. The individual requesting PROCEDURAL SEDATION PRIVILEGES must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and maintenance of clinical competence. The head of the SRMC anesthesiology department will approve PROCEDURAL SEDATION privileges. Physicians and midlevel providers with core privileges in anesthesiology or emergency medicine do not require separate privileging to deliver sedation, as this is an integral aspect of these specialties. Exempt providers will, however, be required to participate in the same quality assurance program for sedation as all providers administering procedural sedation. All PROCEDURAL SEDATION will be delivered in accordance with the SRMC Conscious/Moderate Sedation and Deep Sedation Policies. Note: These privileges are not required for the management of patients that are mechanically ventilated.

MODERATE SEDATION

Moderate sedation/analgesia A drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained. Practitioners must be competent to rescue patients from a more profound level of sedation, which may involve airway support. Physicians may administer or supervise qualified allied health professionals (as defined above) in the administration of moderate sedation. Moderate sedation may only be administered in accordance with relevant SRMC policies and procedures.

Qualifications: To be eligible to apply for MODERATE SEDATION privileges the applicant must meet the following criteria:

Initial Appointment:

1. MD/DO/AHP with membership on the SRMC medical staff

AND

2. Possess current ACLS or PALS certification
3. Successfully complete both the moderate sedations self-study module and the moderate sedation case simulation

OR

4. Documentation of the performance of 20 moderate sedation cases in the year prior to initial application or demonstration of the provision of a similar service reflective of the scope of privilege requested.

OR

5. A letter from the applicant’s current department chair attesting to the applicant’s competence in this area is acceptable evidence of preexisting competence.

OR

6. Completion of training within two years of application that included the administration of moderate sedation. A letter from the program director may be requested in this case.

Reappointment:

1. Renewal of written competency

AND

2. Maintenance of ACLS or PALS certification

AND

3. Satisfactory performance on review of quality indicators by department of anesthesiology

AND

4. Performance of an adequate volume with acceptable results based on the ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privilege requested is required of all applicants for renewal of privilege.
Moderate Sedation Core Privileges

Requested

Core Moderate Sedation Procedures:

1. Physical assessment of patients for moderate sedation and assignment of American Society of Anesthesiologists Physical Status
2. Interpretation of capnography, oximetery, and electrocardiography in sedated patients
3. Airway management necessary to rescue from deeper levels of sedation, including bag-mask ventilation, oropharyngeal and nasopharyngeal airway insertion, and emergent endotracheal intubation
4. Pharmacologic reversal of sedation
5. Supervision of qualified allied health professionals in the administration of and monitoring of moderate procedural sedation
6. Administration of drugs necessary to achieve moderate sedation with the exception of propofol, ketamine and etomidate
DEEP SEDATION

A drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance in maintaining a patent airway and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained but may be impaired.

Qualifications: To be eligible to apply for DEEP SEDATION privileges the applicant must meet the following criteria:

Initial Appointment:

1. MD or DO with full membership on the SRMC medical staff

AND

2. Current ACLS or PALS certification

AND

3. Successful completion of the Advanced Procedural Sedation Class (equivalent recent training may be considered by the head of anesthesiology)

or

(A) Completion of the Advanced Procedural Sedation written competency (or equivalent)

(B) Documentation of airway management competency (10 or more endotracheal intubations in the year preceding initial application)

(C) Documentation of the successful performance of at least 40 deep procedural sedation cases in the two years preceding initial application

Reappointment:

1. Current ACLS or PALS certification

AND

2. Renewal of written competencies every two years
3. Performance (with documentation) of at least 10 cases of deep procedural sedation per year

AND

4. Satisfactory performance on review of quality indicator by department of anesthesiology

**Deep Sedation Core Privileges**

☐ Requested

**Deep Sedation Core Privileges:**
1. Physical assessment of patients for sedation
2. Interpretation of ECG, capnography, oximetry
3. Airway management intervention as necessary, including but not limited to bag-mask ventilation, oral or nasopharyngeal airway insertion, supraglottic airway insertion, endotracheal intubation
4. Administration of drugs necessary to achieve deep sedation, including propofol, ketamine and etomidate
5. Pharmacologic reversal of sedation
6. Supervision of qualified allied health professionals in the provision and monitoring of deep sedation
7. Cardiopulmonary resuscitation
Acknowledgment of Practitioner

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at UNM SRMC, and I understand that:

a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.

b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

I have read and understand the SRMC moderate/deep sedation policies and agree to conform to them at all times, including reporting requirements.

Signed ____________________________ Date _____________________

Clinical Service Chief's Recommendation

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

☐ Recommend all requested privileges.

☐ Recommend privileges with the following conditions/modifications:

☐ Do not recommend the following requested privileges:

<table>
<thead>
<tr>
<th>Privilege</th>
<th>Condition/Modification/Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
</tbody>
</table>

Notes:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Print Name ____________________________ Signature ____________________________ Date _____________________

Clinical Service Chief or Designee Signature