



Short title: Monitored care

1. Purpose

To provide guidance regarding the requirements and principles of monitored care when provided by an anaesthetist for a procedure performed under local anaesthesia without planned sedation, or where the patient is in a critical condition such as coronary angiography post-cardiac arrest. Monitored care may also be required in special situations such as the intravascular administration of contrast medium in a suspected susceptible patient.

2. Scope

This applies to all specialist anaesthetists, trainees and rural generalist anaesthetists. When procedural sedation is provided then the principles in college professional document *PG09 Guideline on procedural sedation* should be followed.

3. Background

The Australian and New Zealand College of Anaesthetists endorses the concept of monitored care provided by an anaesthetist for a procedure performed where there is a risk of clinical deterioration, or the patient tolerating the procedure poorly.

Monitored care may be requested by a surgeon, dentist, obstetrician, physician, endoscopist, radiologist, radio therapist, or other proceduralist, or by a patient or their carer.

The provision of monitored care may be exacting and time consuming because of the general condition of the patient and, in some cases poor access, the location of the procedure and availability of support staff.

4. General principles

4.1 Monitored care shall include:

- 4.1.1 Performance of a pre-anaesthetic consultation in accordance with college professional document *PG07 Guideline on pre-anaesthesia consultation and patient preparation*, including obtaining consent in accordance with college professional document *PS26(A) Position statement on informed consent for anaesthesia or sedation*.
- 4.1.2 Preparing for likely or possible interventions. This may include intravenous cannulation and appropriate positioning to be able to manage the airway, in anticipation of possible requirement for resuscitation or unplanned sedation or anaesthesia or antibiotic administration.
- 4.1.3 Monitoring of the patient, as appropriate, in accordance with college professional document *PG18(A) Guideline on monitoring during anaesthesia*.
- 4.1.4 Other therapeutic measures as required.

- 4.1.5 Transfer of the patient, if required, to an appropriate Recovery Area in accordance with college professional document *PS04(A) Position statement on the post-anaesthesia care unit*. This may require transfer to an intensive care unit.
- 4.2 A record of clinical observations and of drugs administered shall be kept in accordance with college professional document *PG06(A) Guideline on the anaesthesia record*.
- 4.3 To ensure that standards of patient care are satisfactory, equipment and staffing of the area in which the patient is being managed should satisfy the requirements in the appropriate college professional document *PS55 Position statement on minimum facilities for safe administration of anaesthesia in operating suites and other anaesthetising locations*.

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