

## *IARS Consensus Statement Addresses Neuromuscular Monitoring*

In an effort to improve the use and safety of neuromuscular monitoring, the International Anesthesia Research Society recently published a consensus statement on its use in the perioperative setting (Anesth Analg 2017 Nov 30. [Epub ahead of print]).

The statement includes several recommendations laid out by a team of physician experts on the proper use of neuromuscular monitoring, which were created to increase awareness on the part of anesthesia providers of the potential incidence of residual neuromuscular blockade (NMB) and the associated risk for death.

The statement contains four specific recommendations for anesthesia providers:

- Objective (quantitative) monitoring—a real-time measurement of the train-of-four ratio—should be used when administering nondepolarizing neuromuscular blockade drugs (NMBDs), and subjective measurements using peripheral nerve stimulator devices should not be used because they “are prone to error.”
- Clinical (and hence subjective) tests for NMB are not adequate and should be abandoned.
- Professional societies need to develop practice guidelines for perioperative use of NMBDs.
- Terms for NMB levels need to be standardized.

The authors also provide recommendations for what the standardized terms and practices should be, and propose training and educational approaches for neuromuscular monitoring.