



## Anesthesia Department Rules and Regulations *Framework*

Certified Registered Nurse Anesthetist (CRNA) practice is governed by federal, state, and local law and regulations, accreditation standards, if accredited, and medical or professional staff bylaws, rules and regulations, policies, and procedures. Many facilities also have anesthesia department rules and regulations, policies, and procedures. This document provides a general framework of the sections found in an anesthesia department rules and regulations policy. This can be used as a starting point to develop or revise a facility's Anesthesia Department Rules and Regulations.

### 1. Name

These rules and regulations apply to members of the Anesthesia Department at ***[facility/network]***.

### 2. Purpose

The Anesthesia Department will:

- a. Provide quality anesthesia services on a 24-hour basis.
- b. Conduct department governance that promotes safe and patient-centered anesthesia services.
- c. Support the facility through public education, meeting the standards of regulatory and accrediting agencies, and support of a collaborative practice among all healthcare professionals.
- d. Support and promote effective communication between department members, the medical staff, administration, and the governing body.
- e. Conduct a program of continuing education, quality improvement, and appropriateness of patient care that strives to improve patient care and contributes to the enhancement of the individual anesthesia providers' professional goals and competency.

### 3. Membership

#### a. Qualifications

Active staff membership of the Anesthesia Department will be limited to practitioners who specialize in anesthesia and pain management. ***[See medical staff bylaws for specific medical staff membership requirements.]***

#### b. Obligations

Anesthesia Department members will:

- i. Abide by the standards of care and code of ethics of their professional association.
- ii. Abide by the medical staff bylaws, anesthesia department rules and regulations, policies, and procedures of the facility

- iii. Provide continuous patient-centered anesthesia, analgesia, and pain management services to their patients.
  - iv. ***[insert additional obligations as defined by the facility/network]***
- c. Membership Appointment Procedure:
- i. Submit application for clinical privileges.
  - ii. Submit signed delineation of clinical privileges.
  - iii. Be approved through the medical staff process, as outlined in the medical staff bylaws.
- d. Membership Reappointment Procedure:
- i. The Anesthesia Department Chair and/or chief CRNA (or similar role) evaluates and makes recommendation for medical staff reappointment.
  - ii. Anesthesia Department members must meet all of the requirements of reappointment as detailed in the medical staff bylaws.

#### **4. Clinical Privileges**

- a. The granting, review and revision of clinical privileges will occur according to the terms and regulations in the medical staff bylaws.
  - b. The Anesthesia Department Chair and the Chief CRNA will review privilege requests and make recommendations to the Medical Staff.
  - c. Members disputing any change in the status of their privileges must do so through the mechanism established in the medical staff bylaws.
  - d. Each anesthesia provider will receive notification of his/her privileges listing specific clinical privileges as recommended by the Anesthesia Department and approved by the ***[insert applicable committee(s), e.g., Credentials Committee, Medical Executive Committee, Governing Body]***.
- e. Initial Appointment and Privileging Standards:
- i. Provisional Monitoring/Proctoring  
Practitioners requesting initial or additional clinical privileges at ***[facility/network]*** will be proctored by a member of the Anesthesia Department. Proctoring will begin with the applicant's first case and include a minimum of ***[insert minimum requirements, e.g., two major cases, two trauma cases, obstetrical cases (including two Cesarean sections and two epidural anesthesia cases), and two cardiovascular anesthesia cases]*** which represent a reasonable variety of cases for the requested privileges. Proctoring will be conducted through chart review and direct observation by a practitioner privileged in that specialty. A report describing the case proctored, an evaluation of the applicant's performance, and case outcomes will be maintained in the applicant's confidential file.
- f. Reappointment:

- i. Staff requirements for reappointment or advancement recommendations will be reviewed biannually by the Anesthesia Department Chair/Chief CRNA.
  - ii. Practitioners must demonstrate evidence of proficiency in the area of delineated privileges in the Department of Anesthesia. ***[Insert facility-specific criteria, e.g., minimum number of surgical and/or obstetrical anesthesia cases within a year at the facility]***
- g. Requests for Additional Privileges:
- i. Application for additional or special clinical privileges must be accompanied by appropriate documentation of related training and experience.

## 5. Anesthesia Department Committees

- a. Department committees, subcommittees, or task forces may be comprised of any member of the Anesthesia Department.
- b. Department members may be called upon to participate on committees, subcommittees, task forces or in quality improvement activities to assist the Department in maintaining the standard of care.
- c. Anesthesia Administrative Committee:
  - i. Membership
    - 1. ***[Describe any specific membership requirements or the composition of the committee].***
  - ii. The committee will be comprised of ***[number]*** members who will serve for ***[insert amount of time]***.
  - iii. The committee will:
    - 1. Serve in an advisory role to the Anesthesia Department Chair.
    - 2. Assist the Anesthesia Department Chair in the development and enforcement of Anesthesia Department policies, procedures, rules, and regulations. Amendments to documents are subject to approval as specified in the Medical Staff Bylaws.
    - 3. Communicate to and educate Anesthesia Department members on changes within ***[number]*** days of their adoption.
    - 4. Review and act upon reports from applicable committees (e.g., quality improvement committee).
    - 5. Review recommendations for new procedures.
    - 6. Evaluate applicants for appointment and reappointment. Make recommendations to applicable committees (e.g., credentialing committee, medical executive committee).
    - 7. Make recommendations to the Anesthesia Department Chair regarding appointment of ad hoc committees, task forces, or work groups to work on or review specific topics. The ad hoc committees, task forces, or



work groups are required to provide their research and recommendations to the Anesthesia Administrative Committee.

