



Sedation (adults)

You have been advised by your GP or hospital doctor to have a procedure with sedation. This leaflet provides you with information about sedation and aftercare advice. Before the procedure, a nurse may contact you on the phone to ask you about your medical history.

What is conscious sedation?

Conscious sedation is when you are given strong medications to help you tolerate procedures by making you feel more relaxed and sleepy. This can be used in the Emergency Department (A&E) for procedures such as straightening a broken wrist. It may also be used in other situations, such as an endoscopy or a short procedure in an operating theatre, e.g. caudal, radiology or cardiology.

These drugs may be given as a liquid, as a gas that you breathe, or as a medication through a cannula (drip) placed in a vein. They are used to keep you calm and comfortable during minor, painful or unpleasant procedures.

Before sedation

If this is a planned procedure you:

- Should not eat for 6 hours before your procedure, so that you have an empty stomach.
If your appointment is in the morning do not eat from 2am
If you appointment is in the afternoon do not eat from 7:30 am
- Can drink clear fluids up till the procedure. Please ensure you have a drink (clear fluids) before you leave to come into hospital.
- Clear fluids include black tea and coffee, water, dilute squash.
- Bring a list of any medication that you take regularly.
- Most routine medications can be continued as usual
- However, **please let the doctor/nurse know** if you take any of the following:
 - **Blood thinning medication**, e.g. Clopidogrel, Dabigatran, Apixiban, Warfarin. Rivaroxoban. Edoxaban, Prasugrel and Ticagrelor. If your procedure is a planned one and not an emergency, the doctor/nurse may change/stop these medications before your procedure.
 - **Diabetic medication**. Diabetic medications need to be stopped or modified in advance of surgery in some cases. Make sure you follow any advice given by the pre-operative assessment nurses.
 - **Strong pain medication**. Tell the doctor or nurse if you take strong opiate / morphine type medication, e.g. Oramorph, oxycodone, MST.

If you have not received advice / instructions on how to manage these medications before your procedure, please call the relevant department well before the admission date:

- Theatre procedures, call the Pre-operative Assessment Unit on 0118 322 6546
- Radiology procedures, call 0118 322 8368
- Gastroenterology procedures, call 0118 322 5249
- Maxillofacial or dental procedures, call 0118 322 7139

Frequently asked questions

How is sedation given?

Sedation is most often given by inserting a cannula ('drip') into a vein so a sedative drug and or painkiller can be given. Sometimes, an infusion of a sedative drug can be given for longer procedure, usually by an anaesthetist. While you have sedative medication, you will have your breathing, heart rate and blood pressure monitored.

What if I feel pain during the procedure?

There will be a doctor or nurse who will be monitoring you and can give you more sedative or pain medication should you need it. Rarely, we need to give people a general anaesthetic if they cannot tolerate the procedure under sedation. If this is the case, we may need to bring you back another day.

What are the benefits of sedation?

Sedation makes you more relaxed and able to tolerate procedures that might otherwise be too uncomfortable.

Will I be aware of what is going on around me? Will I remember?

Sedation is not a general anaesthetic, you may be aware of things that are going on around you and a nurse or doctor will be with you at all times. Some people cannot remember the procedure but this is variable and can depend on the type of sedation that you receive.

What are the risks of sedation?

The risks are low. Sometimes you can have too much sedation and get too sleepy; however, there are drugs that can be given to reverse your sedation. Your nurse or doctor will be with you at all times to monitor and talk to you. Very occasionally, some patients may not be suitable for sedation and the procedure may be performed under local anaesthetic if possible, or re-scheduled.

When can I go home?

Once the sedation has worn off and you are less sleepy you will be able to go home, usually within 1-2 hours. You are not allowed home alone in a taxi. If you do not have someone to collect or stay with you after the procedure, your procedure may get cancelled.

Who can I contact if I want further information?

If is a planned procedure, please use the contact number on your booking letter for further information. After your procedure you will be given clear contact details so that you know who to contact if you are worried or concerned.

Advice following sedation

Once it is safe for you to be discharged home, you may still feel a little confused, sleepy, dizzy or clumsy. This is not unusual, but may take some time to go away, so please follow this advice:

- Ideally, stay with friends or family for the next 24 hours. Some patients / procedures are suitable to be at home alone; please discuss with your admitting team or pre-operative assessment beforehand whether your procedure is appropriate
- Avoid alcoholic drinks for 24 hours.
- Do not make any important decisions, such as signing contracts, commitments or major purchases for the next 24 hours.
- Do not undertake activities that require you to be alert or co-ordinated for the next 24 hours – including driving, operating heavy machinery or power tools, cooking, climbing or riding a bicycle.
- Please ensure that you have a supply of over-the-counter painkillers at home. You may also be supplied with prescribed painkillers.
- If you feel sick or vomit, stick to fluids until you can tolerate solid food. If this persists, contact your GP or return to the Emergency Department (A&E).
- If a follow-up appointment is needed, e.g. clinic, then this will be made before you leave and you will be given written confirmation of this.

Tell us your views

If you wish to discuss any aspect of your treatment and care, please speak to a senior member of staff or to the nurse looking after you. The matrons are also available during normal working hours and they welcome your views. You can also pick up a copy of the Trust leaflet called 'Patient Advice and Liaison Service (PALS)', which explains how you can raise concerns or give feedback on your experience at the hospital.

Friends and Family Test

Whatever your experience you can give feedback by answering the Friends & Family test question – Overall, how was your experience of our service? – by filling in the form given to you in the clinic or unit, by answering the FFT text link sent to your phone or by going online <https://www.royalberkshire.nhs.uk/patients-and-visitors/patient-experienceoyalberkshire.nhs.uk/get-in-touch/friends-and-family-survey.htm>.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Anaesthetics, November 2024. Next review due: November 2026.