

## Anesthesia sedation practices for patients in the pediatric congenital cardiac cath lab

1 November 2016

The Society for Cardiovascular Angiography and Interventions (SCAI), the Society for Pediatric Anesthesia (SPA) and the Congenital Cardiac Anesthesia Society (CCAS), today published recommendations for institutions and physicians diagnosing and treating pediatric patients in the catheterization laboratory. This first-of-its-kind document titled, "SCAI/CCAS/SPA Expert Consensus Statement for Anesthesia and Sedation Practice: Recommendations for Patients Undergoing Diagnostic and Therapeutic Procedures in the Pediatric and Congenital Cardiac Catheterization Laboratory," is published in *Catheterization and Cardiovascular Interventions*, the official journal of SCAI.

Studies concerning anesthesia-related morbidity and mortality have demonstrated that <u>pediatric</u> <u>patients</u>, especially patients with congenital heart disease, are at increased risk for adverse events and even <u>cardiac arrest</u> during surgery. Common complications in children undergoing anesthesia include airway events (laryngospasm, bronchospasm, apnea and aspiration), cardiovascular events (hypotension, arrhythmias and cardiac arrest) and post-operative issues.

The <u>consensus statement</u> provides pre-, intra- and post- procedure recommendations for patient monitoring in the pediatric congenital cardiac catheterization laboratory (PCCCL), regardless of whether minimal or no sedation is being used, or <u>general anesthesia</u> is being provided by an anesthesiologist.

"Practices regarding the way sedation is administered is highly variable across U.S. hospital systems and institutions," said Robert Vincent, MD, FSCAI, pediatric cardiologist at Children's Healthcare of Atlanta and the paper's lead author. "We developed these recommendations to alert and educate physicians and hospital administrators to the complex and dynamic challenges they may face when treating pediatric patients with

congenital heart disease."

The document includes:

- Anesthesia risks in patients with cardiac disease undergoing procedures in the PCCCL.
- Specific cardiac defects with increased anesthetic risks.
- Catheterization and procedural risks in the catheterization laboratory.
- Volume management in patients undergoing catheterization procedures.
- Level of cardiology and anesthesia expertise appropriate for the PCCCL.

An expert panel from all three participating societies collaborated with the goal to provide practitioners and institutions performing these procedures with guidance consistent with national standards developed by The Joint Commission and to provide clinicians and institutions with consensus-based recommendations and the supporting references to encourage their application in quality improvement programs.

Provided by Society for Cardiovascular Angiography and Interventions



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