

SEDATION GUIDELINE REVISIONS

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GUIDELINES FOR MONITORING AND MANAGEMENT OF PEDIATRIC PATIENTS BEFORE, DURING, AND AFTER SEDATION FOR DIAGNOSTIC AND THERAPEUTIC PROCEDURES: UPDATE 2018

Revision to replace current wording in “Deep Sedation/General Anesthesia; Personnel” (page e11) of 2016 document available at:
<http://pediatrics.aappublications.org/content/pediatrics/early/2016/06/24/peds.2016-1212.full.pdf>



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During deep sedation/general anesthesia of a pediatric patient in a dental facility, there must be at least two individuals present with the patient throughout the procedure. These two individuals must have appropriate training and up to date certification in patient rescue, as delineated below, including drug administration and pediatric advanced life support (PALS) or advanced pediatric life support (APLS). One of these two must be an independent observer who is independent of performing or assisting with the dental procedure. This individual's sole responsibility is to administer drugs, constantly observe the patient's vital signs, depth of sedation, airway patency, and adequacy of ventilation. The independent observer must, at a minimum, be trained in pediatric advanced life support (PALS or APLS) and capable of managing any airway, ventilatory, or cardiovascular emergency event resulting from the deep sedation/general anesthesia. The independent observer must be skilled to establish intravenous access and draw up and administer rescue medications. The independent observer must have the skills to rescue a non-breathing child, a child with airway obstruction, a child with hypotension, anaphylaxis, or cardiorespiratory arrest include the ability to open the airway, suction secretions, provide constant positive airway pressure (CPAP), insert supraglottic devices (oral airway, nasal trumpet, laryngeal mask airway) and perform successful bag-valve-mask ventilation, tracheal intubation, and cardiopulmonary resuscitation. The independent observer in the dental facility as permitted by state regulation must be one of the following: a physician anesthesiologist, a certified registered nurse anesthetist, a second oral surgeon, or a dentist anesthesiologist. The second individual, who is the practitioner in the dental facility who is performing the procedure, must be trained in PALS (or APLS) and capable of providing skilled assistance to the independent observer with the rescue of a child with any of the adverse events described above.



During deep sedation/general anesthesia of a pediatric patient in a hospital or surgicenter setting at least two individuals must be present with the patient throughout the procedure with skills in patient rescue and up to date PALS (or APLS) certification as delineated above. One of these individuals may either administer drugs or direct their administration by the skilled independent observer. The skills of the individual directing or administering sedation/anesthesia medications must include those described above. Providers who may fulfill the role of the skilled independent observer in a hospital or surgicenter as permitted by state regulation must be: a physician with sedation training and advanced airway skills such as, but not limited to, an anesthesiologist, an oral surgeon, a dentist anesthesiologist, or other medical specialists with the requisite licensure, training and competencies; a certified registered nurse anesthetist or certified anesthesiology assistant; a nurse with advanced emergency management skills such as several years of experience in the emergency room, pediatric recovery room, or intensive care setting, i.e., nurses who are experienced with assisting the individual administering or directing sedation with patient rescue during life-threatening emergencies.



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