

PROCEDURE

HACKETTSTOWN REGIONAL MEDICAL CENTER

ICU/PCU/PACU/MINOR PROCEDURES

(Scope)

TITLE: TRANSESOPHAGEAL ECHOCARDIOGRAM

PURPOSE: To outline the steps in assisting the Cardiologist with a Transesophageal Echocardiogram (TEE).

POLICY: HRMC provides equipment and human resources to assist in the performance of TEE.

DEFINITIONS: Transesophageal echocardiogram: Test performed which allows the cardiologist the view the internal structures of the heart and the heart's major vessels by inserting a probe (thin flexible tube with a special tip) down the throat.

SUPPORTIVE

- DATA:**
- 1) The TEE is performed by a cardiologist credentialed in the TEE procedure and moderate sedation.
 - 2) A physician's order is required.
 - 3) The TEE can be done in PACU, Minor Procedure, PCU or ICCU for patients already on their units. Scheduling should be done through those departments following their procedures. TEE is done only in PACU preceding a scheduled elective cardioversion. Cardiopulmonary should be notified of the request for procedure in order to arrange appropriate staffing and availability of equipment.

4 A cardiologist, ECHO tech, and **RN(qualified in Moderate sedation)** need to be present when the TEE is performed. A crash cart must be immediately available.

5.The scope for the TEE is stored in Minor Procedure Department. The Ultrasound equipment is stored in Cardio-Pulmonary.

6The patient should be NPO for 6 hours before the exam.

7.The TEE can last 30 minutes.

PROCEDURE: CARDIOLOGIST:

- 1) Inform patient about the procedure and risks and benefits and a signed consent from obtained for the procedure and conscious sedation.
- 2) Provide a brief H&P for patients in the outpatient setting. (The medical record will be with the inpatient and should contain the complete H&P.)
- 3) Perform a time out.
- 4) Perform the procedure.
- 5) The oropharynx is anesthetized by the physician.
- 6) The patient is placed in the left lateral position.
- 7) A bite block is placed in the patient's mouth by the physician.

ECHO Tech:

- 1) Greet the patient.
- 2) Prepare the equipment for the test.
- 3) Place appropriate TEE tape for the cardiologist.
- 4) Turn on the machine.
- 5) Plug in probe to the left probe slot.
- 6) Press "preset" and highlight TEE button.
- 7) Enter patient's name in the computer.

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- 8) Assist cardiologist as directed.
- 9) **After procedure, wipe down probe with enzyme cleaner and return to Minor Procedures in a RED bucket for cleaning.**

RN:

- 1) Review consent form for completeness; may witness patient/guardian's signature for procedural consent and moderate sedation consent.
- 2) Review physician's order for procedure.
- 3) Assess NPO status, baseline vital signs and assessment.
- 4) Initiate IV, or assess current IV site, and follow the Moderate Sedation Policy regarding monitoring and documentation before, during and after procedure.
- 5) Provide emotional support to patient.

EQUIPMENT LIST:

- | | |
|-----------------------------|---|
| 1) Lidocaine spray | 11) Emesis basin |
| 2) 10cc Syringe and Needles | 12) Bite Block |
| 3) 3cc Syringe | 13) Oxygen with Nasal Cannula |
| 4) 4 x 4 gauze | 14) Suction set up |
| 5) Alcohol Swabs | 15) Automatic Blood Pressure & O ₂ Sat Monitor |
| 6) Xylocaine Viscous | 16) Small Medicine Cups |
| 7) Surgilube | 17) Consent Forms |
| 8) Gloves | 18) Towels |
| 9) Surgical Tape | 19) Code Cart |
| 10) Tongue Depressor | 20) Reversal Agents |

FOLLOWING THE

- PROCEDURE:**
- 1) The patient will remain NPO for 1 – 2 hours (or as ordered by the physician) due to the numbing of the throat.
 - 2) For outpatients, the patient must meet established discharge criteria as delineated in the Moderate Sedation policy.
 - 3) For outpatients, discharge instructions will be provided by the physician and will be reinforced by the RN.

PERFORMANCE IMPROVEMENT:

- 1) The patient meets criteria for the procedure.
- 2) The NPO status is documented.
- 3) There is a signed consent form on the chart.
- 4) **The patient is monitored according to Moderate Sedation policy.**
- 5) Complications or unanticipated outcomes are monitored and reported.