# Returning home after a sedation with or without analgesic







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You have been given a sedative with or without an analgesic (opioid). This medicine is used to reduce pain, to help you stay calm, or to put you to sleep during an examination or treatment. The nurse should explain the guidelines in this document to you and your companion.

## Information about the sedative used

Medicine, dose, method, and time received

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The sedative produces side effects.
The following information will help you take care of yourself for the first 12 to 24 hours.

#### Possible effects of sedation

You must be accompanied by a responsible person for the return home and the following 24 hours. (A taxi is NOT a responsible escort. You need to plan for your return home). In the next few hours, your walking may be less steady. You may feel weak, dizzy, or have trouble coordinating your movements and reacting to your surroundings. Support yourself by holding your companion's arm, and slow down your pace.

To avoid falls and accidents, focus on quiet activities, such as watching television or listening to music.



If you have any questions after you return home, feel free to call 8-1-1 (Info-Santé).

You might have trouble speaking clearly, and you could also hallucinate, although this is rare. If this happens and continues until the next day, call 8-1-1 (Info-Santé). If you can't reach them, go to a hospital emergency room to find out why this is happening.

While you are impaired by medication, you should not do any manual work or use dangerous tools. This is to ensure your safety and that of your family and friends. In addition, do not sign any important documents during this period.

### Do not drive

Someone who has just been sedated cannot drive a car for 24 hours. The risk of an accident is 2 to 5 times higher than in normal times. The medication has important effects: it reduces alertness, judgment, and concentration.

It also causes drowsiness (sleepiness) and creates a certain euphoria. That's why you should not go home alone, even by bus or on foot. Some people have reported that they didn't know where they were and where they were supposed to go, even before they got home. Someone else has to look after getting you home.

## Advice for your companion

If the person you're accompanying falls asleep on the way home from the hospital, you need to monitor the first 3 to 4 hours of their sleep.

After an hour or two, call the person by name or touch them to check their condition. If they open their eyes or answer you, everything is fine. If you have trouble waking them up, insist. Wake them up completely, then let them go back



to sleep. Check skin colour and breathing. An adult breathes 16 to 20 times per minute. At rest, the rate can drop to 10 or 14 breaths per minute. If the person is snoring very loudly, tell them to lie on their side.

Each person responds differently to sedation. Some have very little reaction, while others become drowsy easily.

The medication will wear off on its own within 12 to 24 hours.

## Avoid substances that cause drowsiness 24 hours before and after the intervention

Avoid alcohol, cannabis and some over-thecounter products, such as antihistamines. They increase drowsiness (desire to sleep) and the risk of falling.

If you take sleeping pills, it's best not to use them the first night after you return home.

If you are on pain medication, you can continue taking it as prescribed with no problem.

## When should I ask for help?

It's rare that anything serious would happen at home because of a sedative.

One serious situation would be respiratory depression. As a precaution, you should know how to recognize the danger signs for respiratory depression.

#### Danger signs

- > The person is breathing very slowly (8 breaths or less per minute).
- > You're not able to wake them up.
- > Their skin is bluish or grayish.

#### What to do

- > Call 9-1-1 immediately, don't wait.
- > Give they ambulance attendants this sheet to show them what medication was used.
- > Stimulate the person by talking loudly, removing any covers, or putting a coldwater compress on their neck.

Questions

The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.

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