



SOCIETY FOR PEDIATRIC SEDATION

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Pediatric Sedation Nursing Standards of Care

Assessment

The pediatric sedation nurse collects physical, historical and situational information, both subjective and objective, that is relevant to the sedation process and the procedure to be completed.

Measurement criteria:

- Information is collected from the patient, family, other healthcare providers and/or ordering physician to gain a clear understanding of the relationship between the needs of the patient and the goal of the ordering physician to gather information that will direct treatment/care toward the patient's optimum level of wellness
- The patient's needs and physician's goals are prioritized such that the benefit of the information or treatment which is sought does not outweigh the risks to the patient's optimum level of wellness
- Baseline physical data is collected using age and size appropriate supplies, equipment and techniques
- A head to toe assessment is performed with focus on systems and characteristics most vulnerable to the inherent risks of sedation
- This data is analyzed using formal knowledge, evidenced based practice, and practice guidelines set forth by each state's Nurse Practice Act, the Joint Commission (TJC), the Center for Medicare & Medicaid Services (CMS), the American Academy of Pediatrics (AAP), the American Society of Anesthesiologists (ASA), as well as, individual institutional policies and procedures
- Relevant information is communicated to members of the sedation /procedural team
- Patient and family educational needs are identified

Diagnosis

The pediatric sedation nurse utilizes the information gathered through assessment to determine diagnosis and care issues.

Measurement criteria:

- Assessment data is analyzed and interpreted using nursing clinical judgment to identify actual and/or potential nursing diagnoses
- Steps are taken to establish validity of each diagnosis and to prioritize the subsequent list
- The nursing diagnoses are utilized to establish the patient's sedation/procedural plan and expected outcomes

Outcome Identification

The pediatric sedation nurse identifies the desired outcome for the patient/family, as well as, the desired outcome for the procedure/treatment to be performed.

Measurement criteria:

- Outcomes are based on the patient's actual or potential nursing diagnoses, the expected course of the sedation process and its potential risks, and any care issues inherent to the procedure/treatment the patient will undergo
- Outcomes are developed through collaboration and communication with the patient, the family and the healthcare providers involved in the patient's care
- Outcomes can change based on the patient's response to the sedation/procedure or to other circumstances that influence the provision of care or health of the patient
- Outcomes are attainable and measurable

Planning

The pediatric sedation nurse creates a plan of care that incorporates nursing interventions aimed at optimizing patient outcomes.

Measurement criteria:

- The plan is specific to the patient and takes into consideration all the information obtained from the assessment, the actual and potential nursing diagnoses, and the identified outcomes
- The plan includes the collaboration and participation of the patient, family and healthcare providers and seeks to optimize participation toward outcomes
- The plan utilizes evidence based practices
- The plan organizes the patient's care throughout the sedation process, as well as, facilitates the completion of the procedure/treatment sought
- The plan includes measure to ensure safety
- The plan addresses the learning needs of the patient and family

Implementation

The pediatric sedation nurse coordinates, carries out, collaborates with the healthcare team and adapts the plan of care as needed based on the patient's status, to ensure health promotion and safe practice.

Measurement criteria:

- Interventions are implemented such that the patient progresses through the sedation and procedural processes with minimal complications
- Interventions include preparing for the possibility of complications and life threatening circumstances
- Interventions follow the framework of the sedation process but are adapted to the individual needs of the patient and family
- Interventions allow for the participation of the patient and family to the extent that maximizes their contribution potential while preserving patient safety and facilitating outcomes
- Implementation of the plan of care and its adaptations are documented
- Patient and family education is facilitated throughout implementation of the plan of care

Evaluation

The pediatric sedation nurse evaluates the effectiveness of implementing the plan of care on attaining the desired outcomes.

Measurement criteria:

- Evaluation is a continuous process that facilitates adjustment of the plan of care based on the needs and responses of the individual patient/family
- The evaluation process includes input from the patient, family and healthcare providers
- Evaluation ensures that interventions effectively contribute to desired outcomes
- Evaluation occurs in a timely manner following intervention
- Evaluation results are appropriately documented