

2945--A

2013-2014 Regular Sessions

I N S E N A T E

January 25, 2013

Introduced by Sen. HANNON -- read twice and ordered printed, and when printed to be committed to the Committee on Higher Education -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the education law, in relation to providing for the licensing of anesthesiologist assistants and regulating the practice of such professionals

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. The education law is amended by adding a new section  
2 6529-a to read as follows:

3 S 6529-A. ANESTHESIOLOGIST ASSISTANTS. 1. DEFINITIONS. FOR THE  
4 PURPOSES OF THIS SECTION, THE FOLLOWING TERMS SHALL HAVE THE FOLLOWING  
5 MEANINGS:

6 (A) "ANESTHESIOLOGIST ASSISTANT" MEANS A PERSON WHO IS LICENSED AS AN  
7 ANESTHESIOLOGIST ASSISTANT PURSUANT TO THIS SECTION.

8 (B) "ANESTHESIOLOGIST" MEANS A PHYSICIAN WHO HAS SUCCESSFULLY  
9 COMPLETED A RESIDENCY IN ANESTHESIOLOGY APPROVED BY THE AMERICAN BOARD  
10 OF MEDICINE OF ANESTHESIOLOGY OR THE AMERICAN OSTEOPATHIC BOARD OF  
11 ANESTHESIOLOGY AND WHO IS ACTIVELY AND DIRECTLY ENGAGED IN THE CLINICAL  
12 PRACTICE OF MEDICINE AS AN ANESTHESIOLOGIST.

13 (C) "ADMINISTRATION OF ANESTHESIA IN THE HOSPITAL OR AMBULATORY SURGI-  
14 CAL CENTER" MEANS ANESTHESIA SERVICES SHALL BE DIRECTED BY AN ANESTHE-  
15 SIOLOGIST WHO HAS RESPONSIBILITY FOR THE CLINICAL ASPECTS OR ORGANIZA-  
16 TION AND DELIVERY OF ALL ANESTHESIA SERVICES PROVIDED BY THE HOSPITAL OR  
17 AMBULATORY SURGICAL CENTER. THAT ANESTHESIOLOGIST SHALL DIRECT THE  
18 ADMINISTRATION ASPECTS OF THE SERVICE, AND SHALL BE RESPONSIBLE, IN  
19 CONJUNCTION WITH THE MEDICAL STAFF, FOR RECOMMENDING TO THE GOVERNING  
20 BODY PRIVILEGES TO THOSE PERSONS QUALIFIED TO ADMINISTER ANESTHETICS,  
21 INCLUDING THE PROCEDURES EACH PERSON IS QUALIFIED TO PERFORM AND THE  
22 LEVELS OF REQUIRED SUPERVISION AS APPROPRIATE. FOR THE PURPOSES OF THIS

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets  
[ ] is old law to be omitted.

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1 SECTION, "ADMINISTRATION OF ANESTHESIA IN OFFICE-BASED SURGERY VENUES"  
2 MEANS THE ANESTHESIA COMPONENT OF THE MEDICAL OR DENTAL PROCEDURE SHALL  
3 BE SUPERVISED BY AN ANESTHESIOLOGIST WHO IS PHYSICALLY PRESENT AND  
4 AVAILABLE TO IMMEDIATELY DIAGNOSE AND TREAT THE PATIENT FOR ANESTHESIA  
5 COMPLICATIONS OR EMERGENCIES.

6 (D) "DEEP SEDATION" MEANS THE ADMINISTRATION OF MEDICATION BY THE  
7 ORAL, PARENTERAL OR INHALATION ROUTES WHICH RESULTS IN A CONTROLLED  
8 STATE OF DEPRESSED CONSCIOUSNESS ACCOMPANIED BY PARTIAL LOSS OF PROTEC-  
9 TIVE REFLEXES. THERE MAY BE AN INABILITY TO INDEPENDENTLY AND CONTIN-  
10 UOUSLY MAINTAIN AN OPEN AIRWAY AND/OR REGULAR BREATHING PATTERN WITH  
11 DEEP SEDATION, AND THE ABILITY TO APPROPRIATELY AND RATIONALLY RESPOND  
12 TO PHYSICAL STIMULI AND VERBAL COMMANDS IS LOST.

