

NITROUS OXIDE (N2O) ACCREDITATION TOOL

SEDATION NUMBER

ACTION	OUTCOME / FEEDBACK
<p>Use the "Record of Sedation" to identify:</p> <ul style="list-style-type: none"> • Risk Assessment and contact point for consultation • Staff required • Fasting time • Consent • Sedation Summary 	
<p>Preparation of equipment & safety checks:</p> <ul style="list-style-type: none"> • Functional O2 and suction • Appropriate size bag & mask • Adequate supply of N2O and oxygen gases • Scavenger system ON and connected to wall suction • Circuit / filter and assess if reservoir bag is intact • Resuscitation equipment located • SAO2 probe and monitor ON • Mixture dial set to 100% oxygen • Sets flow between 5-8L/min / ensures adequate gas flow to inflate reservoir bag 	
<p>Preparation of Child:</p> <ul style="list-style-type: none"> • Measure mask size and familiarizes child with mask • Explanation of sedation equipment to the child • Coach child to breath using 100% oxygen via facemask • Adjust flow based on the child's respiratory pattern and demand 	
<p>Commencing sedation:</p> <ul style="list-style-type: none"> • Adjust nitrous oxygen mixture dial to deliver 30-70% N2O • Continual assessment of the level of sedation using UMSS and pain response to treatment • Indicates when appropriate level of sedation is achieved in order to start procedure 	
<p>During sedation:</p> <ul style="list-style-type: none"> • Assesses level of sedation and titrates N2O in increments of 10%, and can articulate the rationale for doing so • Monitors respiratory effort and gas flow in reservoir bag • Maintains line of sight and observes HR, RR, SAO2 & UMSS 5 minutely 	
<p>Completion of sedation:</p> <ul style="list-style-type: none"> • Weans N2O towards end of procedure • Administers 100% free flowing oxygen for 3 minutes • Continuously monitors child until baseline sedation score / vital signs are achieved • Discards disposable circuit / tanks are off 	
<p>Documentation:</p> <ul style="list-style-type: none"> • Completes "Record of sedation" for procedure / medication order / log book • Reports adverse events to designated medical / nursing team members 	

I _____ hereby declare that _____ has administered nitrous oxide in accordance with the hospital procedural sedation guidelines and criteria above.

SIGN:

DESIGNATION:

DATE: