







Responses from a Member Survey Revealed the Countless Ways CRNAs Across New York Stepped Up During COVID-19 When Governor Cuomo Removed Unnecessary Practice Barriers:



CRNAs Care!

- · Volunteered to return from military retirement to help out
- Helping to educate nursing staff on advanced critical care skills
- Advocating for fellow CRNAs
- Distributing PPE to my community
- Created educational resources for CRNAs to prepare as ICU APRN



CRNAs Work!

- Training as intensivist
- Functioning as an APRN in the ICU (managing patients, writing orders, placing invasive monitoring like central line and arterial line access)
- Providing anesthesia care for covid-19 positive mothers in Labor & Delivery
- Covering 24 hour hospital airway calls and facilities not covered prior to COVID-19 outbreak
- Working as APRN in several ICUs or part of the Rapid Response Team and Airway Management Team



CRNAs Manage!

- With prior military combat medical experience, guiding policy and procedure, and developing a plan for the hospital's overwhelming needs with limited available resources
- · Organizing COVID 19 airway teams
- Converting Operating rooms into ICUs
- Consulting on prone turning and assisting pulmonologist with mechanical ventilation and parameters
- Overseeing sedation and prescribing, line placement, intubation, and vent management



CRNAs Strategize!

- · Consulting with manufacturers to produce PPE
- Establishing remote ICUs in various other parts of the hospital
- Standardizing airway management, procedures and supplies
- Coordinating the tracking of supplies as well as options for shortages
- · Creating distance learning and teaching on COVID-19



CRNAs: Ensuring Safe Anesthesia Care

WHY SURGEONS AND OTHER HEALTHCARE PROVIDERS RELY ON CRNAS

Certified Registered Nurse Anesthetists (CRNAs) are advanced practice registered nurses who collaborate with surgeons, obstetricians, anesthesiologists, dentists and other healthcare providers to deliver safe, high-quality and cost-effective anesthesia care to patients in virtually every healthcare setting.

Access to Care



CRNAs practice in **all 50 states** and in the military, safely providing more than 49 million anesthetics each year.

Patient Safety



A landmark study confirms that anesthesia care is equally safe regardless of whether it is provided by a CRNA working alone, an anesthesiologist working alone or a CRNA working with an anesthesiologist.*



Anesthesia care is **nearly 50x safer** than it was in the 1980s.**

This is due to **advancements in monitoring** technology, anesthetic drugs, provider education, and standards of care.

Risk Management





CRNAs are **educated**, **trained** and experienced in providing anesthesia care for complicated medical procedures and handling emergency situations.



As licensed professionals, CRNAs are responsible and accountable for decisions made and actions taken in their professional practice.



Case law shows that surgeons and other healthcare providers face no increase in liability when working with a CRNA versus an anesthesiologist.

For a surgeon (or other healthcare provider) to be liable for the acts of an anesthesia professional, the surgeon must control the actions of the CRNA or anesthesiologist and not merely supervise or direct them.



Courts apply the same standard to judge whether a surgeon is liable for the acts of a CRNA or an anesthesiologist.

CRNA malpractice liability premiums are 33 percent lower than 30 years ago, 68 percent lower when adjusted for inflation. CRNAs carry insurance coverage for all the services they provide.



Cost Savings

Healthcare facilities that hire anesthesiologists to supervise CRNAs in an effort to manage risk may more than triple the costs of anesthesia delivery without improving patient outcomes, lowering risk or reducing liability coverage costs.



*RTI

**Institute of Medicine

New York State Association of Nurse Anesthetis



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