



Propofol versus conscious sedation: a short guide

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Conscious sedation

Usually midazolam, sometimes with a pain-relieving medicine such as fentanyl. You feel relaxed and drowsy and can usually respond to instructions. You may remember little or parts of the examination. The endoscopist directs the sedation with a trained nurse monitoring you.

Propofol sedation

Acts quickly and is often used for deeper procedural sedation. This is not general anaesthesia. You breathe for yourself, so a breathing tube is not routinely required, while the specialist anaesthetist monitors your breathing and circulation and supports your airway if needed. I perform the endoscopy. Waking is often quick, but you still need the service's recovery restrictions.

No sedation

Yes. Some people choose gastroscopy with throat spray alone or colonoscopy without intravenous sedation. Whether this is suitable depends on the procedure, your health and your discussion with the endoscopy team. Tell us before booking so the team can plan the right approach.

Discuss the choice early

Tell us about anxiety, previous discomfort, sleep apnoea, heart or lung disease, medicines and anaesthetic problems. A prolonged or complex procedure may need a different sedation plan. Both options involve careful monitoring. An anaesthetist needs to be arranged ahead of time.

What about insurance?

You can discuss either option with our team. Some insurance companies have additional eligibility criteria for propofol sedation. Southern Cross has additional eligibility criteria for deeper sedation from 1 April 2026. Ask our team which option is suitable and confirm the criteria with Southern Cross.

Prepare and get home safely

Follow your fasting and individual medicine instructions. For either intravenous option, arrange an adult to collect you and the support your service requests. Follow the discharge restrictions for driving, work, machinery, alcohol and important decisions, even if you feel alert.

Recovery and results

The team monitors you until you are ready to leave. Most people feel awake within about 30 minutes, although recovery time varies, and most people go home the same day. Initial findings can usually be discussed then; biopsy results take longer. Use your discharge contacts for concerns. New breathing difficulty or unexpected difficulty waking needs urgent help.

Call 111 for severe breathing difficulty, collapse or if someone cannot be woken normally.