8. Meet **[monthly]** and maintain documentation of activities.
9. Assist with administrative duties, as requested.

d. Quality Improvement Committee:

- i. The Quality Improvement Committee will be chaired by an Anesthesia Department member.
- ii. The committee will be comprised of **[number]** members who will serve for **[insert amount of time]** and are representative of the perianesthesia team and facility leadership.
- iii. The committee will:
  1. Monitor and analyze data from the Anesthesia Department with the goal of continuous quality improvement.
  2. Make recommendations regarding education, process improvement, policy and procedure, and Medical Staff or Department of Anesthesia rules and regulations.
  3. Present the results of monitoring activities to the Anesthesia Department.
  4. Organize Anesthesia Department education programs based on needs identified through monitoring.

e. ***[Insert other committees, composition, and function]***

6. Anesthesia Department Officers

***[Cross reference specific Medical Staff Bylaw sections, as appropriate]***

a. Terms

Anesthesia Department Officers are elected by the anesthesia department for ***[number, e.g., one, two]*** year terms.

b. Anesthesia Department Chair:

- i. The Anesthesia Department Chair is responsible for the direction of all anesthesia services in the hospital and the clinical work in the department.  
The Chair:

1. Plans, directs, and supervises all activities of anesthesia services, including anesthesia, sedation, analgesia, and advanced pain management throughout the hospital and all departments in all campuses and off-site locations where anesthesia services are provided.
2. Develops and recommends to the medical staff the criteria for clinical privileges granted for the anesthesia service.
3. Creates management systems tailored to the achievement of organizational goals, including promoting the performance,

development and retention of staff and responding to needs for change.

4. Oversees, as appropriate, any review of the necessity, appropriateness, or quality of healthcare services rendered to a patient, and the qualifications, competence, or performance of a healthcare provider.
5. Makes equipment recommendations to administration and medical staff.
6. Facilitates the organization, implementation, and participation of intra- and interdepartmental educational programs.
7. Presides, or appoints a designee, over the Anesthesia Committee and Department meetings.

c. Chair-Elect:

- i. The Chair-Elect assumes the responsibilities of the Chair in the event of the Chair's absence.
- ii. After the Chair's term of office expires, the Chair-Elect succeeds him/her.

## 7. Anesthesia Department Meetings

a. Presiding Officer:

- i. The Anesthesia Department Chair presides over the department meetings. The Chair-Elect presides in the absence of the Chair.

b. Frequency of Meetings:

- i. Anesthesia Department meetings will be held ***[monthly, quarterly, as needed]*** at a time agreed upon by the Chair and communicated to the department members.

c. Order of Business:

- i. Call to order
- ii. Approval of previous minutes
- iii. Review of candidates for membership and clinical privileges
- iv. Committee reports
- v. Unfinished business
- vi. New business
- vii. Adjournment

d. Voting:

- i. All members of the Department will have an equal vote for routine department business and election of officers.

e. Quorum:

- i. A quorum shall be defined as ***[insert the minimum number of members which must be present]***.

**8. Appeal of Decision Made by the Anesthesia Department Chair**

- a. Appeal of a decision made by the Anesthesia Department Chair must be submitted in writing by the complainant to the Anesthesia Department Chair, ***[insert applicable supervisory committees]***, and the Medical Executive Committee.

**9. Rules of Order (Parliamentary Procedure)**

- a. Any parliamentary questions not addressed in these Rules and Regulations or the Medical Staff Bylaws, will be subject to ***[insert applicable parliamentary standards, e.g., Robert's Rules of Order, Sturgis' Standard Code of Parliamentary Procedure]***.

**10. Amendments to Anesthesia Department Rules and Regulations**

- a. The Anesthesia Department Rules and Regulations may be amended at any regular Anesthesia Department meeting providing that a copy of the proposed amendment has been given to each voting member at least ***[number, e.g., 10]*** days prior to the scheduled meeting. A ***[number, e.g., 2/3]*** vote of those present is required for the adoption of each proposed amendment.

**11. Compliance with Medical Staff Bylaws and Rules and Regulation**

- a. Anesthesia Department Rules and Regulations must reflect the Medical Staff Bylaws and Medical Staff Rules and Regulations.

**DISCLAIMER**

This template is designed to be used as a guide for policy development. Each individual facility is responsible for and determines the level of detail and applicability. Identify any gaps between this template policy and your practice and carefully consider any unintended consequences. This information is provided as a service to our members and does not constitute legal advice. Federal, state, and local law and regulations should be consulted. Each individual utilizing this resource should consult with legal counsel in his or her state (or the State in which you intend to practice) to be properly advised on any laws or regulations governing his or her business practices.

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