NH Board of Nursing

Position Statement regarding the use of Nurse Anesthesiologist as a communication tool and optional descriptor for Certified Registered Nurse Anesthetists (CRNAs)

Information obtained from www.nurseanesthesiologistdescriptor.com (2018), MacKinnon, M., & Rodriguez, J.

Background:

In 1902, Dr. M.J. Seifert coined the term “anesthesiology” and defined it as “the science that treats the means and methods of producing various degrees of insensibility to pain with or without hypnosis. An Anesthetist is a technician and an Anesthesiologist is the specific authority on anesthesia and anesthetics”. Given the graduate level academic preparation, advanced practice skill set, and autonomous level of responsibility, Certified Registered Nurse Anesthetists are not technicians.

In American society, over 160 different professions utilize the suffix “-ologist” to simply denote experts in a field of study and is not exclusively associated with a medical degree or physicians. Audiologist, cosmetologist, technologist, epidemiologist, histologist are just some of numerous examples. John M. Wilke, Examining Attorney for the U.S. Patent and Trademark Office (USPTO), recently found that “anesthesiologist” alone was “descriptive in nature”1.

Within a global context, “Anesthetist” or “Anaesthetist” is the professional term for those administering anesthesia throughout much of the western world, including Great Britain, Canada, and Australia. No country, except the United States utilizes two different titles for independently practicing professionals who offer the same service.

Clarity with professional descriptors:

Further confusion has arisen by Anesthesiologist Assistants (AAs) utilizing the term “Anesthetist”, for both professional introductions and as evidenced by the URL of their professional website www.anesthetist.org. AAs meet the technical definition of the term “anesthetist” or “technician”, however AAs have vastly different foundational training and experience when compared to Nurses and Physicians and therefore by educational preparation

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1 Mike MacKinnon attempted to trademark “nurse anesthesiologist” in 2018. Registration was refused because the applied-for mark merely describes the provider of applicant's services. Trademark Act Section 2. Wilke goes on to infer that “anesthesiologist” is generic while “physician” and “nurse” are specific, and that both physicians and nurses deliver anesthesia services.
and law, cannot function as independent providers. It is both confusing and inaccurate to use the term “Anesthetist” to equally identify a licensed and often autonomous provider with a non-licensed provider who has a restricted skillset and who can only practice with Physician Anesthesiologist direction and delegation.

Given the above, when the descriptor “Nurse Anesthesiologist” is used, audiences know that it is a professional nurse who is an expert in anesthesia and distinguishes nurse anesthesiologists, physician anesthesiologists, dentist anesthesiologists, from anesthesiologist assistants. It is paramount that patients and public know who is delivering their care and use of the nurse anesthesiologist descriptor does just that: It identifies the foundational education of the provider and further identifies them as an expert in anesthesia.

**Evidence:**

Research from the American Society of Anesthesiologists confirms that 55% of the country does not recognize an “anesthesiologist” as a physician. Physicians who specialize in anesthesia have recognized this and have adopted their own accurate descriptor of “Physician Anesthesiologist”. Additionally, it is common for patients, surgeons, and even our perioperative colleagues to refer to CRNAs as an “anesthesiologist” while being fully cognizant of our Advanced Practice Registered Nurse education, advanced practice nurse licensure, and as credentialed members of medical staffs. In this context, the optional use of “Nurse Anesthesiologist” to describe CRNAs would provide transparency, remove confusion, and recognize CRNAs as fully qualified [and often autonomous] anesthesia providers.

**National Association Recognition:**

Given the clarity provided by the “Nurse Anesthesiologist” descriptor, the American Association of Nurse Anesthetists (AANA) has [by way of a thorough assessment by an Association selected task force] now recognizes “Nurse Anesthesiologist” as an optional descriptor for the profession. This title will be instrumental in accurately describing the profession, training, expertise, and scope of practice to the public. Furthermore, this transparent descriptor is essential for legislative progress, advocacy, and the continued safe and cost-effective care to the citizens of New Hampshire who would otherwise be unserved.

The optional “Nurse Anesthesiologist” descriptor does not seek to expand CRNA practice, demean another profession’s practice, or misrepresent the position and foundational education of CRNAs. Rather, it provides a transparent term to accurately describe the CRNA’s advanced practice nursing role, as well as our expertise in the provision of full-range and often autonomous anesthesia services.
Therefore:

The New Hampshire Board recognizes “Nurse Anesthesiologist” and “Certified Registered Nurse Anesthesiologist” as optional, accurate descriptors. It is not a title change and is not an attempt to create an expanded or misleading scope of practice. It is recognized at both the national and state level as a transparent and lawful term of address, introduction, and is permitted for use on personal and professional communications without sanction.