pressed with the possibility of scientific study and research afforded by your several departments. The administration of anesthesia is not a mere mechanical thing. It means the application of a vast amount of experience and a scientific knowledge of the drug which you are using, as well as an intimate knowledge of the symptoms which the patient exhibits during the process of anesthesia. A careful application of all the lessons learned through experience and through intensive scientific study makes for the safety of the patient under your care and adds to the value of the nurse anesthetist in whatever institution she may be employed.

Through your association you will be able to establish courses of study that will be increasingly valuable to the person engaged in your particular vocation, and one of the finest services your association will perform in the future will be the encouragement of research and study on the part of your members which will make for the common good of all.

It is particularly appropriate in greeting you at the first annual convention of your association to assure you of a bright future for your profession and for the members of your profession who are joined together in your association. Every nurse anesthetist should become an active member and contribute her part to the growth and success of your organization.

The American Hospital Association is mighty glad to have you hold your first annual convention with us and hopes that in future years we will always have you with us.

CHAIRMAN FIFE: May I take this opportunity to thank Dr. Caldwell for his splendid talk, and also for the assistance he has given us in making it possible for our organization to meet with the American Hospital Association. We appreciate his helpfulness.

THE FUTURE OF THE NURSE ANESTHETIST
By GERTRUDE L. FIFE
Assistant Director, Post-Graduate School of Anesthesia, University Hospitals, Cleveland, O.

Before launching deeply into the future of the nurse anesthetist, let us get a glimpse of the illustrious past supporting the spirit, the enthusiasm and ambitions responsible for our meeting here today and our organization meeting in June of 1931. Visualize the first nurse in the field of anesthesia — courageous and with complete devotion — striving to carry on a work that had been thrust upon her by virtue of her nature and adaptability to this branch of hospital service.

We must bear in mind that the surgeons and the hospital administrators are responsible for her advent into the field. The foundation was laid because they recognized the intrinsic worth to future hospital development of direct training and distinct organization of an anesthesia service. Their desire to foster this branch, and the encouragement given by them stimulated the nurse to perfect herself in the work for which she had been chosen. Her aptitude for the work gained increased favor, and within a few years the nurse anesthetist rose from the experimental stage to a point of unquestionable advantage and necessity.
The result of the experiment and the success of the pioneer nurses in this field can be better illustrated by linking the past with the present over a given period of years. Twenty years ago the nurse anesthetist was practically unheard of — today 96 per cent of the leading institutions in the United States employ nurse anesthetists, and many of these institutions have established schools of anesthesia.

We are proud of the number of excellent schools that have been developed — and may I add that they are in the great majority. The springing up of poor schools is the result of many years of indifference to the significance of the work — and to the lack of organization. If the schools at this time are brought into systematic relation as part of a whole, it will encourage the good ones and discourage the poor ones. A group of people so united to carry out a program that is essential, in that it adds to the protection, the safety, and the happiness of many people, is bound to develop, and achieve results far-reaching in advantages to all concerned.

Our newly organized group of nurse anesthetists must assist the nurse to fill the place in hospital service that was intended when the surgeon chose the nurse in pioneer days and entrusted to her the administration of an anesthetic to his patient. We must study the problems from every angle, and in conference with the best minds interested and responsible for this division of hospital service, make an earnest effort to standardize the education of the nurse anesthetist. To do this, we must have a clear vision of what we hope to accomplish, the methods by which we can accomplish this end, and the results once we have accomplished what we have set forth to do.

Let us consider — in regard to the standardization of education—the things we hope to accomplish. The schools now in existence can be classified under three headings — excellent, fair and poor. The subject at this point demands a fair explanation of what can be considered an excellent school. It is one which has been organized along definite lines, with careful thought given to the development of executives and teachers, and much concern exercised in the qualifications of students. The duration of the course of instruction has been influenced by the activity of the surgical service, in regard to the number of cases available to the students for practical instruction, and also by the time available to the students, when not actively engaged in administering anesthetics, for the didactic teaching. In this way the excellent schools have allowed time for both practical and theoretical instruction, and have awarded a diploma at the successful termination of the course. The value to the student of the systematic development of planned education has taken precedence over the needs of the institution in respect to the advantages of students to the institution. It has been possible, however, to mold the two together, so that each has shared the benefits of well planned, well organized schools of anesthesia.

In regard to the qualifications of students, the excellent schools have recognized the fact that if they are to carry on the fine work of a few women especially chosen because of their qualities and adaptability
to this vital work, they must exercise unremitting vigilance in choosing their candidates. These schools have admitted only well trained nurses, who have been graduated from accredited schools of nursing, who have passed the required state board examinations, and who are mentally and physically fit to take up post-graduate work of a serious nature. They have demanded as essential a thorough knowledge of hospital work, operating room technique, and the administration of drugs, before they have allowed one to be admitted to the advanced study of the effect and administration of specific drugs separately considered. Those who have had the benefit of several years of teaching in anesthesia realize more acutely perhaps than many others the stern necessity of a solid background of educational training and experience.

