

## Sedation for GI Endoscopy - Summary Clinical Guideline

Ref No: CG-ENDO/2024/006 v2.0.0

### ***Fasting***

The standard fasting time is 2 hours for clear fluids (including tea/coffee with minimal milk) and 6 hours for solids (including particulate fluids).

### ***Monitoring and Oxygen Requirements***

**All** patients should be administered an oxygen from the commencement of sedation via the nasal route.

A pulse oximeter should be attached to **all** patients undergoing sedation from before the commencement of sedation until recovery discharge criteria have been met.

Patients undergoing upper GI endoscopy with NO sedation, require oxygen saturations, but not BP recording during the procedure. BP should be recorded during admission and in recovery only

Patients undergoing lower GI endoscopy with NO sedation, do not require oxygen saturations or BP recording during the procedure. BP should be recorded during admission and in recovery only

BP monitoring is NOT routinely required for all sedated patients in endoscopy. Blood pressure monitoring should be readily available and should be used in patients with relevant comorbidities, or in whom continuous verbal contact may be lost during the procedure. A decision will be made for each individual patient whether BP monitoring is required as part of stop moment.

Sedation drugs may be drawn up before the patient enters the endoscopy room but draw up usual maximum doses as listed below ONLY i.e. do NOT draw up 3mg of midazolam and 100micg of fentanyl, for all patients regardless of age.

Usual maximum total cumulative doses of sedation drugs are as follows

Fentanyl	<70 years	100microgram,
	>70 years	50microgram
Midazolam	<70 years	3mg,
	70-80 years	2mg,
	>80 years	1mg

Up to 5mg Midazolam may be used for younger patients (<30years) who are very anxious.

Due to the increased complexity, length of time and discomfort that can be experienced during ERCP, EUS or prolonged EMR procedures higher doses of Midazolam and opiates can be given at the endoscopists discretion.

Antagonist drugs (flumazenil and naloxone) should be immediately available but do not need to be drawn up