



Scope of Nurse Anesthesia Practice

Professional Role

Certified Registered Nurse Anesthetists (CRNAs) are advanced practice registered nurses (APRNs) licensed as independent practitioners. CRNAs practice both autonomously and in collaboration with a variety of health providers on the interprofessional team to deliver high-quality, holistic, evidence-based anesthesia and pain care services. Nurse anesthetists care for patients at all acuity levels across the lifespan in a variety of settings for procedures including, but not limited to, surgical, obstetrical, diagnostic, therapeutic, and pain management. CRNAs serve as clinicians, researchers, educators, mentors, advocates, and administrators.

Education, Accountability and Leadership

CRNAs enter the profession following successful completion of graduate or post-graduate education from an accredited nurse anesthesia program and after passing the National Certification Examination. CRNAs embrace lifelong learning and practice professional excellence through ongoing recertification and continuous engagement in quality improvement and professional development. The scope of nurse anesthesia practice is determined by education, experience, state and federal law, and facility policy. CRNAs are accountable and responsible for their services and actions, and for maintaining their individual clinical competence. Nurse anesthetists are innovative leaders in anesthesia care delivery, integrating progressive critical thinking and ethical judgment.

Anesthesia Practice

The practice of anesthesia is a recognized nursing and medical specialty unified by the same standard of care. Nurse anesthesia practice may include, but is not limited to, these elements: performing a comprehensive history and physical; conducting a preanesthesia evaluation; obtaining informed consent for anesthesia; developing and initiating a patient-specific plan of care; selecting, ordering, prescribing and administering drugs and controlled substances; and selecting and inserting invasive and noninvasive monitoring modalities. CRNAs provide acute, chronic and interventional pain management services, as well as critical care and resuscitation services; order and evaluate diagnostic tests; request consultations; and perform point-of-care testing. CRNAs plan and initiate anesthetic techniques, including general, regional, local, and sedation. Anesthetic techniques may include the use of ultrasound, fluoroscopy and other technologies for diagnosis and care delivery, and to improve patient safety and comfort. Nurse anesthetists respond to emergency situations using airway management and other techniques; facilitate emergence and recovery from anesthesia; and provide post-anesthesia care, including medication management, conducting a post-anesthesia evaluation, and discharge from the post-anesthesia care area or facility.

The Value and Future of Nurse Anesthesia Practice

CRNAs practice in urban and suburban locations, and are the primary anesthesia professionals providing care to the U.S. Military, rural, and medically underserved populations. The CRNA scope of practice evolves to meet the healthcare needs of patients and their families as new research and technologies emerge. As APRNs, CRNAs advocate for the removal of scope of practice barriers to increase patient access to high-quality, comprehensive care.

In 1980, the "Scope of Practice" statement was first published as part of the *American Association of Nurse Anesthetists Guidelines for the Practice of the Certified Registered Nurse Anesthetist*. In 1983, the "Standards for Nurse Anesthesia Practice" and the "Scope of Practice" statement were included together in the *American Association of Nurse Anesthetists Guidelines for the Practice of the Certified Registered Nurse Anesthetist*. That document subsequently had the following name changes: *Guidelines for Nurse Anesthesia Practice* (1989); *Guidelines and Standards for Nurse Anesthesia Practice* (1992); and *Scope and Standards for Nurse Anesthesia Practice* (1996). *The Scope and Standards for Nurse Anesthesia Practice* was most recently revised in January 2013. In February 2013, the AANA Board of Directors approved separating the *Scope and Standards for Nurse Anesthesia Practice* into two documents: the *Scope of Nurse Anesthesia Practice* and the *Standards for Nurse Anesthesia Practice*. In June 2013, the AANA Board of Directors approved revisions to the *Scope of Nurse Anesthesia Practice*.