

The Role of the CRNA on the Procedure Team *Position Statement*

Delivery of Safe Patient Care

The Certified Registered Nurse Anesthetist's (CRNA) role as a member of the procedure team is to provide patient-centered monitored anesthesia care, regional anesthesia, or general anesthesia in inpatient and outpatient locations. CRNAs support and collaborate with members of the multidisciplinary team to enhance patient safety. Teamwork and effective communication contribute to enhanced situational awareness that leads to improved decision-making.^{1,2}

Separation of Proceduralist and Anesthesia Professional Responsibilities

Patient safety may be compromised when the CRNA is asked to serve in a second role during the procedure. The CRNA is responsible for the anesthesia care of the patient and is not available to personally perform or actively assist with the diagnostic or therapeutic procedure. The CRNA may participate in minor tasks that do not distract from the continuous monitoring and care of the patient. The American Association of Nurse Anesthetists (AANA) [Standards for Nurse Anesthesia Practice](#) emphasize that continuous clinical observation and vigilance are the foundation of safe anesthesia care.³

The procedure team staffing arrangement must support and not compromise patient safety and clinician vigilance. When anesthesia services are requested for a procedure, there should be at least three qualified healthcare providers involved: the proceduralist, a qualified anesthesia professional, and an assistant to the proceduralist. This patient care team structure, with delineated responsibilities, allows each team member to focus on his or her role for best outcomes and patient safety.⁴ A diagnostic procedure (e.g., MRI, CT scan) may only require two qualified providers.

The CRNA Functioning in an RN Role

The CRNA may be asked to practice in a traditional registered nursing (RN) role during the peri-anesthesia period. The AANA does not advise that a CRNA function in a traditional RN role. The CRNA may be held accountable to their highest level of education and training and cannot separate themselves from their advanced practice role.⁵ The AANA [Considerations for Adding New Activities to Individual CRNA Scope of Practice](#) provide a framework for the CRNA to make an informed decision regarding their practice.⁶

Historically, facility requests for CRNAs to work as RNs have been related to staff utilization and economics.⁷ Instead of utilizing the CRNA in a RN role, CRNAs can work with the team to develop a staffing and case scheduling model that brings forward the strengths of each team member through planning and optimization resources, education, and quality improvement programs.⁵ CRNAs have staffing, practice, and leadership expertise to contribute to team resolution of the staffing issue.⁵

Additional considerations are available in the September 2013 *AANA NewsBulletin* article, [Exploring a Common Practice Question: CRNAs Asked to Practice as RNs](#).⁵

References

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