

NIH Clinical Center Patient Education Materials

Conscious (moderate) sedation for an adult

What is conscious (moderate) sedation?

Conscious (moderate) sedation is an alternative to general anesthesia that prevents pain and avoids significant side effects/risks. Under conscious sedation, you will stay awake and aware, the doctor can speak with you, and you will be able to respond. Conscious sedation will make you drowsy, but you will recover quickly and will be able to resume normal daily activities after a short period of time.

It is important to let your doctor know if you have any allergies, especially to Fentanyl, Versed, or Ativan before receiving conscious sedation.

How will I receive the sedation medications?

You may receive medications into your vein (intravenously through an I.V.), by injection into a muscle (intramuscularly), or by mouth (orally). The effects of intravenous medication may be felt immediately. The effects of intramuscular medication may be felt within 5 to 30 minutes. Oral medications may take 30 to 60 minutes to take effect.

What are the side effect of conscious sedation?

Sedation may slow your breathing, so your nurse may need to give you oxygen. Your nurse might give you oxygen.

Your blood pressure may be affected by the sedation. Your doctor will decide if you need intravenous fluids to get your blood pressure back to normal. Sedation may cause you to have a headache, feel sleepy, or feel nauseated for several hours after the procedure. You may have a brief period of amnesia (not remembering what has happened) after receiving conscious sedation.

How do I prepare for sedation?

1 to 2 weeks before your procedure

- Tell your doctor if you use:
 - Anti-inflammatory medications (like Indomethacin, Daypro, Aleve, Ibuprofen, aspirin, or even Pepto Bismol). These medications may interact with the sedation medications. Your doctor will tell you if you need to temporarily stop taking these medications for a few days before your procedure.
 - Narcotics, anti-anxiety or anti-depressant medications, or alcohol on a regular basis. Your doctor may want to discuss sedation alternatives if you are being treated for anxiety, mental illness, narcotic abuse, or use alcohol regularly.
- Your doctor will instruct you on how to take your other medications.

1 to 2 days before your procedure

- If you smoke, your doctor may ask you to stop the night before your procedure and not restart until the day after.
- Your doctor will give you specific instructions on what you may or may not eat prior to the procedure.
- Do not drink alcohol the night before and day of the procedure. Alcohol can interact with sedation and pain medications.

The morning of your procedure

- Your doctor will explain the benefits, risks, and recovery expectations of your procedure. You will have time to ask questions. If you agree to the procedure, you will be asked to sign a consent form.
- If you are an outpatient, you must have a responsible adult to take you home or back to your hotel. This person must be available when you are discharged after the procedure. If you do not have a responsible adult to accompany you after your procedure, then you will need to spend the night on an inpatient unit for observation.
- Your doctor will ask about your medical, surgical, anesthetic, and family history and will perform a physical examination. He or she will also ask for a list of your current medications and allergies. A nurse will take your vital signs (including blood pressure and heart rate).
- Your nurse will put an intravenous catheter (I.V.) in your arm. This is a small plastic catheter placed into your vein to administer fluids and medications during the procedure.
- Your nurse may draw your blood, ask you for a urine sample, or ask you to change into a hospital gown before the procedure.

What happens during the procedure?

- Your nurse and doctor will stay with you at all times to check your level of sedation, and your nurse will check your vital signs every 3 to 5 minutes.
- A machine will check your oxygen level (oxygen saturation) continuously with a device that clips onto one of your fingers.
- You will feel very relaxed and may even begin to fall sleep. But, you will still be able to talk with your doctor and nurse.

What happens immediately after the procedure?

- A nurse will watch you closely (including checking your vital signs and monitoring your oxygen level) until you recover from the sedation.
- A nurse will continue to closely monitor your blood pressure and breathing for 1 hour or until your vital signs return to what they were before the procedure.
- If you are an inpatient, you will be taken back to your room when your vital signs are back to normal.

Outpatients:

You will need to stay in the NIH Clinical Center for at least 1 to 2 hours after your procedure. In order to be discharged:

- You must be awake, alert, and know where you are.
- You must not be bleeding or vomiting.
- Your blood pressure, pulse, breathing, and oxygen saturation must be close to normal.
- You must be able to drink fluids.
- You must be able to urinate.

A nurse will remove your I.V. after you can drink and urinate, and your doctor will write an order with instructions for you to be discharged.

Should I do anything special after conscious sedation?

- A responsible adult must take you home or to your hotel. This person must be available when you are ready for discharge.
- Do not take a bus, taxicab, or Metro without a responsible adult to ride with you.
- Do not drive, drink alcohol, use machinery, make important decisions, or sign legal documents for 24

hours after receiving conscious sedation.

This information is prepared specifically for persons taking part in clinical research at the National Institutes of Health Clinical Center and may not apply to patients elsewhere. If you have questions about the information presented here, talk to a member of your health care team.

Products/resources named serve as examples and do not imply endorsement by NIH. The fact that a certain product/resource is not named does not imply that such product/resource is unsatisfactory.

National Institutes of Health Clinical Center

Bethesda, MD 20892

07/2016

[Questions about the Clinical Center?](#)