In this connection we also recognize the importance and the benefits of the proper arrangement of time in which to teach the subject of anesthesia. The increase in the amount of subject matter that must be presented to the student, the research and use of new drugs, and the degree of skill attained in the administration technique, forces us to emphasize the longer course of study. It is preposterous to imagine that a subject that has brought forth such wealth of research and study can be so condensed as to be treated in a satisfactory manner in a short time. It is not flattering to one who has devoted many years of preparation, probably to the extent of having received a medical degree, to be able to teach his subject in two weeks, or two months. I do not wish to imply, however, that efforts in general are being made to shorten the courses of instruction. We are not unduly disturbed over any efforts in this direction. The result of adequate training will act as a barrier to those who attempt to under-estimate the importance of efficient and well trained people in this as in any other branch of service. Mediocrity in this case is the result of misunderstanding, and misunderstanding is unpardonable when dealing with human lives.

In discussing the education of the nurse anesthetist, this paper would not be complete unless we treat the subject from the standpoint of future changes which to my mind are inevitable. These changes will take many years of concentrated effort on the part of those interested in teaching, and will affect other branches of nursing education before they can affect the education of the nurse anesthetist. The problem of education as I see it resolves itself into university centers, organized as complete teaching units for all branches of medical education. The responsibility of teaching under this arrangement would be assumed by the university working in cooperation with the hospital in regard to the practical instruction to be given to students. Thus the hospital will be released from a great burden, and the students will have the benefit of concerted educational facilities. It seems to me that it is no more the obligation of the hospital to train nurses or anesthetists than it is to train medical students. In the present arrangement of schools of anesthesia, the department functions as a single teaching unit, without definite connection with the other teaching units that have much to offer. This should not be so, inasmuch as it
seems logical that the ones doing the actual research in anesthesia — the physiologists and the pharmacologists — should contribute materially to the teaching of the subject. However, these advantages cannot come unless the anesthetists make an effort to move forward in direct line with other divisions of hospital training.

In the last few years many changes have been made in medical education and hospital management, owing to greater understanding of the needs, increased interest, and economic conditions. The nurse anesthetist has met these changes successfully, and is now faced with a duty to prepare a broad program to direct and influence the future of the work. The course to pursue is clear cut and has accomplished results in other branches of education. The first step in the program was made when we organized in June of 1931. Our second step is to give assurance that our members are and will be only those who by reason of their training, experience, knowledge and character are qualified to undertake the work before us.

The National Association of Nurse Anesthetists, through a committee composed of members holding executive and teaching positions in anesthesia, and who by reason of their knowledge and judgment, and interest in the safeguarding of the work are fitted to be entrusted with such an important task, should carry on an investigation of schools giving instruction to nurse anesthetists. After such investigation, the committee should make recommendations to the National Association that such schools be placed on an accredited list, or on an unrecognized list, as determined by their investigation. The schools appearing on the unrecognized list should be notified, the reasons for the decisions being given. The hospitals conducting post-graduate schools should welcome such a movement and for the benefit of their graduates make every effort to bring their schools up to the required standard. The National Association should at all times be able to furnish information to hospitals or surgeons desirous of employing anesthetists regarding the standing of schools and the qualifications of members of the National Association desirous of obtaining positions.

The National Association should also encourage the establishment of national board examinations for nurse anesthetists. The hospital, the surgeon and the public have a right to require the greatest protection that can be afforded them in this branch as well as in any other branch of hospital service. The fact that a patient chooses a surgeon, placing extreme confidence in his ability and judgment, and holds the surgeon responsible for his safety, makes it as necessary for the surgeon to demand the same vigilance in the choice and protection of the person who, under his direction, is going to carry his patient from the conscious state into the unconscious state, as in choosing a nurse to care for the patient after the operation has been successfully performed. National board examinations for nurse anesthetists would place in the surgeon's hands an official record showing that her knowledge of the subject has met with the approval of an examining board — a board chosen and functioning to safe-
guard the surgeon's interest, the interest of the hospitals, and the interest of the public.

Once we have accomplished these things — what will be the results? The results are apparent — we shall have reached a time when the surgeon, the hospital and the public will have the benefit of highly trained, competent and experienced people in this field. The individual specializing in this particular branch will enter the field well equipped for the work. The training will be clear cut and established, and in addition the work will have the backing of an organization standing for the highest ideals.

In conclusion, let us as members of the National Association of Nurse Anesthetists work with this purpose in view. We shall continue to have the cooperation, support and help of the surgeons and the hospital administrators if we strive for a standard of excellence to accomplish results for the benefit and welfare of the public, in whose interest our organization justifies its existence.

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Adjourned at 4:15 P. M.

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The American Hospital Association had invited our group to attend the Banquet and Ball at the Wisconsin Club Gardens, which took place at 7:30 P. M.

The program was as follows:
Presiding: George F. Stephens, M. D., President
Invocation
Lt. Col. Gustav Stearns, D. D.
Chaplain, 36th Division United States Army
Entertainment during dinner by Milwaukee Chanters and Xylophone
Introduction of Distinguished Guests
Selection
Milwaukee Chanters
Address
Glenn Frank, Ph. D., Litt. D.
President, The University of Wisconsin, Madison, Wis.
Selection
Milwaukee Chanters
Orchestra
Dancing and Entertainment

The National Association of Nurse Anesthetists was honored by the invitation of the American Hospital Association to Mrs. Gertrude L. Fife to sit at the speaker's table.