

PRESS RELEASE

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The Anesthesia Patient Safety Foundation recommends use of a quantitative monitor whenever a neuromuscular blocking agent is administered.

News: Uppsala, on February 4, 2022. Senzime today announces that the APSF-Endorsed Statement on Revising Recommendations for Patient Monitoring During Anesthesia recommends quantitative monitoring

The statement is based upon expert consensus to set guidelines that support and enhance safety in clinical practices. It highlights the need to deliver the correct drug dosage when inducing unconsciousness and immobility during surgery, to avoid complications such as awareness, patient movement and residual neuromuscular blockade.

Postoperative residual muscle weakness is highlighted as a patient safety threat due to the drugs variability. If blocking agents have been given to the patient some residual neuromuscular block may be present at the end of the procedure, compromising patient safety (e.g., airway obstruction, aspiration).

The recommendation states that quantitative neuromuscular blockade monitoring has well documented advantages over subjective monitoring and is the preferred method. APSF recommended monitoring practice is that whenever a neuromuscular blocking agent is administered, a neuromuscular block monitor shall be applied and used. Quantitative is preferable to qualitative neuromuscular blockade monitoring.

Pia Renaudin, CEO of Senzime, says: *"This is great news! Our vision is a world without anesthesia complications and Patient safety organization statements can help increase healthcare providers awareness of the importance of using precise and repeatable monitors to prevent these important safety issues."*

About the journal

The APSF newsletter is the official journal of THE ANESTHESIA PATIENT SAFETY FOUNDATION

[Link to the journal](#)

Attachments

[The Anesthesia Patient Safety Foundation recommends use of a quantitative monitor whenever a neuromuscular blocking agent is administered.](#)