



# Comprehensive Medical and Dental Program Authorization Guideline

**TITLE**

Pediatric Procedural Sedation Prior Authorization Guideline

**RESPONSIBLE AREA**

Health Services

**History of Review:** 1/6/2012, 7/10/2013, 8/7/13, 6/9/2014, 7/11/16, 9/1/17, 12/9/18; 06/03/19

**Approval Date:** 06/03/19

**DESCRIPTION**

This guideline is used in the decision-making process regarding prior authorization for pediatric procedural sedation for non-invasive or mildly painful procedures.

**CLINICAL GUIDELINE****Goals of Sedation**

The goals of sedation in the pediatric patient for diagnostic and therapeutic procedures are to:

- 1) guard the patient's safety and welfare
- 2) minimize physical discomfort and pain
- 3) control anxiety, minimize psychological trauma, and maximize the potential for amnesia
- 4) control behavior and/or movement so as to allow the safe completion of the procedure
- 5) return the patient to a state in which safe discharge to home can safely occur

**These goals can best be achieved by selecting the lowest level of sedation with the highest therapeutic index for the procedure (minimal distress for patient) and highest likelihood of success in completing the procedure in a timely fashion.**

Each sedation should take into account the type of procedure that will be performed (i.e., painful vs. non-painful) and the age, developmental status, and personality type of the child. Thought should always be given to how a procedure could be accomplished without medication through the use of emotional support and/or distraction techniques.

**Definition:**

Sedation is a medically controlled state of depressed consciousness or unconsciousness. Sedation can be divided into conscious sedation (minimal to moderate), deep sedation, and general anesthesia. In conscious sedation, the patient maintains the ability to respond to external stimulation. In deep sedation, patients are not easily aroused. In general anesthesia, patients are not arousable by stimulation. The table below illustrates how the different levels of sedation may be assessed.

Sedation Level	Verbal Response	Pain Response	Airway Response	Breathing	Circulation
Anesthetic Overdose	0	0	0	0	0/+



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Anesthesia	0	0	0	0/+	++
Deep Sedation	0	+	+	++	+++
Moderate Sedation	+	++	+++	+++	+++++
Minimal Sedation	+++	++++	++++	+++++	+++++
No Sedation	+++++	+++++	+++++	+++++	+++++

The important clinical distinction between these states revolves around the ability of the patient to maintain his or her protective reflexes. The minimal and moderate sedated patient maintains protective reflexes, such as gagging and swallowing, and therefore can keep his or her airway patent without assistance. The deeply sedated patient may lose these reflexes and may not be able to maintain his or her airway. The patient under general anesthesia has lost protective reflexes and is unable to maintain his or her airway.

### **Procedures Likely to Require Procedural Sedation**

- MRI
- Bone Scan
- Skeletal Survey
- Dental Procedures:
  - fearful, anxious patients for whom basic behavior guidance techniques have not been successful;
  - patients cannot cooperate due to a lack of psychological or emotional maturity and/or mental, physical, or medical disability;
  - patients for whom the use of sedation may protect the developing psyche and/or reduce medical risk;
  - patients that are extremely uncooperative, fearful, anxious, or uncommunicative;
  - patients requiring significant surgical procedures;
  - patients for whom local anesthesia is ineffective because of acute infection, anatomic variations, or allergy.

### **REFERENCES**

- Maricopa Medical Center Department of Anesthesia Guidelines. UpToDate Literature Search, October 2008.
- Procedural Sedation in the Acute Care Setting. American Academy of Family Physicians, January 2005.
- Clinical Policy for Procedural Sedation and Analgesia in the Emergency Department. American College of Emergency Physicians, *Annals of Emergency Medicine*, 1998; 31:663.
- American Academy of Pediatric Dentistry. Guideline on Behavior Guidance for the Pediatric Dental Patient, 2008.
- Joint Commission on Accreditation of Healthcare Organizations. Comprehensive Accreditation Manual for Hospitals (CAMH): The Official Handbook. Oakbrook Terrace, Ill: JCAHO; 2006: PC41-PC43.



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**PLEASE NOTE:** State and Federal law take precedence over prior authorization guidelines. CMDP reserves the right to review and update guidelines periodically.