13 (E) "GENERAL ANESTHESIA" MEANS THE ADMINISTRATION OF A MEDICATION BY  
14 THE PARENTERAL OR INHALATION ROUTES WHICH RESULTS IN A CONTROLLED STATE  
15 OF UNCONSCIOUSNESS ACCOMPANIED BY A COMPLETE LOSS OF PROTECTIVE REFLEXES  
16 INCLUDING LOSS OF THE ABILITY TO INDEPENDENTLY AND CONTINUOUSLY MAINTAIN  
17 PATIENT AIRWAY AND A REGULAR BREATHING PATTERN. THERE IS ALSO AN  
18 INABILITY TO RESPOND PURPOSEFULLY TO VERBAL COMMANDS AND/OR TACTILE  
19 STIMULATION.

20 (F) "HOSPITAL" MEANS AN INSTITUTION OR FACILITY POSSESSING A VALID  
21 OPERATING CERTIFICATE ISSUED PURSUANT TO ARTICLE TWENTY-EIGHT OF THE  
22 PUBLIC HEALTH LAW.

23 (G) "AMBULATORY SURGICAL CENTER" MEANS AN INSTITUTION OR FACILITY  
24 POSSESSING A VALID OPERATING CERTIFICATE ISSUED PURSUANT TO ARTICLE  
25 TWENTY-EIGHT OF THE PUBLIC HEALTH LAW.

26 (H) "IMMEDIATELY AVAILABLE" MEANS REMAINING IN PHYSICAL PROXIMITY SO  
27 AS TO ALLOW THE ANESTHESIOLOGIST TO RETURN TO RE-ESTABLISH DIRECT  
28 CONTACT WITH THE PATIENT IN ORDER TO MEET THE PATIENT'S MEDICAL NEEDS  
29 AND ADDRESS ANY URGENT OR EMERGENT CLINICAL PROBLEMS.

30 (I) "MODERATE SEDATION" MEANS A DRUG-INDUCED DEPRESSION OF CONSCIOUS-  
31 NESS DURING WHICH (I) THE PATIENT RESPONDS PURPOSEFULLY TO VERBAL  
32 COMMANDS, EITHER ALONE OR ACCOMPANIED BY LIGHT TACTILE STIMULATION; (II)  
33 NO INTERVENTIONS ARE REQUIRED TO MAINTAIN A PATIENT AIRWAY; (III) SPON-  
34 TANEOUS VENTILATION IS ADEQUATE; AND (IV) THE PATENT'S CARDIOVASCULAR  
35 FUNCTION IS USUALLY MAINTAINED WITHOUT ASSISTANCE.

36 (J) "MONITORING" MEANS THE CONTINUAL CLINICAL OBSERVATION OF A PATIENT  
37 AND THE USE OF INSTRUMENTS TO MEASURE, DISPLAY, AND RECORD THE VALUES OF  
38 CERTAIN PHYSIOLOGIC VARIABLES SUCH AS PULSE, OXYGEN SATURATION, LEVEL OF  
39 CONSCIOUSNESS, BLOOD PRESSURE AND RESPIRATION.

40 (K) "OFFICE-BASED SURGERY" MEANS ANY SURGICAL OR OTHER INVASIVE PROCE-  
41 DURE, REQUIRING GENERAL ANESTHESIA, MODERATE SEDATION OR DEEP SEDATION,  
42 AND ANY LIPOSUCTION PROCEDURE, WHERE SUCH SURGICAL OR OTHER INVASIVE  
43 PROCEDURE OR LIPOSUCTION IS PERFORMED BY A LICENSEE IN A LOCATION OTHER  
44 THAN A HOSPITAL, EXCLUDING MINOR PROCEDURES AND PROCEDURES REQUIRING  
45 MINIMAL SEDATION.

46 (L) "PATIENT" MEANS AN INDIVIDUAL WHO IS UNDER THE CARE OF A PHYSICIAN  
47 IN A LICENSED FACILITY OR IN AN OFFICE, UNDER THE CARE OF A PHYSICIAN,  
48 DENTIST, ORAL SURGEON OR PODIATRIST.

49 (M) "PERI-OPERATIVE PERIOD" MEANS THE PERIOD OF TIME COMMENCING UPON  
50 THE MEDICAL EVALUATION OF THE PATIENT BEFORE SURGERY AND ENDING UPON THE  
51 PATIENT'S MEDICAL DISCHARGE FROM THE RECOVERY ROOM.

