

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: III-114 CRNA SCOPE OF PRACTICE, REGIONAL ANESTHESIA	POLICY #: 1186
	VERSION: 2
APPROVED BY: ASC Approvers	
DATE APPROVED: 09/18/2017	

PURPOSE: To define the scope of practice of the CRNA during administration of regional anesthesia.

POLICY: CRNAs providing anesthesia services to patients at the Ambulatory Surgery Center work under the medical supervision of the anesthesiologist and must perform the technical aspects of anesthesia care described below whenever administering regional anesthesia.

PROCEDURE:

1. Obtain or review Preoperative Evaluation for patient and review, paying special attention to laboratory results and anesthesia plan.
2. Setup and check anesthesia machine, needed monitors and suction; prepare needed medications, IV lines and any other needed equipment. Obtain supplies and medications needed for regional anesthesia.
3. Prepare the patient for administration of anesthesia: place monitors, apply oxygen, take and record initial vital signs and administer IV sedation, if needed. Place the patient in an appropriate position for regional procedure.
4. Anesthesiologist or CRNA may place the regional anesthesia. If placed by the CRNA, an Anesthesiologist must be present during the placement of regional anesthesia. The professional staff performing the regional anesthesia (block) is responsible for documenting the procedure on the anesthesia record.
5. To place spinal anesthesia, skin must be prepared with Betadine or CHG products (following the package insert recommendation). Local anesthetic should be used to localize the region prior to insertion of spinal needle. After the procedure patient's vital signs must be monitored continuously. Report any changes or deviation from baseline to responsible anesthesiologist.
6. Administer any needed medications while monitoring the patient.
7. Continue monitoring the patient **until** arrival in the Post Anesthesia Recovery Unit (PACU). Report to the PACU staff the condition of the patient, including procedure, medication and fluids given, blood loss and any other information needed about the patient's condition in the PACU. Document the name of the RN receiving the report in PACU.

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8. Maintain anesthesia record in an accurate, timely fashion.

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Previous Revise Dates: 04/08/09; 06/09/14