

November 4, 2017

RE: New York Office-Based Surgery and Capnography Monitoring

The New York State Department of Health, Office of Quality and Patient Safety has adopted a new standard of care for monitoring adequate ventilation of patients receiving moderate sedation, deep sedation, and general anesthesia in an office-based surgery setting. In order to maintain accreditation, office-based surgery practices will be required to provide continual monitoring of end tidal CO₂ using capnography for moderate sedation, deep sedation, and general anesthesia.

Compliance with this standard will be effective by January 31, 2018. Accrediting Organizations (including AAAHC) will begin surveying all OBS facilities using moderate sedation, deep sedation, and general anesthesia for compliance with this standard at this time. During moderate or deep sedation and general anesthesia, the adequacy of ventilation shall be evaluated by continual observation of qualitative clinical signs and monitoring for the presence of exhaled carbon dioxide using capnography, unless precluded or invalidated by the nature of the patient, procedure, or equipment. When capnography is utilized, the end tidal CO₂ alarm should be audible to the clinical staff responsible for monitoring the patient. Capnography will be documented at frequent intervals in the physiologic monitoring record.

Please direct all questions regarding this issue to Cheryl Pistone at 847 324 7485 or cpistone@aaahc.org.