



Use of Invasive Catheters and Monitors by Certified Registered Nurse Anesthetists

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The American Association of Nurse Anesthetists *Scope and Standards for Nurse Anesthesia Practice*¹ describe minimal standards for patient care. Specifically, the role that continuous clinical observation and vigilance play in the delivery of safe anesthesia care is cited. The use of invasive catheters or monitors (e.g., central venous, pulmonary artery, arterial, transesophageal, pacing) provides critical information concerning a patient's physiological status and this information enhances the CRNA's clinical decision-making process. The selection, application and insertion of invasive catheters and/or monitors is within the CRNA's scope of practice, and the decision to use such devices is based on the patient's perioperative needs (e.g., fluid resuscitation, testing), physiologic status, and comorbidities. A CRNA obtains the requisite knowledge and skills needed to use and insert these devices through education² and individual clinical experience. As technological advances offer improvements in patient safety, CRNAs can be expected to integrate these solutions into patient care. The use of image-guided devices (e.g., ultrasound) to facilitate insertion of invasive catheters is one such example.^{3,4} It is incumbent upon each CRNA to ensure his or her individual competency when using these devices.

References

1. American Association of Nurse Anesthetists. *Scope and Standards for Nurse Anesthesia Practice*. Park Ridge, IL. 2006.
2. Council on Accreditation of Nurse Anesthesia Educational Programs. *Standards for Accreditation of Nurse Anesthesia Educational Programs*. Park Ridge, IL. 2011.
3. Hind D, Calvert N, McWilliams R, et al. Ultrasonic locating devices for central venous cannulation: meta-analysis. *BMJ*. Aug 16 2003;327(7411):361.
4. Karakitsos D, Labropoulos N, De Groot E, et al. Real-time ultrasound-guided catheterisation of the internal jugular vein: a prospective comparison with the landmark technique in critical care patients. *Crit Care*. 2006;10(6):R162.