



VA NATIONAL CENTER FOR PATIENT SAFETY

Moderate Sedation Toolkit for Non-Anesthesiologists

Learner Objectives

*Content Produced by
The Durham VAMC Patient Safety Center of Inquiry (PSCI)*

Learner Objectives for Moderate Sedation Training

Detailed Objectives

The learner will:

1. Perform a pre-sedation patient assessment and describe the relevant patient issues.
2. Evaluate the airway and articulate the important findings and predictors of difficult mask ventilation and/or difficult tracheal intubation.
3. Demonstrate pre-procedural patient counseling regarding patient expectations during sedation and instructions for recovery after sedation.
4. Correctly identify high-risk patients (both high-risk for failed sedation and high risk for sedation related complications).
5. Describe the risk stratification scale (ASA I, II, III, IV) and examples of pre-procedural patient conditions that warrant anesthesiology consultation.
6. Assemble and demonstrate appropriate use of basic safety resuscitation equipment, including suction, supplemental O₂, airway devices, basic resuscitation medications, and emergency call resources.
7. Apply standard monitors correctly (ECG, NIBP, SpO₂, ETCO₂), identify alarm settings on the bedside monitor, and record vital signs at appropriate intervals.
8. Demonstrate use of topical lidocaine and describe signs of lidocaine toxicity.
9. Describe the continuum of sedation-anesthesia and the effects on airway, ventilation, vital signs and mental status.
10. Demonstrate appropriate titration of sedative medications (midazolam, fentanyl) in the context of different pre-procedural patient conditions and comorbidities.
11. Use reversal agents (naloxone, flumazenil) when indicated and demonstrate appropriate titration of these drugs.
12. Correctly identify the patient's sedation level or level of consciousness (LOC) according to either the Ramsay Scale or the Richmond Agitation-Sedation Scale (RASS).
13. Describe the common complications of moderate sedation.
14. Demonstrate the techniques for relieving airway obstruction and use of bag and mask ventilation, oral and nasal airways.
15. Describe the common etiologies of hypotension and hypertension during procedural sedation and their primary management.



16. Describe a situation in which the patient cannot be sedated adequately.
17. Demonstrate the initial management of gastric content regurgitation and pulmonary aspiration.
18. Calculate appropriate sedative drug doses for the following patient: 76-year-old man, 5 feet 6 inches tall, 320 pounds and describe why a dose adjustment is needed.