17 April 2006

Juan Quintana, CRNA
Texas Association of Nurse Anesthetists
701 Brazos Street, Suite 670
Austin, TX 78701

Dear Mr. Quintana:

This letter is in reference to the Texas Association of Nurse Anesthetists’ (TANA’s) request for information on the practice of certified registered nurse anesthetists (CRNAs) in the State of Texas. You specifically requested information related to pain management services provided by CRNAs that includes, but is not limited to, continuous femoral nerve blocks (CFNBs).

The CRNA’s authorization to practice in an advanced practice role is derived from the Nursing Practice Act and his/her educational preparation as a nurse anesthetist. Like physicians, CRNAs are credentialed to practice in facilities (e.g., hospitals or ambulatory surgical centers) by medical staff bylaws or institutional policies. These policies do not constitute physician delegation. Section 301.002 of the Nursing Practice Act (Texas Occupations Code) provides a definition of professional nursing that includes a statement that physician orders are required to administer medications; however, when the nurse carries out the order, it becomes a nursing act for which the registered nurse is responsible and accountable. Thus, a CRNA must have a physician’s order to administer anesthesia or an anesthesia-related service, but there is no requirement that the order specify the drugs, dosages, or routes of administration because these functions are within the CRNA’s scope of practice.

Section 157.058 of the Medical Practice Act (Texas Occupations Code) codifies the practice of CRNAs as follows:

§157.058. Delegation to Certified Registered Nurse Anesthetist

(a) In a licensed hospital or ambulatory surgical center, a physician may delegate to a certified registered nurse anesthetist the ordering of drugs and devices necessary for the nurse anesthetist to administer an anesthetic or an anesthesia-related service ordered by the physician [emphasis added].

(b) The physician’s order for anesthesia or anesthesia-related services is not required to specify a drug, dose, or administration technique [emphasis added].

(c) Pursuant to the physician’s order and in accordance with facility policies or medical staff bylaws, the nurse anesthetist may select, obtain, and administer those drugs and apply the medical devices appropriate to accomplish the order and maintain the patient within a sound physiological status.

(d) This section shall be liberally construed to permit the full use of safe and effective medication orders to use the skills and services of certified registered nurse anesthetists.

The aforementioned statute expressly permits CRNAs to select, obtain and administer anesthesia and anesthesia-related medications and apply appropriate medical devices necessary to accomplish the order and...
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maintain the patient within a sound physiological status. The CRNA may carry out these functions pursuant to a physician’s order for anesthesia or an anesthesia-related service that does not have to be drug-specific, dose-specific, or administration technique-specific. These functions are appropriate for CRNAs based on their advanced educational preparation.

Rule 221.12 of the Board’s Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice, reproduced in pertinent part for you below, addresses the advanced practice nurse’s (including the CRNA’s) scope of practice.

§221.12. Scope of Practice.
The advanced practice nurse provides a broad range of health services, the scope of which shall be based upon educational preparation, continued advanced practice experience and the accepted scope of professional practice of the particular specialty area. Advanced practice nurses practice in a variety of settings and, according to their practice specialty and role, they provide a broad range of health care services to a variety of patient populations.

(1) The scope of practice of particular specialty areas shall be defined by national professional specialty organizations or advanced practice nursing organizations recognized by the Board. The advanced practice nurse may perform only those functions which are within that scope of practice and which are consistent with the Nursing Practice Act, Board rules, and other laws and regulations of the State of Texas.

For the role and specialty of nurse anesthesia, the Board refers to the scope of practice as defined by the American Association of Nurse Anesthetists (AANA). This statement clearly states that “the management of acute and chronic pain through the performance of selected diagnostic and therapeutic blocks or other forms of pain management” is within the CRNA’s scope of practice. The Board would consider pain management services, including but not limited to CFNBS, to be an anesthesia-related service that is within the CRNA’s scope of practice provided the particular CRNA has the educational preparation and competence to provide that service and all other laws and regulations governing the practice of CRNAs are met.

The Board of Nurse Examiners is the state agency with the legal authority to regulate the practice of advanced practice nurses in the State of Texas (Texas Occupations Code, Sec. 301.152). The board affirms that CRNAs may administer anesthesia and anesthesia-related services pursuant to a physician’s order and consistent with medical staff bylaws or policies.

I hope this information is helpful to you. If you require additional information or clarification, please feel free to contact me.

Sincerely,

[Signature]
Katherine A. Thomas, MN, RN  
Executive Director

cc: Lynda Woolbert, Coalition for Nurses in Advanced Practice  
Jim Willmann, Texas Nurses Association  
Jim Walker, Nurse anesthetia representative to BNE APN Advisory Committee  
Susan Willis, TANA representative to BNE APN Advisory Committee