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Nurses and anaesthesia – caution urged

Proposals that nurses take over procedures including the administration of low-grade anaesthesia during bowel cancer screening to save costs need to be closely evaluated with patient safety at the forefront of any decisions, according to the Australian and New Zealand College of Anaesthetists (ANZCA) which is charged by government to set the standard in safe anaesthesia provision in Australia and New Zealand.

“While we recognise that health budgets are finite, the provision of anaesthesia is a medical role and any new or extended roles in the anaesthesia and perioperative care team should be developed, implemented and evaluated in a systematic and consistent way to ensure that patient safety remains paramount,” said ANZCA president, Dr Lindy Roberts.

“One of the reasons why anaesthesia in Australia is among the safest in the world is because of the extensive training that medical practitioners receive in order to become specialist anaesthetists.

“Administering anaesthesia requires complex skills, especially as the population gets older and sicker. Anaesthetists are trained to manage unexpected events such as breathing difficulties, inhalation of blood or stomach contents, unstable blood pressure or severe allergic reactions.”

The safety of anaesthesia, including sedation, should not be accepted as a given – it requires continued application and development of skills and knowledge. Safe and effective anaesthesia requires a full understanding of a patient's medical condition, which requires the knowledge of a medical practitioner.

Dr Roberts said ANZCA took very seriously its government-sanctioned role in setting the highest standards in the administration of anaesthesia and in anaesthesia training and should have a major input into any changes to health care roles.

“ANZCA will need to be closely involved in any decisions about changes in roles within a team based model,” Dr Roberts said.

The College has public guidelines (PS59: [Statement on Roles in Anaesthesia and Perioperative Care](#)) that provide a framework for discussion on the roles and responsibilities of health professionals in the anaesthesia and perioperative care teams. It states the provision of anaesthesia is a medical role.

The College also has public guidelines on [sedation](#) (PS09) which ensure every patient has a team looking after them which includes a doctor who can respond in the event of unexpected emergencies.

Dr Roberts said anaesthetists, in their broad-reaching roles within hospitals, were well-placed to help address inefficiencies in the health system.

“ANZCA is happy to work with government to address these,” Dr Roberts said.

For more information or to request interviews, please contact ANZCA Media Manager Ebru Yaman on +61 3 8517 5303, +61 408 259 369 or eyaman@anzca.edu.au. Follow us on Twitter [@ANZCA](#).