

March 5, 2008

Ms. JoAnn Sund, RN, MS
President
North Dakota Board of Nursing
919 South 7th Street, Suite 504
Bismarck, ND 58504

Dear Ms. Sund:

The American College of Emergency Physicians (ACEP) is a national medical specialty society representing emergency medicine with more than 25,000 members. ACEP is committed to advancing emergency care through continuing education, research, and public education.

Members of the American College of Emergency Physicians in North Dakota have expressed concern about discussions by the State Board of Nursing regarding registered nurses administering conscious sedation although they have been trained and credentialed by the hospital to provide this care.

The American College of Emergency Physicians and the Emergency Nurses Association developed a joint policy statement "Delivery of Agents for Procedural Sedation and Analgesia by Emergency Nurses" that supports "...the delivery of medications used for procedural sedation and analgesia by credentialed emergency nurses working under the direct supervision of an emergency physician. These agents include but are not limited to etomidate, propofol, ketamine, fentanyl, and midazolam."

Patients come to the ED with a variety of complaints that require administration of analgesia and sedation to perform time-sensitive procedures to diagnose and treat their conditions as well as alleviate pain. In order to provide timely care to patients in the ED it is important that appropriately trained emergency nurses under the direct supervision of the emergency physician be able to continue to administer medication for moderate sedation and analgesia. ACEP believes that emergency nurses can provide this care that they have been trained to provide and that any restrictions on their ability to provide this care to advance the goal of relieving pain and suffering of emergency department patients who need procedural sedation and analgesia would be counterproductive.

Procedural sedation and analgesia at both moderate and deep levels has been shown to be safe and effective when properly administered by emergency physicians. There is a growing body of evidence supporting the safe use of a large variety of agents for procedural sedation and analgesia in the ED. Descriptions of this evidence are reflected in two ACEP clinical policies regarding procedural sedation (attached).

The Joint Commission on Accreditation of Healthcare Organizations does not specify who can deliver sedation nor that only certain drugs be used. The Joint Commission does seek assurance that the health care professional administering sedation is appropriately trained and can provide appropriate airway management in the event of an unanticipated patient reaction to the sedation. Emergency physicians are appropriately trained to administer sedation and provide airway management. Thus emergency physicians and credentialed emergency nurses under their supervision are qualified to provide procedural sedation/analgesia in the emergency department.

ACEP appreciates the opportunity to communicate with you on this important issue that affects timely, quality care in the ED.