



CRNA JOB DESCRIPTION

Reports to: AAPA MD Site Leader, AAPA Physicians Medically Directing Cases, CRNA Personnel Director, CRNA Director, and CRNA Manager

Education and Qualifications:

- Graduation from a nurse anesthesia educational program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) or its predecessor.
- Certification by the National Board of Certification and Recertification for Nurse Anesthetists, or, if pending initial certification, evidence of graduation from an approved nurse anesthesia educational program.
- Minnesota licensure as a registered nurse and Advanced Practice Registered Nurse, CRNA. Compliance with Minnesota regulatory requirements for advanced practice in Minnesota.
- Current ACLS and BLS certifications (PALS certification desirable).

Knowledge and Skills:

- Demonstrated verbal, written, and interpersonal communication skills.
- Commitment to active participation in shared accountability and decision making for the continuous improvement of nurse anesthesia practice.
- Additional certification and continuing education as needed to maintain proficiency in current nurse anesthesia practice.
- Knowledge of changing and current issues, and techniques, in anesthesia.
- Knowledge and skill in the use of computers and electronic medical records.
- Exhibit behavior consistent with AAPA's mission, code of conduct, and facility expectations always.
- Complete required education to facilitate regulatory readiness and promote a culture of safety per AAPA Education Standard for CRNAs ([P-4.01](#)).

Physical Requirements/Ability to:

- Lift 25 pounds.
- Perform nurse anesthetist pre-anesthesia evaluation of pediatric and adult patients.
- Administer anesthesia under the medical direction of an AAPA anesthesiologist.
- Execute procedures (e.g., IV starts, intubations) needed during anesthesia care.
- Maintain constant vigilance of patient's status in the operating room at all times.
- Perform emergency resuscitation care on newborn, pediatric, and adult patients as appropriate to role of CRNA.
- Work rotating shifts up to 24 hours per day at hospitals and/or surgery centers.
- Arrive to facility on time and ready to work at start of designated shift.
- Respond to facility within timeframe designated in facility contract.



Duties:

Case Preparedness

1. Complete ASA initial and interim equipment checklists.
2. Obtain and check other equipment appropriate for case; obtain appropriate medications.
3. Complete line setups before case.
4. Discuss and prepare anesthesia plan with the anesthesiologist, including but not limited to agents, monitoring, fluid therapy (i.e., crystalloid, colloids, blood products), airway management, reversal of neuromuscular blockade, and transfer to post anesthesia care unit.

Event Management

A. Events requiring the presence of case anesthesiologist (if not immediately available, CRNA must contact schedule runner):

1. Any significant vital sign change (e.g., anything which was previously identified by the case anesthesiologist, or anything which adversely influences perfusion and/or ventilation)
2. Any adverse drug reaction
3. Laryngospasm
4. Request of surgeon, physician, or other operating room staff
5. Induction
6. Anytime a double-lumen endotracheal tube requires manipulation

B. Events requiring notification of case anesthesiologist:

1. Prior to leaving the holding room at Children's Hospital
2. Patient transport when the patient is still anesthetized
3. Initiation or dosage change of continuous infusions of vasoactive medications
4. Administration of colloids or blood products
5. Procedural change (e.g., laparoscopy to laparotomy)
6. Prior to the use of Narcan (naloxone)
7. Change in patient position
8. Emergence (i.e., peri-emergence period)

Procedural Requirements

1. CRNAs should assist in pre-op with IV starts, blocks, lines, etc., as time and availability allow.
2. The pre-op antibiotic infusion must be started within 60 minutes of incision unless otherwise indicated.
3. Provision of supplemental oxygen for patient transport unless physician approves otherwise.
4. Adherence to drug administration protocols (e.g., Vancomycin).
5. Supervision of student nurse anesthetists by an experienced, credentialed CRNA always.
6. Any medications that are 'pre-drawn' must be labeled with the name, concentration, and date.
7. Monitor blood glucose levels for all Type I and Type II diabetic patients. Adherence to hospital orders for insulin therapy as indicated. Report most recent blood sugar to PACU staff upon admission to PACU.
8. Consider inserting a molar bite block (rolled gauze or other product) during emergence to prevent dental damage.



Documentation Standards

1. The time the pre-op antibiotic infusion is started and infused/completed must be documented in the designated space.
2. Train-of-four neuromuscular blockade monitoring.
3. Positioning and any change in position.
4. Frequent checks of pressure points, especially the face, eyes, and lips during prone cases.
5. Any pre-existing injury or complaint -- prior to induction.
6. Any rhythm disturbances documented with cardiac rhythm strip.
7. Insertion site of all lines, including peripheral IVs.
8. Infusion site of all vasoactive medications and supplemental potassium (KCl).
9. Completion of quality report forms.
10. Other documentation per hospital protocol or department requirements.
11. The first and last name of the supervising/referral physician must be documented when performing duties in areas outside of the anesthesiologist's supervision (e.g., emergency room, ICU).
12. The operative procedure must be completely and clearly PRINTED on the anesthesia record.
13. All chart items including start and stop times and needed billing documentation.
14. Temperature monitoring is not required for MAC cases or cases less than 30 minutes in duration.

AREA: Personnel	EFFECTIVE DATE: 4/2014
POLICY NUMBER: P-7.00	REVIEWED/UPDATED: 8/20/2016, 1/1/2021, 6/20/2023
AUTHOR(S): Dottie Garvin, RN Clinical Systems Director	APPROVED BY: Thomas LaBerge, MD AAPA CRNA Personnel Director Julie Bjork, CRNA AAPA CRNA Director
WEBSITE UPDATED: 7/5/2023	APPLIES TO: All CRNAs