(a) Only those registered nurses who meet the qualifications as outlined in Paragraph (b) of this Rule may perform nurse anesthesia activities outlined in Paragraph (c) of this Rule.

(b) Qualifications and Definitions:
   (1) The registered nurse who completes a program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs, is credentialed as a certified registered nurse anesthetist by the Council on Certification of Nurse Anesthetists, and who maintains recertification through the Council on Recertification of Nurse Anesthetists, may perform nurse anesthesia activities in collaboration with a physician, dentist, podiatrist, or other lawfully qualified health care provider, but may not prescribe a medical treatment regimen or make a medical diagnosis except under the supervision of a licensed physician; and
   (2) Collaboration is a process by which the certified registered nurse anesthetist works with one or more qualified health care providers, each contributing his or her respective area of expertise consistent with the appropriate occupational licensure laws of the State and according to the established policies, procedures, practices and channels of communication which lend support to nurse anesthesia services and which define the role(s) and responsibilities of the qualified nurse anesthetist within the practice setting. The individual nurse anesthetist maintains accountability for the outcome of his or her actions.

(c) Nurse Anesthesia activities and responsibilities which the appropriately qualified registered nurse anesthetist may safely accept are dependent upon the individual's knowledge and skills and other variables in each practice setting as outlined in 21 NCAC 36 .0224(a). These activities include:
   (1) Preanesthesia preparation and evaluation of the client to include:
      (A) performing a pre-operative health assessment;
      (B) recommending, requesting and evaluating pertinent diagnostic studies; and
      (C) selecting and administering preanesthetic medications.
   (2) Anesthesia induction, maintenance and emergence of the client to include:
      (A) securing, preparing and providing safety checks on all equipment, monitors, supplies and pharmaceutical agents used for the administration of anesthesia;
      (B) selecting, implementing, and managing general anesthesia; monitored anesthesia care; and regional anesthesia modalities, including administering anesthetic and related pharmaceutical agents, consistent with the client's needs and procedural requirements;
      (C) performing tracheal intubation, extubation and providing mechanical ventilation;
      (D) providing perianesthetic invasive and non-invasive monitoring, recognizing abnormal findings, implementing corrective action, and requesting consultation with appropriately qualified health care providers as necessary;
      (E) managing the client's fluid, blood, electrolyte and acid-base balance; and
      (F) evaluating the client's response during emergency from anesthesia and implementing pharmaceutical and supportive treatment to ensure the adequacy of client recovery from anesthesia.
   (3) Postanesthesia Care of the client to include:
      (A) providing postanesthesia follow-up care, including evaluating the client's response to anesthesia, recognizing potential anesthetic complications, implementing corrective actions, and requesting consultation with appropriately qualified health care professionals as necessary;
      (B) initiating and administering respiratory support to ensure adequate ventilation and oxygenation in the immediate postanesthesia period;
      (C) initiating and administering pharmacological or fluid support of the cardiovascular system during the immediate postanesthesia period;
      (D) documenting all aspects of nurse anesthesia care and reporting the client's status, perianesthetic course, and anticipated problems to an appropriately qualified postanesthetic health care provider who assumes the client's care following anesthesia consistent with 21 NCAC 36 .0224(f); and
      (E) releasing clients from the postanesthesia care or surgical setting as per established agency policy.

(d) Other clinical activities for which the qualified registered nurse anesthetist may accept responsibility include, but are not limited to:
inserting central vascular access catheters and epidural catheters;
identifying, responding to and managing emergency situations, including initiating and participating in
cardiopulmonary resuscitation;
providing consultation related to respiratory and ventilatory care and implementing such care
according to established policies within the practice setting; and
initiating and managing pain relief therapy utilizing pharmaceutical agents, regional anesthetic
techniques and other accepted pain relief modalities according to established policies and protocols
within the practice setting.

History Note: Authority G.S. 90-171.20(4); 90-171.20(7); 90-171.21; 90-171.23; 90-171.42(b);
Eff. July 1, 1993;
Temporary Amendment Eff. July 25, 1994 for a period of 180 days or until the permanent rule
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