

# CRNAs AS ADVANCED PRACTICE PROVIDERS IN CRITICAL CARE SETTINGS

The COVID-19 pandemic poses an existential threat to the United States (US) healthcare system, which will require non-traditional solutions. Certified Registered Nurse Anesthetists (CRNAs) are immediately available, highly skilled, advanced practice registered nurses (APRNs) who can easily fill roles across healthcare systems. They comprise over 50 percent of the US anesthesia workforce. Texas CRNAs are expert clinicians with highly specialized skills such as airway management, ventilator support, and advanced patient assessment. CRNAs, including the 4,500 right here in Texas, should be utilized as advanced care providers to expand the Nation's critical care workforce.



## THERE'S AN IMMEDIATE CLINICAL NEED

The COVID-19 virus results in severe illness in 15.7 percent of positive cases with a death rate of 1-3 percent. The Johns Hopkins Center for Health Security identified a potential need for 200,000 additional intensive care unit (ICU) beds during a moderate pandemic scenario. Many patients will need care in ventilator support and advanced airway management due to possible respiratory issues.

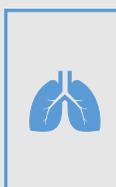
## SOLUTION



## CRNAs ARE HIGHLY QUALIFIED

CRNAs, on average, have 3 years of prior critical care nursing experience. This experience, along with their training and expertise in anesthesiology, positions CRNAs to help in many different areas. They are the perfect solution to fill the gap in caring for patients that need mechanical ventilation, experience managing ventilators, and oversee complex hemodynamic monitoring.

## CRNAs ARE EXPERTS IN DIFFERENT AREAS INCLUDING BUT NOT LIMITED TO:



### Advanced airway management

Highly skilled in intubation as well as the initiation and assessment of pharmacological interventions for patients in respiratory distress



### Advanced ventilator management

Experts in the conversion of operating room ventilators to ICU ventilators and oversight of patients needing ventilatory management.



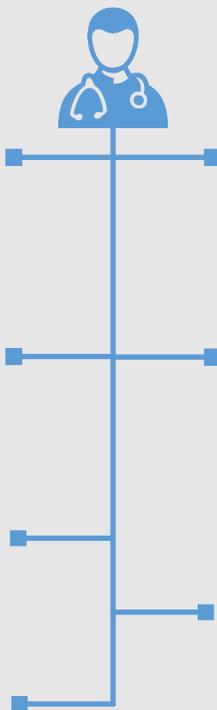
### Advanced hemodynamic monitoring

Knowledgeable in the titration of vasoactive medications and vascular volume resuscitation



### Leading a team of rapid responders

Leaders in providing lifesaving interventions



### Placement of invasive lines and monitors

These include central lines, peripherally inserted central catheters (PICC), and arterial lines



### Rapid advanced physical assessment

Allowing for triage of multiple patients' respiratory and hemodynamic status



### Consultation of critically ill patients

Highly experienced in assessing patients who are receiving paralytic medications, are in alternative positions such as prone, or who require deep levels of sedation outside that normally managed in the ICU

## MOBILIZING THIS ESSENTIAL WORKFORCE

Texas law (Tex. Occ. Code §157.058) does not require physician supervision of CRNAs unless dictated by facility bylaws or when otherwise mandated by federal law. CRNAs should be given authority to practice to their highest level of education and training. They should be integrated fully into the critical care team, and practice to the highest degree of clinical skill and expertise. CRNAs are the answer to rapidly, safely, and effectively fill in the critical care resources that facilities need to care for the patients being affected by the COVID-19 pandemic.

## PLEASE CONTACT TxANA WITH QUESTIONS OR CONCERNS

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