


Name of Policy: Electroconvulsive Therapy (ECT)			
Policy Number: 3364-120-54-001			
Approving Officer: Chief Executive Officer Chief Nursing Officer Medical Director			
Responsible Agent: Chief Nursing Officer Medical Director			
Scope: The University of Toledo Medical Center			
Effective date: 4/2026			
Original effective date: June 1, 2016			
Key words: Electroconvulsive Therapy, Treatment, Monitoring, Patient Safety, Complications			
	<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/> X	<input type="checkbox"/> Minor/technical revision of existing policy
	<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/>	<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

To provide safe ECT treatment according to university guidelines.

(B) Purpose

To provide a consistent framework for the care and monitoring of patients receiving electroconvulsive therapy, preventing complications, and maximizing patient safety.

(C) Procedure

- (1) ECT will be performed by a licensed independent practitioner who is credentialed to administer this treatment.
- (2) When the procedure is performed in the hospital operative, perioperative or post anesthesia recovery unit (PACU), all departmental policies pertaining to assessment, monitoring and discharge of the patient will apply.
- (3) The patient will be evaluated prior to administration of ECT. The medical record will include:

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- The psychiatric history and examination containing indications for ECT. The history should include assessment of the efforts of any risk factors. This includes medical history, physical examination, (including neurological examination), vital signs, hematocrit and/or hemoglobin, electrolytes, ECG, and X-rays as appropriate.
- (4) Anesthesiologist evaluation: prior to the first treatment, will document the nature and extent of the anesthetic technique in the medical record. Subsequently, the anesthesiologist will document the presence of any changes to the initial anesthetic evaluation.
 - (5) Informed Consent is obtained by the licensed independent practitioner and includes:
 - (a) An explanation of the nature and purpose of the procedure.
 - (b) The approximate number of treatments considered necessary.
 - (c) The substantial and frequent risks and complications associated with the procedure.
 - (d) The alternative treatment available to the patient.
 - (e) The consequence of not having the procedure.
 - (f) The patient has a general understanding of all that was explained.
 - (g) The patient's signature on the consent form.
 - (6) Documentation for each ECT treatment includes:
 - (a) The diagnosis for which the ECT was given.
 - (b) Date of treatment.
 - (c) Duration and strength of electrical stimulation.
 - (d) Medications administered.
 - (e) Patient response.
 - (f) Complications or adverse effects.
 - (7) The patient is discharged from PACU by a qualified LIP or according to criteria approved by the medical staff.
 - (8) Between ECT treatments, documentation regarding the therapeutic outcome and adverse effects should be documented. Justification for continued use of the procedure should be addressed.
 - (9) For Senior Behavioral Health (SBH) patients: Once the patient returns to the SBH unit after treatment, the patient's vitals, orientation level, pain level, breath sounds, and neurological assessment will be monitored per post-ECT protocol.

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<p>Approved by:</p> <p><u>/s/</u> Daniel Barbee, MBA, BSN, RN, FACHE Chief Executive Officer</p> <p><u>4/6/2026</u> Date</p> <p><u>/s/</u> Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer</p> <p><u>4/3/2026</u> Date</p> <p><u>/s/</u> Dionis Kononov, MD Medical Director</p> <p><u>4/2/2026</u> Date</p> <p><i>Review and Revision Completed By: Inpatient Behavioral Health Administration</i></p>	<p>Policies superseded by this policy</p> <ul style="list-style-type: none">• <i>None</i> <p>Initial effective date: June 1, 2016</p> <p>Review/Revision Date: <i>September 1, 2016</i> <i>September 1, 2019</i> <i>April 1, 2023</i> <i>April 2026</i></p> <p>Next review date: 4/2029</p>
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