

**VIRGINIA BOARD OF NURSING  
Ad Hoc Committee on Conscious Sedation  
Minutes**

**October 28, 2014**

- TIME AND PLACE:** The meeting of the of the Board of Nursing Ad Hoc Committee on Conscious Sedation convened at 9:30 a.m. in Board Room 4, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.
- MEMBERS PRESENT:** Kelly McDonough, DNP, RN; Chairperson  
Guia Caliwagan, RN, MAN  
Trula Minton, MS, RN
- STAFF PRESENT:** Jay P. Douglas, R.N., M.S.M., C.S.A.C., Executive Director  
Elaine Yeatts, Policy Analyst, Department of Health Professions
- OTHERS PRESENT:** Ruth Williams, RN, MSN  
Mike Fallacaro, Professor and Chair of the Department of Nurse Anesthesia at VCU and representative for Virginia Association of Nurse Anesthetists  
David Bolt, CRNA and Director of Anesthesia Department at DePaul Medical Center  
Karen Smith, DNP and representative from Emergency Room Nurses Association  
James Pickral, Virginia Nurses Association  
Scott Johnson, Medical Society of Virginia
- CALL TO ORDER:** Dr. McDonough called the meeting to order.
- REVIEW OF CHARGE OF THE COMMITTEE:**  
Ms. Douglas provided a review of the charge of the Committee and background information:
- The Board of Nursing undertook a review of all guidance documents in 2013. Guidance Document 90-5 Administration of Neuromuscular Blocking Agents for Conscious Sedation is the final guidance document to be reviewed.
  - The Virginia Association of Nurse Anesthetists (VANA) submitted a request for review and proposed changes in 2009. This request was subsequently withdrawn; however, VANA remains interested in the revision of Guidance Document 90-5.
  - Board staff receive many inquiries from nurses and employers of nurses seeking guidance on the role of the registered nurse in conscious sedation in a variety of settings.
- OVERVIEW OF REGISTERED NURSE SEDATION ADMINISTRATION AND LITERATURE REVIEW:**  
Ruth Williams provided a PowerPoint presentation that provided an overview of her literature search and themes identified. This included:

- Literature search – 26 articles 2003 through 2013
- Organizations researched
- Major themes identified
  - Sedation is a continuum
  - Sedation has 4 identified levels; important to identify the purpose and level desired
  - Education and training requirements
  - Decision to designate sedation responsibilities and competency requirements
  - Supervision requirements
  - RN administered Propofol remains controversial
- Review of state boards of nursing position statement

Ms. Williams researched and compiled this information as part of a practicum at the Board of Nursing while a graduate student at Virginia Commonwealth University (VCU) School of Nursing. Ms. Williams' current position at VCUHS is one that she had held for many years as Nurse Manager of Procedural Labs.

#### REVIEW OF CURRENT GUIDANCE DOCUMENT 90-5:

Ms. Douglas reviewed Guidance Document 90-5 Administration of Neuromuscular Blocking Agents for Conscious Sedation which was first developed by the Board in 1990.

#### REVIEW OF PROPOSED CHANGES SUBMITTED BY VANA:

Ms. Douglas reviewed proposed changes to the guidance documents submitted by VANA in 2009.

#### PUBLIC COMMENT:

The Committee offered an opportunity for public comment. The following persons made public comment which was recorded by Loretta Larsen, court reporter from Crane-Snead & Associates.

- Mike Fallacaro, Professor and Chair of the Department of Nurse Anesthesia at VCU and representative from VANA
- David Bolt, CRNA and Director of Anesthesia Department at DePaul Medical Center
- Karen Smith, DNP and representative from Emergency Room Nurses Association

#### Key points made by speakers included:

- Title of Guidance Document 90-5 needs to be changed
- Background information and evidence provided by Ms. Williams was thorough, comprehensive and objective
- Any guidance provided by the Board should only address procedural sedation scenarios
- Administration of sedation drugs to a patient that was ventilated should not fall under this guidance document
- Determining intent of sedation is very important
- Deep sedation should always involve anesthesia providers

- Guidance on sedation issues is needed as RN's in some settings seem reluctant to push certain sedation medication when directed by or in the immediate presence of an anesthesia provider
- RN's in emergency rooms are delivering procedural sedation (mild-moderate) on a daily basis
- JCAHO standards address sedation procedures
- Demonstration of competency and patient safety should be primary focus
- Reference to STEEEP guidelines should be included

COMMITTEE DISCUSSION:

Dr. McDonough facilitated discussion on the topic the RN's role in procedural sedation. The Committee recommends:

- Retiring current Guidance Document 90-5
- Develop new guidance document "RN Role in Procedural Sedation"
- Content of guidance document to include 10 themes identified in the literature review, and references to STEEEP guidelines
- Draft proposal to be prepared by Board staff with input from Ms. Williams
- Draft will be distributed for public comment prior to the Committee's next meeting to consider draft

IDENTIFICATION OF NEXT STEPS:

Workplan:

- Draft development for distribution late February 2015
- Next Committee meeting to be scheduled for March 2015
- Final draft presented to the full Board in May 2015

ADJOURNMENT:

The meeting was adjourned at 12:00 p.m.

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Jay P. Douglas, MSM, RN, CSAC, FRE  
Executive Director