GUIDELINES FOR GENERAL ANESTHESIA/CONSCIOUS SEDATION
ON-SITE EVALUATION

A. Operatory:

1. An operating chair or table which permits the patient to be positioned so that the operating team can maintain the airway and alter patient positions quickly to treat an emergency.

2. A backup lighting system of sufficient intensity to permit completion of any operation underway at the time of general power failure. Battery-operated flashlight may suffice.

3. Suction equipment which permits aspiration of oral and pharyngeal cavities. Backup suction device is recommended.

4. An adequate oxygen delivery system capable of delivering oxygen to the patient under positive pressure.

5. A recovery area, which can be an operatory, with oxygen, adequate lighting, suction, and electrical outlets and allows staff to observe patient during recovery.

6. Ancillary Equipment (* optional)
   a. Oral airways
   b. Adequate suction apparatus
   c. Sphygmomanometer
   d. Stethoscope
   e. Syringes – IV needles
   f. Continuous IV drip equipment
   g. EKG monitoring equipment (*)
   h. Oximetry
   i. AED Defibrillator
   j. Laryngoscope and tubes (*)

B. Records:

1. Appropriate medical history and physical evaluation records.

2. Adequate conscious sedation/general anesthesia records.

3. Patient’s blood pressure, pulse rate, and respiration

4. Drugs or other substance dosage

5. Informed Consent

C. Drugs (not all agents necessary in each office – will depend of technique used):

1. Vasopressor

2. Narcotic antagonist
3. Benzodiazepine antagonist (Romazicon)
4. Ammonia
5. Atropine
6. Oxygen
7. Antihistaminic
8. Anticonvulsant
9. Antiemetic
10. Antihypertensive
11. Nitroglycerine or Amyl Nitrate
12. IV concentrated sugar
13. Ane ctine
14. Adrenalin 1:10,000
15. Lidocaine
16. Bronchodilator
17. Cortical steroids
18. Any other pertinent to technique

D. Demonstration of Conscious Sedation/General Anesthesia Technique:
1. Observation of one case of conscious sedation/general anesthesia to determine the appropriateness of technique and adequacy of patient evaluation and care.

2. Confirmation that all personnel directly associated with the administration of conscious sedation/general anesthesia or assisting during such procedures are adequately trained to perform those functions, including emergency functions, which they may be called upon to perform.

3. Determination that dentist and staff can recognize and treat all cited emergencies consistent with sound therapeutic principles. The dentist will be asked to respond to five (5) of the simulated emergencies listed below.

<table>
<thead>
<tr>
<th>Respiratory depression and arrest</th>
<th>Recognition</th>
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<tbody>
<tr>
<td></td>
<td>Patient position</td>
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<tr>
<td></td>
<td>Positive pressure oxygen</td>
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<tr>
<td></td>
<td>Narcotic antagonist</td>
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<td></td>
<td>Benzodiazepine antagonist</td>
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<td></td>
<td>Monitor</td>
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<tr>
<td>Condition</td>
<td>Treatment/Actions</td>
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</table>
| Laryngospasm                              | Prompt treatment  
Airway checked  
Suction  
Positive pressure oxygen  
Anectine  
Supplemental airways |
| Bronchospasm (acute bronchial asthma)     | Brochodilator  
Positive pressure oxygen |
| Emesis                                    | Patient position  
Prompt treatment  
Vomitus evacuated  
Secure airway |
| Aspiration                                | Evaluation (auscultation and observation)  
Positive pressure oxygen  
Bronchospasm  
Activate EMS (911) |
| Angina pectoris                           | Nitroglycerin or  
Amyl nitrate  
Oxygen |
| Myocardial infarction                     | Differential diagnosis  
Oxygen  
Pain reliever  
Activate EMS (911) |
| Hypotension                               | Pre-op blood pressure and pulse  
Oxygen  
Drugs  
Position  
Sequential blood pressure |
| Hypertension                              | Pre-op blood pressure and pulse  
Evaluation  
Antihypertensive agents |
| Syncope                                   | Oxygen  
Patient position  
Vasopressor |
| Allergic reaction (anaphylaxis)           | Oxygen  
Antihistamine  
Epinephrine  
Vasopressor  
Bronchodilator |
| Convulsions                               | Etiology  
Supportive measures  
Anticonvulsant drugs |
| Bradycardia                               | Monitor  
Atropine |
| Insulin Shock                             | Diagnosis  
Concentrated sugar (oral or IV) |
| Cardiac arrest                            | Rapid diagnosis  
Immediate therapy  
Adequate ventilation  
Adequate compressions  
Drug therapy  
Activate EMS (911) |