



TYPE A

Deep Sedation and/or General Anesthesia Checklist of Sedation/Anesthetic Equipment and Emergency Drugs

It is the facility permit holder’s responsibility to ensure that all required emergency and other equipment is available and emergency drugs are on-site and current whenever sedation and/or general anesthesia is being administered in the facility.

SEDATION/ANESTHESIA TEAM

Please provide the following documentation for each **facility-based** SEDATION/ANESTHESIA provider AND team member.

SEDATION/ANESTHESIA PROVIDER

Current CPR [HCP or equivalent, ACLS or PALS]

SEDATION/ANESTHESIA TEAM MEMBER

Current CPR [HCP or equivalent, ACLS or PALS]

Current registration with their regulatory body – CNO or CRTO

SEDATION/ANESTHESIA DOCUMENT

Please provide the following documentation for **EACH** sedation/anesthesia provider in the facility.

Medical History

Out-of-facility Instructions for sedatives/anxiolytics [if applicable]

Pre-Sedation Instructions

Post-Sedation Instructions

Drug Register

Facility Emergency Protocols

5 sedation/anesthesia records (this applies to re-inspections only)

EQUIPMENT

EQUIPMENT MAINTENANCE RECORDS

Please provide the written record of the annual maintenance/ servicing or invoices (if purchased within the past year), on any automated monitors or equipment used on the patient. For RE-INSPECTIONS, please provide those records for the previous 3 years.

Monitor(s)

Nitrous oxide oxygen delivery system

Defibrillator/AED

Vaporizer(s) [if applicable]

Anesthetic machine(s) [if applicable]

EQUIPMENT

Size of the equipment is required to reflect the population treated

Portable apparatus for intermittent positive pressure resuscitation of appropriate sizes [Adult Pediatric]

Full face masks of appropriate sizes [Sm, Med, Lrg] and connectors for the administration of positive pressure.

Monitor(s)

Stethoscope

Sphygmomanometers of appropriate sizes [Sm, Med, Lrg]

Portable auxiliary system for light

Portable auxiliary system for battery-powered suction

Tonsil suction (Yankauer) adaptable to the suction outlet

Endotracheal tubes of appropriate sizes [4 5 6 7 8 9] and appropriate connectors

(continued)

Laryngeal mask airways of appropriate sizes [2 2.5 3 4 5] and appropriate connectors	<input type="checkbox"/>
Laryngoscope with an adequate selection of blades [1 2 3 4]	<input type="checkbox"/>
Laryngoscope spare batteries	<input type="checkbox"/>
Laryngoscope spare bulbs	<input type="checkbox"/>
Magill forceps of appropriate sizes [Adult Pediatric]	<input type="checkbox"/>
Adequate selection of oral airways [6 7 8 9 10 11]	<input type="checkbox"/>
Apparatus for emergency tracheotomy or cricothyroid membrane puncture of appropriate sizes [Adult Pediatric]	<input type="checkbox"/>
IV Needles	<input type="checkbox"/>
Electrocardioscope	<input type="checkbox"/>
Defibrillator/AED	<input type="checkbox"/>
Defibrillator/AED pads of appropriate sizes [Adult Pediatric]	<input type="checkbox"/>
Anesthetic machine [if applicable]	<input type="checkbox"/>
If cases are intubated, the machine/monitor requires:	
Capnometer/capnograph	<input type="checkbox"/>
If an inhalation agent is used, the machine/monitor requires:	
Oxygen analyzer	<input type="checkbox"/>
Anesthetic agent analyzer	<input type="checkbox"/>

DRUGS

Portable E size cylinder of oxygen dedicated to emergencies	<input type="checkbox"/>
Acetylsalicylic Acid (non-enteric coated)	<input type="checkbox"/>
Epinephrine	<input type="checkbox"/>
Flumazenil	<input type="checkbox"/>
Intravenous fluids	<input type="checkbox"/>
Naloxone	<input type="checkbox"/>
Nitroglycerin	<input type="checkbox"/>
Parenteral Amiodarone	<input type="checkbox"/>
Parenteral Atropine	<input type="checkbox"/>
Parenteral Beta-blocker [i.e. Esmolol, Metoprolol, Propranolol]	<input type="checkbox"/>
Parenteral Corticosteroid	<input type="checkbox"/>
Parenteral Diphenhydramine	<input type="checkbox"/>
Parenteral Vasopressor [i.e. Ephedrine]	<input type="checkbox"/>
Salbutamol	<input type="checkbox"/>
Succinylcholine	<input type="checkbox"/>
Dantrolene [If triggering agents used: number of vials to be consistent with MHAUS Guidelines]	<input type="checkbox"/>