

Article 7. Office-Based Surgery Using

Sedation R4-16-701. Health Care Institution License

A physician who uses general anesthesia in the physician's office or other outpatient setting that is not part of a licensed hospital or licensed ambulatory surgical center when performing office-based surgery using sedation shall obtain a health care institution license as required by the Arizona Department of Health Services under A.R.S. Title 36, Chapter 4 and 9 A.A.C. 10.

Historical Note

New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1). Current through rules published in Arizona Administrative Register Volume 22, Issue 22, May 27, 2016.

R4-16-702. Administrative Provisions

- A.** A physician who performs office-based surgery using sedation in the physician's office or other outpatient setting that is not part of a licensed hospital or licensed ambulatory surgical center shall:
1. Establish, document, and implement written policies and procedures that cover:
 - a. Patient's rights,
 - b. Informed consent,
 - c. Care of patients in an emergency, and
 - d. The transfer of patients;
 2. Ensure that a staff member who assists with or a healthcare professional who participates in office-based surgery using sedation:
 - a. Has sufficient education, training, and experience to perform duties assigned;
 - b. If applicable, has a current license or certification to perform duties assigned; and
 - c. Performs only those acts that are within the scope of practice established in the staff member's or health care professional's governing statutes;
 3. Ensure that the office where the office-based surgery using sedation is performed has all equipment necessary:
 - a. For the physician to safely perform the office-based surgery using sedation,
 - b. For the physician or health care professional to safely administer the sedation,
 - c. For the physician or health care professional to monitor the use of sedation, and
 - d. For the physician and health care professional administering the sedation to rescue a patient after the sedation is administered to the patient and the patient enters into a deeper state of sedation than what was intended by the physician.
 4. Ensure that a copy of the patient's rights policy is provided to each patient before performing office-based surgery using sedation;
 5. Obtain informed consent from the patient before performing an office-based surgery using sedation that:
 - a. Authorizes the office-based surgery, and
 - b. Authorizes the office-based surgery to be performed in the physician's office; and

6. Review all policies and procedures every 12 months and update as needed.
- B.** A physician who performs office-based surgery using sedation shall comply with:
1. The local jurisdiction's fire code;
 2. The local jurisdiction's building codes for construction and occupancy;
 3. The biohazardous waste and hazardous waste standards in 18 A.A.C. 13, Article 14; and
 4. The controlled drug administration, supply, and storage standards in 4 A.A.C. 23.

Historical Note

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2016.*

R4-16-703. Procedure and Patient Selection

- A. A physician shall ensure that each office-based surgery using sedation performed:
 - 1. Can be safely performed with the equipment, staff members, and health care professionals at the physician's office;
 - 2. Is of duration and degree of complexity that allows a patient to be discharged from the physician's office within 24 hours;
 - 3. Is within the education, training, experience skills, and licensure of the physician; and
 - 4. Is within the education, training, experience, skills, and licensure of the staff members and health care professionals at the physician's office.

- B. A physician shall not perform office-based surgery using sedation if the patient:
 - 1. Has a medical condition or other condition that indicates the procedure should not be performed in the physician's office, or
 - 2. Will require inpatient services at a hospital.

Historical Note

*New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1).
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R4-16-704. Sedation Monitoring Standards

A physician who performs office-based surgery using sedation shall ensure from the time sedation is administered until post-sedation monitoring begins:

1. A quantitative method of assessing a patient's oxygenation, such as pulse oximetry, is used when minimal sedation is administered to the patient, and
2. When moderate or deep sedation is administered to a patient:
 - a. A quantitative method of assessing the patient's oxygenation, such as pulse oximetry, is used;
 - b. The patient's ventilatory function is monitored by any of the following:
 - i. Direct observation,
 - ii. Auscultation, or
 - iii. Capnography;
 - c. The patient's circulatory function is monitored during the surgery by:
 - i. Having a continuously displayed electrocardiogram,
 - ii. Documenting arterial blood pressure and heart rate at least every five minutes, and
 - iii. Evaluating the patient's cardiovascular function by pulse plethysmography,
 - d. The patient's temperature is monitored if the physician expects the patient's temperature to fluctuate; and
 - e. That a licensed and qualified healthcare professional, other than the physician performing the office-based surgery, whose sole responsibility is attending to the patient, is present throughout the office-based surgery.

Historical Note

*New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1).
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R4-16-705. Perioperative Period; Patient Discharge

A physician performing office-based surgery using sedation shall ensure all of the following:

1. During office-based surgery using sedation, the physician is physically present in the room where office-based surgery is performed;
2. After the office-based surgery using sedation is performed, a physician is at the physician's office and sufficiently free of other duties to respond to an emergency until the patient's post-sedation monitoring is discontinued;
3. If using minimal sedation, the physician or a health care professional certified in ACLS, PALS, or BLS is at the physician's office and sufficiently free of other duties to respond to an emergency until the patient is discharged;
4. If using deep or moderate sedation, the physician or a health care professional certified in ACLS or PALS is at the physician's office and sufficiently free of other duties to respond to an emergency until the patient is discharged;
5. A discharge is documented in the patient's medical record including:
 - a. The time and date of the patient's discharge, and
 - b. A description of the patient's medical condition at the time of discharge; and
6. A patient receives discharge instructions and documents in the patient's medical record that the patient received the discharge instructions.

Historical Note

New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1). Current through rules published in Arizona Administrative Register Volume 22, Issue 22, May 27, 2016.

R4-16-706. Emergency Drugs; Equipment and Space Used for Office-Based Surgery Using Sedation

- A. In addition to the requirements in R4-16-702(A)(3) and R4-16-703(A)(1), a physician who performs office-based surgery using sedation shall ensure that the physician's office has at a minimum:
1. The following:
 - a. A reliable oxygen source with a SaO2 monitor;
 - b. Suction;
 - c. Resuscitation equipment, including a defibrillator;
 - d. Emergency drugs; and
 - e. A cardiac monitor;
 2. The equipment for patient monitoring according to the standards in R4-16-704;
 3. Space large enough to:
 - a. Allow for access to the patient during office-based surgery using sedation, recovery, and any emergency;
 - b. Accommodate all equipment necessary to perform the office-based surgery using sedation; and
 - c. Accommodate all equipment necessary for sedation monitoring;
 4. A source of auxiliary electrical power available in the event of a power failure; and
 5. Equipment, emergency drugs, and resuscitative capabilities required under this Section for patients less than 18 years of age, if office-based surgery using sedation is performed on these patients; and
 6. Procedures to minimize the spread of infection.
- B. A physician who performs office-based surgery using sedation shall:
1. Ensure that all equipment used for office-based surgery using sedation is maintained, tested, and inspected according to manufacturer specifications, and
 2. Maintain documentation of manufacturer-recommended maintenance of all equipment used in office-based surgery using sedation.

Historical Note

*New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1).
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R4-16-707. Emergency and Transfer Provisions

- A. A physician who performs office-based surgery using sedation shall ensure that before a health care professional participates in or staff member assists with office-based surgery using sedation, the health care professional and staff member receive instruction in the following:
 - 1. Policy and procedure in cases of emergency,
 - 2. Policy and procedure for office evacuation, and
 - 3. Safe and timely patient transfer.
- B. When performing office-based surgery using sedation, a physician shall not use any drug or agent that trigger malignant hyperthermia.

Historical Note

New Section made by final rulemaking at 14 A.A.R. 380, effective January 8, 2008 (Supp. 08-1). Current through rules published in Arizona Administrative Register Volume 22, Issue 22, May 27, 2016.