



American Association of
NURSE ANESTHESIOLOGY

CRNAs Asked to Assume Critical Care Responsibilities During the COVID-19 Pandemic

Position Statement

The American Association of Nurse Anesthesiology (AANA) recognizes the importance of patient safety at all times and the vital role that Certified Registered Nurse Anesthetists (CRNAs) play in planning for and providing safe patient care during the COVID-19 pandemic. Activation of an emergency pandemic response plan presents difficult and ethically challenging decisions regarding resource allocation, which requires sound judgment, critical-thinking, and unparalleled leadership skills. There is no question that during times of emergency and crisis, CRNAs are well-prepared to fulfill a multitude of healthcare-related and leadership roles. Accordingly, CRNAs should consider seeking out roles within their facilities that best fit their education, training, and skillset to support the needs of their patients, colleagues, and the community.

CRNAs can contribute at high levels to the development and implementation of emergency preparedness programs, policies and procedures, and interdisciplinary team communication processes to efficiently allocate resources and provide care during the COVID-19 pandemic. CRNAs' expertise in rapid systems assessment, vascular volume resuscitation, airway management, general and regional anesthesia and pain management, team coordination, and resource management is vital to supporting the facility's effort to respond to this unprecedented emergency.

As healthcare facilities escalate their response to the COVID-19 pandemic, CRNAs may also be asked to assume responsibilities that are different from their traditional anesthesia roles. Many facilities, for example, are asking CRNAs to assume responsibilities typically met by critical care registered nurses (RNs) (e.g., manage patients on ventilators in intensive care units, provide critical care in operating or emergency rooms). Given the extraordinary nature of the COVID-19 pandemic and the fact that CRNAs are licensed as RNs, CRNAs must carefully evaluate several factors, including, without limitation: current competencies, skillsets, and privileges; government directives or guidance, including any emergency management declarations or measures; compliance with state or applicable regulatory requirements for the specific role; and malpractice insurance coverage.¹ AANA recognizes the expertise that CRNAs can provide during this time of crisis. The AANA does not endorse the use of CRNAs in RN roles. Ultimately, the decision to assume new responsibilities is based on an array of considerations unique to the individual CRNA, facility, and state.

However, in the event that a CRNA decides to take on RN responsibilities, they may practice as an RN if the role is within their comfort level and within the scope of RN practice in the given facility and state, if the CRNA and facility can meet all regulatory and accreditation requirements for that role, and if the CRNA has completed all of the current competencies for the specific RN role. CRNAs, however, may be held to a higher standard of care and practice than RNs, consistent with the scope of practice for CRNAs in a given state. CRNAs cannot separate themselves from their advanced practice background and their highest level of education and training.

CRNAs should discuss with facility leaders (including risk management) current facility needs, value and capabilities of CRNAs, and potential concerns for all parties involved. If the CRNA chooses to assume new responsibilities, facilities, with CRNA input, should develop relevant and clear policies and procedures and communications to all facility leaders, staff, patients, and regulatory and accreditation surveyors in order to eliminate role confusion. Professional staff documents, such as bylaws and clinical privileges, may need modification.

While CRNAs possess a formidable knowledge base, it is imperative that all clinicians know their limitations, communicate those limitations to the healthcare team, and follow their ethical obligation to ensure competency for any role assumed. The [Code of Ethics for the Certified Registered Nurse Anesthetist](#) affirms, “As an independently licensed professional, the CRNA is responsible and accountable for judgments made and actions taken in his or her professional practice. Requests or orders by physicians, other healthcare professionals, or institutions do not relieve the CRNA of responsibility for judgments made or actions taken.”

The AANA has several documents to guide CRNAs as they evaluate whether they will assume these roles.

- [Considerations for Adding New Activities to Individual CRNA Scope of Practice](#)
- [Exploring a Common Practice Question: CRNAs Asked to Practice as RNs](#)
 - Factors listed here may be helpful in framing the discussion with your administration.
- [Scope of Nurse Anesthesia Practice](#)
- [Clinical Privileges and Other Responsibilities of CRNAs](#)
- [Code of Ethics for the CRNA](#)
 - [Code of Ethics for the CRNA: Overview and Resources](#)
- [Guidelines Regarding the Role of the Certified Registered Nurse Anesthetist in Mass Casualty Incident Preparedness and Response](#)
- [Patient-Driven Interdisciplinary Practice](#)
- [Anesthesia Staffing Considerations Checklist](#) (member login required)
- [Anesthesia Department Scope of Services, Considerations](#) (member login required)
- [AANA Employment Resources](#), including additional resources regarding negotiation
- [AANA Insurance Services](#)

During the COVID-19 pandemic, the AANA will continue to support CRNAs and healthcare facilities with relevant resources and considerations. The AANA will continue to update this document as additional guidance is provided by government decisionmakers, agencies, and other leading healthcare organizations.

¹ Please note that while the AANA is not suggesting that CRNAs should be mandated to work in RN roles, if the CRNA has malpractice liability insurance through AANA Insurance Services, the CRNA's Medical Protective (MedPro) policy provides coverage for work as a CRNA and as an RN. If you are not covered through AANA Insurance Services, be sure to check with your malpractice liability insurance carrier that your insurance coverage extends to your new responsibilities.