A. Procedural Sedation may be indicated for the following:
   1. Transcutaneous pacing
   2. Synchronized Cardioversion
   3. Adjunct for intubation in the conscious patient

B. Monitor patient’s airway

C. Administer oxygen as is appropriate for the patient’s condition

D. Establish IV normal saline and run at TKO

E. Administer medication to achieve dissociation. See below for available medications and dosing:

   **Midazolam (Versed):**

   **Adult Dose:** 2.5 mg IVP or Intranasally (IN). Do **NOT** give if SBP < 100 mmHg. May repeat dose once in 5 minutes as needed.

   **Pediatric Dose:** 0.1 mg/kg slow IVP or IN (maximum dose 2.5 mg)

   **OR**

   **Ketamine**

   **Adult & Pediatric Dose:** Administer 1 mg/kg Ketamine IVP. May repeat dose once if dissociative effect not achieved.

   **Geriatric dose:** Administer 0.5 mg/kg slow IVP. May repeat dose once if dissociative effect not achieved.

F. Contact Medical Control for additional doses if needed

G. Refer to Pain Management Protocol as indicated.

**Monitoring for patients during sedation:**

H. Place patient on a cardiac monitor

I. Monitor vital signs closely. If patient becomes hypotensive, administer 250 - 500 ml normal saline IV bolus for adults and 20 ml/kg for pediatric patients

J. Closely monitor patient’s respiratory effort and effectiveness
   1. If the patient’s respiratory effort or effectiveness decreases significantly, or if the patient becomes apneic, immediately begin ventilatory assistance
   2. Consider intubating the patient if respiratory depression continues with ventilation assistance

K. Monitor patient’s oxygen saturation via pulse oximetry

L. Monitor end-tidal CO₂