

EXAMPLE – PROCEDURAL SEDATION – INTRA PROCEDURE

Insert logo and LHD/hospital name here

Insert name of tool

Surname:

Given Name(s):

D.O.B:

Address:

Location/ward:

MRN:

Male ☐ Female ☐

M.O:

Affix label here

Procedure:	
Time of arrival in room	
Time out completed	YES <input type="checkbox"/> NO <input type="checkbox"/>
Time procedure completed	

Monitoring	Pulse Oximetry <input type="checkbox"/>	Automated BP <input type="checkbox"/>
	Capnography <input type="checkbox"/>	ECG <input type="checkbox"/>
Oxygen ____ L/Min		

Attending Staff	
Proceduralist	
Sedationist	
Clinician Airway Monitor	
Procedure Nurse	
Other staff:	

< Use National Inpatient Medication Chart or other appropriate chart for Medications>

<Use a NSW Health Standard Observation Chart for Observations>						
Sed. Score						
Time						
Sedation Score: 1 = Alert 2 = Responds to Verbal 3 = Responds to Pain 4 = Unresponsive						

EXAMPLE – PROCEDURAL SEDATION – POST PROCEDURE

Procedure:		Oxygen Therapy	
Time of arrival in room:		Pulse Oximetry	
Received by:		IV therapy	

<Use a NSW Health Standard Observation Chart for Observations>						
Sed. Score						
Time						
Sedation Score: 1 = Alert 2 = Responds to Verbal 3 = Responds to Pain 4 = Unresponsive						

Discharge / Transfer of Care		
Item	Yes/No/NA	Notes
IV Cannula removed		
Tolerating fluid?		
Seen by proceduralist / sedationist		
Medical Certificate		
Personal items returned		
Post procedure information given		
Follow up arranged		
Escort Home/back to ward		

Vital Signs	
Vital signs reviewed	YES <input type="checkbox"/> NO <input type="checkbox"/>
Time Discharged:	
Discharged by:	