

Scope of Nurse Anesthesia Practice

Professional Role

Certified Registered Nurse Anesthetists (CRNAs) are advanced practice registered nurses (APRNs) licensed as independent practitioners who plan and deliver anesthesia, pain management, and related care to patients of all health complexities across the lifespan. As autonomous healthcare professionals, CRNAs collaborate with the patient and a variety of healthcare professionals in order to provide patient-centered high-quality, holistic, evidence-based and cost-effective care.

CRNAs practice in hospitals, nonoperating room anesthetizing areas, ambulatory surgical centers, and office-based settings. They provide all types of anesthesia-related care for surgical, diagnostic, and therapeutic procedures. CRNAs provide anesthesia for all specialties including, but not limited to, general, obstetric, trauma, cardiac, orthopedic, gastrointestinal, dental, and plastic surgery. CRNAs administer anesthesia care to patients in urban, suburban, and rural locations in the U.S., and are often the sole anesthesia professionals delivering care to the military, rural, and medically underserved populations. CRNAs serve as leaders, clinicians, researchers, educators, mentors, advocates, and administrators.

Education, Licensure, Certification, and Accountability

Before receiving graduate education in anesthesia, CRNAs must be licensed registered nurses with critical care nursing experience. Building on this critical care foundation, CRNAs successfully complete a comprehensive didactic and clinical practice curriculum at a nurse anesthesia program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs. Graduates are certified as CRNAs following successful completion of the National Certification Examination. CRNAs are accountable to the public for professional excellence through lifelong learning and practice, continued certification, continuous engagement in quality improvement and professional development, and compliance with the [Standards for Nurse Anesthesia Practice](#) and [Code of Ethics for the Certified Registered Nurse Anesthetist](#).

CRNAs exercise independent, professional judgment within their scope of practice. They are accountable for their services and actions and for maintaining individual clinical competence. The scope of an individual CRNA's practice is determined by education, experience, local, state and federal law, and organization policy.

Clinical Anesthesia Practice

The practice of anesthesiology is a recognized nursing and medical specialty unified by the same standards of care. Nurse anesthesia practice may include, but is not limited to, the services in Table 1.

Table 1. Nurse Anesthesia Scope of Practice*

Preoperative / Preprocedure	Intraoperative / Intraprocedure	Postoperative / Postprocedure	Pain Management	Other Services
<ul style="list-style-type: none"> • Provide patient education and counseling • Perform a comprehensive history and physical examination, assessment and evaluation • Conduct a preanesthesia assessment and evaluation • Develop a comprehensive patient-specific plan for anesthesia, analgesia, multimodal pain management, and recovery • Obtain informed consent for anesthesia and pain management • Select, order, prescribe and administer preanesthetic medications, including controlled substances 	<ul style="list-style-type: none"> • Implement a patient-specific plan of care, which may involve anesthetic techniques, such as general, regional and local anesthesia, sedation, and multimodal pain management • Select, order, prescribe and administer anesthetic medications, including controlled substances, adjuvant drugs, accessory drugs, fluids, and blood products • Select and insert invasive and noninvasive monitoring modalities (e.g., central venous access, arterial lines, cerebral oximetry, bispectral index monitor, transesophageal echocardiogram (TEE)) 	<ul style="list-style-type: none"> • Facilitate emergence and recovery from anesthesia • Select, order, prescribe and administer postanesthetic medications, including controlled substances • Conduct postanesthesia evaluation • Educate the patient related to recovery, regional analgesia and continued multimodal pain management • Discharge from the postanesthesia care area or facility 	<ul style="list-style-type: none"> • Provide comprehensive patient-centered pain management to optimize recovery. • Provide acute pain services, including multimodal pain management and opioid-sparing techniques • Provide anesthesia and analgesia using regional techniques for obstetric and other acute pain management • Provide advanced pain management, including acute, chronic, and interventional pain management 	<ul style="list-style-type: none"> • Prescribe medications, including controlled substances (e.g., pain management, medication-assisted treatment, adjuvants to psychotherapy) • Provide emergency, critical care, and resuscitation services • Perform advanced airway management • Perform point-of-care testing • Order, evaluate, and interpret diagnostic laboratory and radiological studies (e.g., chest x-ray, 12-lead EKG, TEE) • Use and supervise the use of ultrasound, fluoroscopy, and other technologies for diagnosis and care delivery • Provide sedation and pain management for palliative care • Order consults, treatments or services related to the patient's care (e.g., physical and occupational therapy)

****These services are listed in table format for ease of reference. The table is not intended to be all inclusive or limit the services to specified phases of patient care. CRNA scope of practice is dynamic and evolving. CRNA clinical privileges should reflect the full scope of CRNA practice evidenced by individual credentials and performance.***

Leadership, Advocacy, and Policymaking

CRNAs provide pivotal healthcare leadership in roles such as chief executive officer, administrator, manager, anesthesia services director, board member, anesthesia practice owner, national and international researcher, educator, mentor, and advocate. Nurse anesthetists are innovative leaders in the delivery of cost-effective, evidence-based anesthesia and pain management, integrating critical thinking, ethical judgment, quality data, scientific research, and emerging technologies to optimize patient outcomes.

As demand for expert healthcare and anesthesia services accelerates, advocacy activities continue to target supporting the full scope of nurse anesthesia practice. CRNAs engage in healthcare advocacy and policymaking at the facility, local, state, national, and international level. They also participate in professional associations focusing on patient access to quality and affordable care.

The Future of Nurse Anesthesia Practice

The CRNA scope of practice evolves to meet the demands of the ever changing healthcare environment and increasing patient and procedure complexity. As their record of safe, high-quality, cost-effective care demonstrates, CRNAs will continue to lead in the delivery of patient-centered compassionate anesthesia and pain management care.

For additional information and supporting documents, see [Clinical Privileges and Other Responsibilities of Certified Registered Nurse Anesthetists](#), [Professional Practice Documents](#), and [Publications and Research](#).

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 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*. The AANA Board of Directors approved revisions to the *Scope of Nurse Anesthesia Practice* in June 2013 and February 2020.