

South Carolina Anesthesia On-Site Inspection and Evaluation Form
South Carolina Society of Oral and Maxillofacial Surgeons

Date of Evaluation _____ Time _____

Name of Practitioner(s) Evaluated

Location Inspected

Telephone Number of Location Inspected

Names of Evaluator(s)

A. PERSONNEL

1. ACLS Certificate (Please have doctor's ACLS Certification available)
2. PALS Certificate (if appropriate)
3. Evidence of: 1 year advanced training in anesthesiology, Fellow of the American Dental Society of Anesthesiology, Diplomate of the National Dental Board of Anesthesiology, Diplomate of the American Board of Oral and Maxillofacial Surgery, eligible for examination by American Board of Oral and Maxillofacial Surgery, or Fellow of the American Association of Oral and Maxillofacial Surgeons
4. List of assisting staff's credentials/CPR certification: (attach list if more space needed)

B. RECORDS

Have available three charts of patients who have been treated in your office with intravenous sedation or general anesthesia.

1. An adequate medical history of the patient and signed anesthesia/operative consent.
2. An adequate physical evaluation of the patient.
3. Anesthesia records showing: continuous monitoring of heart rate, blood pressure, and respiration using electrocardiographic monitoring and pulse oximetry.
4. Recording of monitoring/vital signs every 5 minutes.
5. Evidence of continuous recovery monitoring, with notation of patient's condition upon discharge and person to whom the patient was discharged.
6. Accurate recording of medications administered, including amounts and time administered.
7. Records illustrating length of procedure.

8. Records reflecting any complications of anesthesia.

C. OFFICE FACILITY AND EQUIPMENT

(indicate acceptable equipment and drugs with a check mark)

1. Noninvasive Blood Pressure Monitor
2. Electrocardiograph
3. Defibrillator/Automated External Defibrillator
4. Pulse Oximeter
5. Capnography monitor
6. Operating Theater
 - a. Is the operating theater large enough to accommodate the patient on a table or in an operating chair adequately?
 - b. Does the operating theater permit an operating team consisting of at least three individuals to move freely about the patient?
7. Operating Chair or Table
 - a. Does the operating chair or table permit the patient to be positioned so the operating team can maintain the airway?
 - b. Does the operating chair or table permit the team to alter the patient's position quickly in an emergency?
 - c. Does the operating chair or table provide a firm platform for the management of cardiopulmonary resuscitation?
8. Lighting System
 - a. Does the lighting system permit evaluation of the patient's skin and mucosal color?
 - b. Is there a battery-powered backup lighting system?
 - c. Is the backup lighting system of sufficient intensity to permit completion of any operation underway at the time of general power failure?
9. Suction Equipment
 - a. Does the suction equipment permit aspiration of the oral and pharyngeal cavities?
 - b. Is there a backup suction device available?
10. Oxygen Delivery System
 - a. Does the oxygen delivery system have adequate full-face masks and appropriate connectors, and is it capable of delivering oxygen to the patient under positive pressure?
 - b. Is there an adequate backup oxygen delivery system?
11. Recovery Area (recovery area can be the operating theater)
 - a. Does the recovery area have available oxygen?
 - b. Does the recovery area have available adequate suction?
 - c. Does the recovery area have adequate lighting?
 - d. Does the recovery area have adequate electrical outlets?
 - e. Can the patient be observed by a member of the staff at all times during the recovery period?
12. Ancillary Equipment
 - a. Is there a working laryngoscope complete with an adequate selection of blades, spare batteries, and bulbs?
 - b. Are there endotracheal tubes with appropriate connectors and Magill forceps?
 - c. Are there oral airways/nasal airways?

- d. Are there any laryngeal mask airways?
- e. Is there a tonsillar or pharyngeal type suction tip adaptable to all office outlets?
- f. Is there a capnograph or CO2 sensor to confirm endotracheal intubation?
- g. Is there a sphygmomanometer and stethoscope?
- h. Are there adequate supplies and fluids for a continuous intravenous infusion?
- i. Is there a tracheotomy or cricothyrotomy set with connectors?
- j. Is there a Molt mouth prop and curved Kelly hemostat or Russian forceps?
- k. Is there a thermometer (oral, tympanic or similar)?

