

Evidence Review

The Guideline for Moderate Sedation was approved by the AORN Guidelines Advisory Board and became effective as of July 15, 2021.

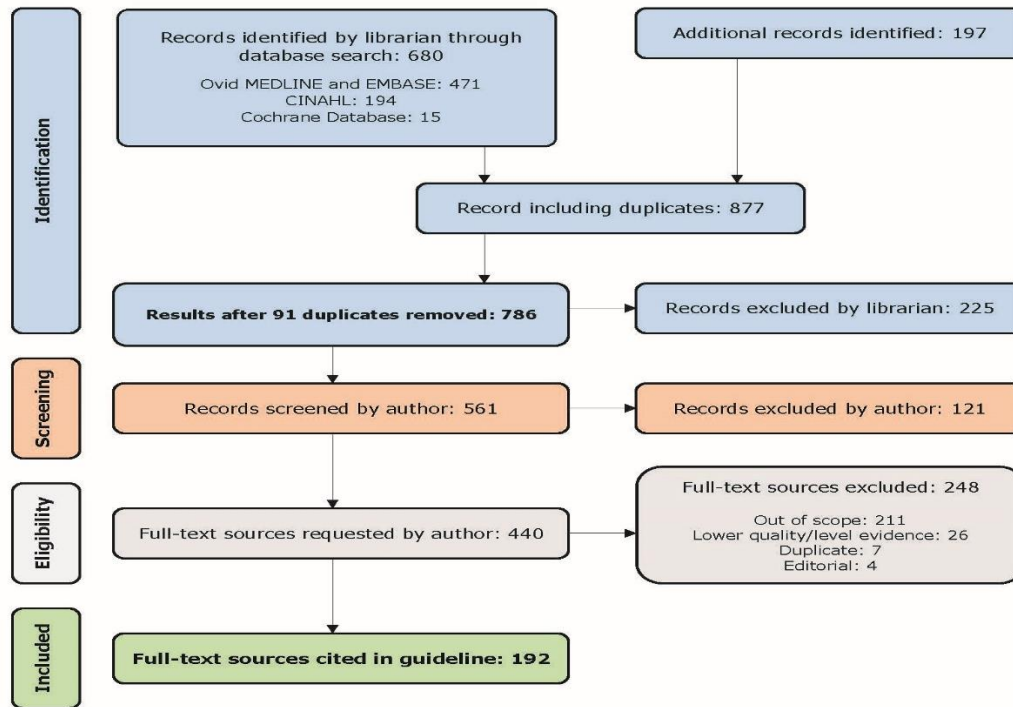
A medical librarian with a perioperative background conducted a systematic search of the databases Ovid MEDLINE, Ovid Embase, EBSCO CINAHL, and the Cochrane Database of Systematic Reviews. The search was limited to literature published in English from **January 2015 through May 2020**. At the time of the initial search, weekly alerts were created on the topics included in that search. Results from these alerts were provided to the lead author until **September 2020**. The lead author requested additional articles that either did not fit the original search criteria or were discovered during the evidence appraisal process. The lead author and the medical librarian also identified relevant guidelines from government agencies, professional organizations, and standards-setting bodies. **Search terms** included *airway management, airway obstruction, Aldrete recovery score, antianxiety/anti-anxiety agents, ASA Continuum of Sedation Scale, ASA Physical Status Classification System, assess*, Berlin questionnaire, bispectral index, capnography, computer assisted personalized sedation, conscious sedation, consciousness monitors, depth of sedation, dexmedetomidine, difficult airway, difficult mask ventilation, discharge readiness criteria, fasting guidelines, fentanyl, flumazenil, ketamine, Mallampati classification, Mallampati score, Mallampati test, midazolam, moderate analgesia, moderate sedation, Modified Observer's Assessment of Alertness/Sedation Scale, naloxone, nitrous oxide, NPO, nurse-administered sedation, obstructive sleep apnea, obstructive sleep apnea assess*, post-anesthetic discharge scoring system, preoperative fasting, preprocedural fasting, propofol, Ramsay Sedation Scale, sleep apnea (obstructive), Sedasys, sedation plan, STOP-Bang, tracheobronchomalacia, and thyromental distance test.*

Included were research and non-research literature in English, complete publications, and publications with dates within the time restriction when available. Historical studies were also included. Excluded were non-peer-reviewed publications and older evidence within the time restriction when more recent evidence was available. Editorials, news items, and other brief items were excluded. Low-quality evidence was excluded when higher-quality evidence was available, and literature outside the time restriction was excluded when literature within the time restriction was available (**Figure 1**).

Articles identified in the search were provided to the project team for evaluation. The team consisted of the lead author and one evidence appraiser. The lead author and the evidence appraiser reviewed and critically appraised each article using the AORN Research or Non-Research Evidence Appraisal Tools as appropriate. A second appraiser was consulted in the event of a disagreement between the lead author and the primary evidence appraiser. The literature was independently evaluated and appraised according to the strength and quality of the evidence. Each article was then assigned an appraisal score. The appraisal score is noted in brackets after each reference as applicable.

Each recommendation rating is based on a synthesis of the collective evidence, a benefit-harm assessment, and consideration of resource use. The strength of the recommendation was determined using the AORN Evidence Rating Model and the quality and consistency of the evidence supporting a recommendation. The recommendation strength rating is noted in brackets after each recommendation.

Figure 1: PRISMA 2009 Flow Diagram



Adapted from Moher D, Liberati A, Tetzlaff J, Atman DG; The PRISMA Group. Preferred reporting items for systematic reviews and meta-analyses: The PRISMA Statement. PLoS Med. 2009;6(6):e1000097.

Publication History

- Originally published April 1993, AORN Journal, as “Recommended practices for monitoring the patient receiving intravenous conscious sedation.”
- Revised; published in January 1997, AORN Journal, as “Recommended practices for managing the patient receiving conscious sedation/analgesia.” Reformatted July 2000.
- Revised November 2001; published March 2002, AORN Journal, as “Recommended practices for managing the patient receiving moderate sedation/analgesia.”
- Revised 2007; published in Perioperative Standards and Recommended Practices, 2008 edition.
- Minor editing revisions made to omit PND codes; reformatted September 2012 for publication in Perioperative Standards and Recommended Practices, 2013 edition.
- Minor editing revisions made in November 2014 for publication as “Guideline for managing the patient receiving moderate sedation/analgesia” in Guidelines for Perioperative Practice, 2015 edition.
- Revised December 2015 for online publication in Guidelines for Perioperative Practice.
- Evidence ratings revised and minor editorial changes made to conform to the current AORN Evidence Rating model, September 2019, for online publication in Guidelines for Perioperative Practice.
- Revised July 2021 for online publication in Guidelines for Perioperative Practice.

Scheduled for review in 2026.