

# Sedation



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*St. Maarten Medical Center*

## What is intravenous sedation?

Intravenous sedation is when a sedative (sedation medicine) is injected into your bloodstream (vein) through a drip (tube) to relax you.

There are three different levels of intravenous sedation. They are called 'minimal', 'moderate' (sometimes also called conscious sedation) and 'deep' sedation.

- **Minimal sedation** – the anaesthetist will give you a small amount of sedative. You will feel relaxed and less worried by what is happening around you, but you will be awake and able to talk normally. You are likely to remember having your treatment, but not all the detail. Minimal sedation should not affect your breathing.
- **Moderate sedation (conscious sedation)** – the anaesthetist will give you a little more sedative(s) so you will feel very relaxed and drowsy. Importantly though, your anaesthetist can still talk with you and you will still be able to follow simple instructions. You may remember some parts of your treatment. Moderate sedation should not affect your breathing.
- **Deep sedation** – the anaesthetist will give you a higher dose of one or more drugs that will make you sleep during most of your treatment. Your doctor will not expect to talk to you during your treatment. Your breathing may be affected and your anaesthetist will watch and help you if needed. You may sometimes remember part of your treatment.

## What is oral sedation?

This can sometimes be useful to relax very anxious people before a general anaesthetic, but it is usually not enough to relax you during a procedure on its own. It takes a while to work and it can be difficult to get the right dose as it varies between people.

**Please do not ask your GP to prescribe oral sedatives for you to take before you come into hospital, unless you have already signed your consent form, as it can affect your thinking and judgment.**

It is important that you can think clearly when you meet with your doctor to discuss the risks and to sign a form to state that you agree to have the operation or procedure.

# What are difference between sedation and general anaesthesia?

The main differences between sedation and general anaesthesia are:

- your level of consciousness,
- the need for equipment to help support your breathing,
- possible side effects.

With minimal and moderate sedation you feel drowsy, comfortable, sleepy and relaxed, but you remain conscious throughout the procedure.

With general anaesthesia you are completely unresponsive and unconscious during the procedure. Deep sedation is between the two.



## What treatment can be carried out under intravenous sedation?

Many minor treatments can be undertaken with intravenous sedation. A few examples include:

- skin or breast biopsies,
- minor repair to fractured bones,
- minor surgery to the skin, hand or foot,
- procedures to help diagnose problems with the stomach (endoscopy), the lung (bronchoscopy), the colon (colonoscopy) or the bladder (cystoscopy),
- removal of teeth or other dental treatment,
- eye operations, such as cataract removal.

## What are the benefits of intravenous sedation?

- It is quick acting and the dose can be adjusted so you get just the right amount.
- It allows you to be more relaxed during your treatment. It may also mean that you remember very little about your treatment afterwards.
- For some procedures, it avoids the need for a general anaesthetic which

may be unsuitable for patients with some medical problems.

- It usually has fewer side effects than a general anaesthetic.
- Recovery is quicker than after a general anaesthetic, so you can usually go home within an hour of your treatment if you feel well.

## What are the risks of intravenous sedation?

- Your breathing rate may become slow. This is common in deep sedation, but is a risk whenever sedation is used. The anesthesiologist is skilled in monitoring you and can assist your breathing if required.
- It is common for your blood pressure to drop, but the anesthesiologist is trained in treating this too.
- Feeling sick or vomiting can happen, but is uncommon.
- Any allergic reaction to the sedation drugs is very rare.
- You may have a small bruise where your cannula was placed or attempted.
- Afterwards you may feel less steady on your feet and you may be at higher risk of falling, especially if you are elderly.
- Sedation can affect your judgement and memory for up to 24 hours.

## What are the alternatives to sedation?

- **A general anaesthetic:** you will be fully unconscious throughout and have no memory of the procedure.
- **Local anaesthetic without any sedation:** you will be fully awake during your treatment, but will be comfortable. A screen can be placed to stop you seeing the procedure.