D. DRUGS

- 1. Vasopressor drug available?
- 2. Corticosteroid drug available?
- 3. Bronchodilator drug available?
- 4. Muscle relaxant drug available?
- 5. Intravenous medication for treatment of cardiopulmonary arrest available?
- 6. Narcotic antagonist drug available?
- 7. Benzodiazepine antagonist drug available?
- 8. Antihistamine drug available?
- 9. Antiarrhythmic drug available?
- 10. Anticholinergic drug available?
- 11. Coronary artery vasodilator drug available?
- 12. Antihypertensive drug available?
- 13. Mechanism of response for malignant hyperthermia (dantrolene)?
- 14. Dextrose 50% intravenous solution?
- 15. Safety indexed gas system, "fail-safe" connections?

OVERALL EQUIPMENT – FACILITY _____ ADEQUATE _____ INADEQUATE

COMMENTS

RECOMMENDATIONS

Signature(s) of Evaluators

Printed Name(s) of Evaluators

Date form sent to Society _____

Suggested Emergency Equipment and Drugs

SUGGESTED EQUIPMENT

- A. Source of oxygen and equipment to deliver positive -pressure ventilation
- B. Respiratory support equipment
 - Oral airways/nasal airways
 - Endotracheal tubes with stylets (provision for children's airway management)
 - Laryngoscope and suitable blades (plus extra bulbs and batteries)
 - Magill Forceps or other Suitable instruments
 - Cricothyrotomy set with connector
 - Laryngeal mask airway
- C. Stethoscope or precordial stethoscope

- D. Blood pressure cuff or automatic blood pressure monitor
- E. Electrocardiograph/defibrillator/AED
- F. Pulse oximeter
- G. End tidal carbon dioxide monitor (required if intubated anesthesia is used)
- H. Equipment to establish intravenous infusion
 - Angiocaths, needles, syringes, intravenous sets and connectors
 - Tourniquets for venipuncture
 - Tape

SUGGESTED DRUGS

The following are examples of drugs that will be helpful in the treatment of anesthetic emergencies. The list should not be considered mandatory or all-inclusive.

- A. Intravenous fluids
 - Sterile water for injection and/or mixing or dilution of drugs
 - Appropriate intravenous fluids
- B. Cardiotonic Drugs
 - Oxygen
 - Epinephrine 1mg (10ml of a 1:10,000 solution)
 - Atropine 0.4 mg/ml
 - Nitroglycerin (0.4 mg: 1/150 grain)
- C. Vasopressors
 - Dopamine 200 mg/5 ml
 - Epinephrine 1:1,000 or 1:10,000 (1 mg = 1:1,000)
 - Dobutamine 1,2 or 4 mg/ml
 - Ephedrine 50 mg/ml
 - Phenylephrine (Neo-Synephrine) 10 mg/ml
- D. Antiarrhythmic Agents
 - Atromine Sulfate 0.4 mg/ml
 - Lidocaine 2% (Xylocaine) 20 mg/ml
 - Propranolol (Inderal) 1 mg/ml
 - Procainamide (Procanbid) 100 mg/ml
 - Verapamil (Calan) 5 mg/2 ml

- E. Antihypertensive Agents (Immediate)
 - Diazoxide (Hyperstat) 15 mg/ml
 - Hydralazine (Apresoline) 20 mg/ml
 - Esmolol (Brevibloc) 10 mg/ml
 - Labetalos (Trandate) 5 mg/ml (20 ml single-dose vial)
- F. Diuretics
 - Furosemide (Lasix) 10 mg/ml
- G. Antiemetics
 - Prochlorperazine (Compazine) 5 mg/ml
 - Ondanestron (Zofran) 2 mg/ml
- H. Reversing Agents
 - Naloxone (Narcan) 0.4mg/ml
 - Flumazenil (Romazicon) 0.1 mg/ml
- I. Additional Drugs
 - Dextrose 50%
 - Hydrocortisone sodium succinate or methylprednisolone sodium succinate (Solu-Medrol) 125 mg
 - Dexamethasone (Decadron) 4 mg/ml
 - Glycopyrrolate (Robinul) 0.2 mg/ml
 - Diazepam (Valium) 5 mg/ml
 - Diphenhydramine (Benadryl) 50 mg/ml
 - Albuterol (Ventolin) inhaler
 - Midazolam (Versed) 5 mg/ml
 - Succinylcholine (Anectine) 20 mg/ml