1.00-Professional Aspects

1.01-History of Nurse Anesthesia
- The discipline of nurse anesthesia developed in response to surgeons seeking a solution to the high morbidity and mortality attributed to anesthesia at that time. Serving as pioneers in anesthesia, nurse anesthetists became involved in the full range of specialty surgical procedures, as well as in the refinement of anesthesia techniques and equipment.

1.02-Holistic, Alternative and Complimentary Therapy
- This practice recognizes the totality of the human being - the interconnectedness of body, mind, emotion, spirit, social/cultural, relationship, context, and environment. Holistic nurse anesthesia practice may integrate complementary/alternative modalities (CAM) into clinical practice to treat people’s physiological, psychological, and spiritual needs.

1.03-Practice Management
- The expansive knowledge and skills for successful leadership not limited to business operations, reimbursement, credentialing and privileging, accreditation, and human resources.

1.04-Staff Development
- Includes INS, M&M, JC, QA, Case Conference. Continuous professional development using formal and informal educational content to develop and evaluate new and existing competencies, discuss evidence based practice, performance improvement, and additional topics as identified.

1.05-Life Support (BLS/ACLS/PALS/NRP/NALS)
- Knowledge and skills necessary for emergent patient resuscitation using protocols

1.06-Ethics of Anesthesia Care
- The quality and quantity of care provided to the patients. It is the impartiality in the delivery of limited resources across health care service areas, the promise to “do no harm” in providing of appropriate amounts of care to patients and the transparency of appropriate amounts of care to patients.

1.07-Government Relations
- This deals with the Federal and State government state affairs including policies from the Centers for Medicare and Medicaid Services and State Boards of Nursing.

1.08-Military and Veterans Affairs
- Issues and regulations that affect CRNAs scope of practice in military treatment facilities and the Veterans Health Administration.

1.09-Education Issues
- Dealing with Accreditation and simulation

1.10-Credentialing/Certification/Recertification
- Credentialing best practice evaluation of the professional verifies 13 specific criteria obtained from primary source to assess the professional's practice abilities and issues to be considered for Medical Staff privileges.

1.11-Association Governance and Leadership
- A governing body, officers, and key employees are responsible to define and uphold the organization’s mission, vision, values, provide leadership and strategic direction for the organization.

2.00-Scientific Foundations

2.01-Research
- Research represents a rational approach to the making of practice choices among initially plausible alternatives and provides direction and a means for validating these choices.

2.02-General Principles, Pharmacokinetics, Pharmacodynamics, and Drug Receptor Concepts

2.03-Inhalation Anesthetics
- General anesthesia administered via inhalation

2.04-Intravenous Induction Agents
- Inducing anesthesia through an intravenous method

2.05-Local Anesthetics

2.06-Opioid Agonists and Antagonists
- Agonists are drugs that activate certain receptors in the brain and antagonists block certain receptors preventing the body from responding to opioids and endorphins.
02.07-Neuromuscular Blocking Agents, Reversal Agents and Their Monitoring
02.08-Pharmacology for Medical Management of the Anesthetized Patient
02.09-Illlicit Drugs and Herbal Supplements

03.00-Technology
03.01-Anesthesia Equipment
03.02-Clinical Monitoring I: Cardiovascular System
03.03-Clinical Monitoring II: Respiratory and Metabolic Systems
03.04-Clinical Monitoring III: Neurological System
03.05-The Anesthesia Machine
03.06-Ventilators/ECMO (Extracorporeal Membrane Oxygenation) and other respiratory adjuncts
  • Providing both cardiac and respiratory support to patients whose heart or lungs are unable to provide an adequate amount of gas exchange to sustain life.
03.07-Temperature Monitoring
03.08-Hemodynamic monitoring including Trans esophageal echo
03.09-Radiation Safety and Principles of Fluoroscopy
03.10-Principle of Ultrasonography
03.11-Fiberoscopy
  • A procedure involving a flexible fiber-optic instrument used to view an object or area, such as body cavity, that would otherwise be inaccessible
03.12-Miscellaneous Equipment and New Technology
04.00-Preoperative Preparation
04.01-History and Physical Assessment
04.02-Diagnostic Testing
04.03-Autoimmune Diseases
04.04-Infectious Diseases
04.05-Endocrine Disorders
04.06-Malignant Hyperthermia
04.07-Positioning for Anesthesia
04.08-Other Pathologic Disorders
05.00-Intraoperative Management
05.01-Hematology and Anesthesia
05.02-Positioning for Anesthesia and Surgery
05.03-Airway Management
  • Airway management are a set of medical procedures performed in order to maintain airway patency. This is accomplished by clearing or preventing obstructions of airways, caused by the tongue, the airways themselves, foreign bodies or materials from the body itself, such as blood or stomach content, the latter resulting in aspiration.
05.04-Cardiovascular Anatomy, Physiology, Pathophysiology, and Anesthesia Management
  • Content referring to the cardiovascular system and the effects of anesthesia.
05.05-Respiratory Anatomy, Physiology, Pathophysiology, and Anesthesia Management
  • Content referring to the respiratory system and the effects of anesthesia
05.06-Anesthesia for Thoracic Surgery
05.07-Neuroanatomy, Neurophysiology, Neuropathophysiology, and Neuroanesthesia
  • Content referring to the nervous system (including the central and peripheral nervous system) and the effects of anesthesia
In the evolving patient population and dynamic needs of a healthcare system, the world of anesthesia has also evolved and adjusted by providing anesthesia outside the conventional operating room. The anesthesia provider facilitates a therapeutic and diagnostic environment where anesthesia is to be performed is familiar, well equipped and safe as it is in the operating room.

- **05.31-Anesthesia in Remote locations**
  
  - In the evolving patient population and dynamic needs of a healthcare system, the world of anesthesia has also evolved and adjusted by providing anesthesia outside the conventional operating room. The anesthesia provider facilitates a therapeutic and diagnostic environment where anesthesia is to be performed is familiar, well equipped and safe as it is in the operating room.

- **05.32-Anesthesia for Humanitarian Missions**
  - Military and emergency anesthesia including weapons of mass destruction

- **06.00 Postoperative Management**
  - **06.01-Post-anesthesia care**
  - **06.02-Intensive Care**
  - **06.03-Discharge Care**
  - **06.04-Pain Management**
  - **06.05-Enhanced Recovery**
  - **07.00 Miscellaneous/Other**