## Who decides whether I can have sedation?

You can discuss the option of sedation with your doctor or nurse at the time of assessment. If it hasn't been offered, you can always ask to see if it is possible to have it.

If you are at higher risk from existing medical conditions, your doctors will discuss the options with you and you can reach a decision together.

## I'm having sedation, what should I do before I come to the hospital?

- If you have people that you look after, for example children or old people, you will need to plan for someone else to look after them until the next day.
- A capable adult will need to take you home by car or taxi – ideally not public transport. As the effects of sedation can last up to 24 hours, they should stay overnight to look after you.
- Take all your medicines to hospital with you, including any inhalers you use.
- If you have an illness, a cold or you are pregnant, please contact your hospital as it may not be safe to have sedation. Your treatment may have to be re-arranged.
- Let your doctor know on the day of the procedure if you are breastfeeding.
- Remove all makeup – including nail varnish and jewelry – before coming to hospital. You may wear a wedding band.
- Bring some loose clothing, such as a dressing gown or a fleece, to keep you comfortable and warm. Wear flat shoes that are easy to put on.

## Can I eat and drink before my treatment?

The clinic or hospital will give you instructions on when to stop eating and drinking.

You will usually be asked to stop eating six hours before your treatment, but you may drink clear fluids up to two hours before your treatment. Clear fluids you will be allowed to drink include water, diluted juice (no bits) and black tea or coffee (no milk or cream).

If you have diabetes, you should ask for specific instructions about when you should take your medication and stop eating food.

## What will happen before my treatment?

You will usually change into a gown. When you go to the procedure room, your anaesthetist will attach some monitoring equipment to you. The

equipment used will depend upon what procedure and type of sedation you are having, but will usually include:

- a blood pressure cuff on your arm,
- leads on your upper chest to record your heart rhythm,
- a clip on your finger to measure your oxygen levels,
- a thin plastic tube that measures the amount of carbon dioxide that you breathe out. This is usually attached to an oxygen mask.

## How is intravenous sedation given?

- The sedation is given through a drip (cannula) which is put into a vein in your arm or the back of your hand. More can be given as you need it during the procedure. In deep sedation you will usually have a drug given continuously into your vein.
- You will usually have oxygen to breathe from a plastic tube sitting just inside your nose, or through a face mask.

## When can I go home?

- If you have light or moderate sedation, you can usually go home within an hour of your treatment.
- If you have deep sedation, your recovery will likely take one to two hours. When you can go home may often depend on recovery from the procedure itself.

## Are there any important instructions for afterwards?

- As previously stated, a capable adult will need to take you home by car or taxi – ideally not public transport – and remain with you overnight. If arrangements have not been made for someone to accompany you after treatment, you may not be able to go home after the procedure.
- Sedation may make you unsteady on your feet. Please be careful on stairs and have somebody with you if you feel unsteady.
- Your decision making may be affected for up to 24 hours after your treatment, so you should not make any important decisions during that time. Be careful if using social media.
- You should not return to work, look after dependents, drive, cook or

operate any machinery for 24 hours. It can take 24 hours for the drugs to leave your body.

- You should not take any alcohol or sleeping tablets for 24 hours after the procedure.
- Your doctor will give written instructions about further treatment to follow at home.
- The hospital will give you a contact telephone number to call if you feel unwell at home.

## **Risks associated with your anaesthetic:**

- Feeling sick.
- Sore throat.
- Shivering.
- Damage to teeth, lips and tongue.
- Damage to the eye during general anaesthesia.
- Post-operative chest infection.
- Becoming confused after an operation.
- Accidental awareness during general anaesthesia.
- Serious allergy during an anaesthetic (anaphylaxis).
- Headache after a spinal or epidural injection.
- Nerve damage associated with having an operation under general anaesthetic.
- Nerve damage associated with a spinal or epidural injection.
- Nerve damage associated with peripheral nerve block.
- Equipment failure.
- Death or brain damage.

## Contact information

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