

Securing Propofol *Position Statement*

The American Association of Nurse Anesthetists (AANA) supports the well-being, safety, and professional self-care of Certified Registered Nurse Anesthetists and Student Registered Nurse Anesthetists. The AANA recognizes that anesthesia professionals have an increased occupational risk of substance use disorder, as well as the professional and personal consequences of substance use disorder.¹⁻⁴

Since the introduction of propofol into the healthcare market, the incidence of healthcare professionals' abuse of propofol continues to increase.⁵ Propofol is among the most commonly abused drugs by anesthesia professionals.⁶ This abuse is primarily due to ease of access, rapid onset of action, short duration of action, and feelings of elation and euphoria.^{2,5,7-18} Access to highly addictive drugs, including propofol, is a significant risk factor for substance use disorder among anesthesia and other healthcare professionals.^{2,3,5,10-15,19-21} Research also suggests that exposure to propofol aerosolized in the operating room may sensitize personnel to later abuse.^{5,22-24} Unfortunately, the first sign of propofol abuse or addiction is often death.^{12,13,16-19}

Because healthcare professionals who divert drugs, such as propofol, pose a risk to their patients, employers, coworkers, and themselves, the AANA takes a strong position on the need to secure propofol within facilities.²⁵

Position

Recommendation for Classification by Federal Drug Enforcement Administration

- Since 2010, it has been the AANA's position that, due to the risk of abuse, propofol warrants, at a minimum, Schedule IV controlled substance classification.^{7,12,20,26,27}

Recommendations for Facilities

- The AANA strongly recommends that facilities with propofol on formulary develop and implement methods to reduce the likelihood of propofol diversion, such as placing propofol in a secure environment only accessible by those professionals identified in a medication management policy.
- Establish a comprehensive workplace substance use disorder policy, which includes propofol, and addresses drug storage, abuse and diversion, methods to prevent drug diversion, and reentry to clinical practice.^{1,10,25,28} Propofol should be addressed in this comprehensive policy.
 - Detailed information on Drug Diversion Prevention Strategies and Reentry to Clinical Practice is listed in [Addressing Substance Use Disorder for Anesthesia Professionals, Position Statement and Policy Considerations](#).¹
- Educate all healthcare professionals on the nature and scope of drug diversion and impairment in the workplace, signs and behaviors of drug diversion and impairment, appropriate response, and proper ways to report drug diversion and impairment.^{1,21,25}

- Detailed information on Identifying Those at Risk and Signs and Behaviors of Impairment and Drug Diversion is listed in [Addressing Substance Use Disorder for Anesthesia Professionals, Position Statement and Policy Considerations](#).¹
- When propofol diversion and abuse is suspected, use an extended drug testing panel and protocols that identify anesthesia drugs to include propofol.^{1,29}

AANA Resources

- Addressing Substance Use Disorder for Anesthesia Professionals, Position Statement and Policy Considerations
www.aana.com/AddressingSUD
- Substance Use Disorder Workplace Resources
www.aana.com/SUDWorkPlaceResources
- Peer Assistance
www.AANAPeerAssistance.com

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