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**Policy and Procedure for the Management of Stridor  
Referencing Phil Wolfsson's Work in Ketamine Assisted Psychotherapy (KAP)**

- Purpose** The purpose of this policy and procedure is to provide guidelines for the safe and effective management of stridor (adverse respiratory events) in the context of Ketamine Assisted Psychotherapy (KAP), with reference to Phil Wolfsson's work and best practices in the field.
- Scope** This policy applies to all healthcare professionals, therapists, and support staff involved in the administration and supervision of KAP sessions where ketamine is utilised as an adjunct to psychotherapy.
- Background** Phil Wolfsson's work has contributed significantly to the understanding and practice of Ketamine Assisted Psychotherapy. His research and insights regarding the management of stridor in KAP sessions are invaluable for ensuring patient safety and optimising treatment outcomes.

**Definitions**

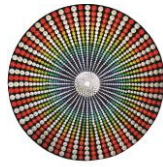
- Stridor** Refers to adverse respiratory events, including airway obstruction, respiratory distress, or other breathing difficulties.

**Ketamine Assisted Psychotherapy (KAP)**

A therapeutic approach that combines the administration of ketamine with psychotherapy techniques to treat various mental health conditions.

**Procedure**

- a) Pre-Screening and Assessment:
- i. Prior to initiating KAP sessions, all patients must undergo a thorough medical and psychological evaluation to assess their suitability for ketamine treatment.
  - ii. Special attention should be paid to patients with a history of respiratory conditions or risk factors predisposing them to respiratory complications.
- b) Monitoring During Sessions:
- i. During KAP sessions, patients' vital signs, including respiratory rate, oxygen saturation, and heart rate, should be continuously monitored by trained healthcare professionals.
  - ii. Any signs of respiratory distress, such as stridor or changes in breathing patterns, should be promptly addressed.
- c) Response to Stridor:
- i. In the event of stridor or any respiratory distress, immediate action must be taken to ensure patient safety.
  - ii. The primary objective is to maintain airway patency and adequate oxygenation.
  - iii. Administer supplemental oxygen via nasal cannula or mask as needed to improve oxygen saturation levels.
  - iv. If stridor persists or worsens despite oxygen therapy, consider administering benzodiazepines or other medications per physician's orders to alleviate respiratory distress and anxiety.
  - v. Prepare for advanced airway management techniques, including intubation, if necessary, to secure the airway and facilitate adequate ventilation.



d) Post-Event Evaluation and Follow-Up:

- i. Following resolution of the stridor episode, conduct a comprehensive evaluation of the patient's condition, including reassessment of vital signs and respiratory status.
- ii. Document the incident, including the precipitating factors, interventions performed, and patient response.
- iii. Consider discontinuing or modifying the ketamine dosage or psychotherapy approach if recurrent stridor or other adverse events occur.
- iv. Provide appropriate follow-up care and support to the patient, including monitoring for potential delayed complications and addressing any psychological distress resulting from the incident.

**Training and Education**

- a) All healthcare professionals involved in administering KAP sessions must undergo specialised training in the recognition and management of stridor and other potential complications associated with ketamine therapy.
- b) Regular educational sessions and updates should be conducted to ensure staff competency and familiarity with the latest evidence-based practices.

**Quality Assurance**

- a) Periodic review of KAP protocols and procedures should be conducted to identify opportunities for improvement and ensure adherence to best practices.
- b) Feedback from patients and staff regarding the management of stridor and overall safety of KAP sessions should be solicited and incorporated into quality improvement initiatives.

**Compliance**

- a) Failure to comply with this policy and procedure may result in disciplinary action, up to and including suspension or termination, depending on the severity of the breach and its impact on patient safety.

**References**

Phil Wolfsson et al. (Year). The Ketamine Papers

**Approval and Review**

This policy and procedure shall be approved by [insert relevant authority] and subject to periodic review to ensure its ongoing relevance and effectiveness in promoting safe and ethical practice in Ketamine Assisted Psychotherapy.

This policy and procedure serve as a framework for the management of stridor in Ketamine Assisted Psychotherapy, drawing on the insights and recommendations of Phil Wolfsson's work and established best practices in the field.