52 (N) "PHYSICALLY PRESENT" BY AN ANESTHESIOLOGIST MEANS THE ABILITY TO  
53 REACT AND RESPOND IN AN IMMEDIATE AND APPROPRIATE MANNER SO AS TO MAKE  
54 POSSIBLE THE CONTINUOUS EXERCISE OF MEDICAL JUDGMENT THROUGHOUT THE  
55 ADMINISTRATION OF THE ANESTHESIA.

1 (O) "SUPERVISION" MEANS THAT AN ANESTHESIOLOGIST SHALL DIRECT THE  
2 ANESTHESIA SERVICES THAT THE ANESTHESIOLOGIST ASSISTANT IS PERFORMING  
3 INCLUDING BUT NOT LIMITED TO A PRE-ANESTHETIC EXAMINATION AND EVALU-  
4 ATION, PRESCRIBING THE ANESTHESIA, INCLUDING POST-OPERATIVE MEDICATIONS  
5 AS NEEDED FOR PAIN AND DISCOMFORT, INCLUDING NAUSEA AND VOMITING, AND  
6 SHALL BE IMMEDIATELY AVAILABLE DURING THE ENTIRE PERI-OPERATIVE PERIOD  
7 FOR DIAGNOSIS, TREATMENT, AND MANAGEMENT OF ANESTHESIA-RELATED COMPLI-  
8 CATIONS OR EMERGENCIES, AND ASSURE THE PROVISION OF INDICATED POST-AN-  
9 ESTHESIA CARE.

10 2. LICENSURE. FOR ISSUANCE OF A LICENSE TO PRACTICE AS A LICENSED  
11 ANESTHESIOLOGIST ASSISTANT THE APPLICANT SHALL FULFILL THE FOLLOWING  
12 REQUIREMENTS:

13 (A) APPLICATION: FILE AN APPLICATION WITH THE DEPARTMENT WHICH SHALL  
14 BE IN SUCH FORM AS PROVIDED BY THE COMMISSIONER;

15 (B) AGE: BE AT LEAST TWENTY-ONE YEARS OF AGE AND OF GOOD MORAL CHARAC-  
16 TER;

17 (C) EDUCATION:

18 (I) HAVE OBTAINED A BACHELOR'S OR HIGHER DEGREE APPROVED BY THE BOARD  
19 OF MEDICINE;

20 (II) HAVE SATISFACTORILY COMPLETED AN ANESTHESIOLOGIST ASSISTANT  
21 PROGRAM THAT IS ACCREDITED BY THE COMMISSION ON ACCREDITATION OF ALLIED  
22 HEALTH EDUCATION PROGRAMS OR BY A PREDECESSOR OR SUCCESSOR ENTITY;

23 (III) PASSED THE CERTIFYING EXAMINATION ADMINISTERED BY AND OBTAINED  
24 ACTIVE CERTIFICATION FROM THE NATIONAL COMMISSION ON CERTIFICATION OF  
25 ANESTHESIOLOGIST ASSISTANTS OR A SUCCESSOR ENTITY; AND

26 (IV) BIENNIALLY COMPLETE FORTY HOURS OF CONTINUING MEDICAL EDUCATION  
27 OR HOLD A CURRENT CERTIFICATE ISSUED BY THE NATIONAL COMMISSION ON  
28 CERTIFICATION OF ANESTHESIOLOGIST ASSISTANTS OR ITS SUCCESSOR; AND

29 (D) FEES: PAY TO THE DEPARTMENT A FEE OF ONE HUNDRED SEVENTY-FIVE  
30 DOLLARS FOR INITIAL LICENSURE AND A TRIENNIAL REGISTRATION FEE OF ONE  
31 HUNDRED FIFTY-FIVE DOLLARS.

32 3. USE OF TITLE. ONLY A PERSON LICENSED UNDER THIS SECTION SHALL USE  
33 THE TITLE "ANESTHESIOLOGIST ASSISTANT" OR USE THE LETTERS "A.A." AFTER  
34 HIS OR HER NAME.

35 4. PERFORMANCE OF ANESTHESIOLOGIST ASSISTANTS. THE PRACTICE OF ANESTH-  
36 ESIOLOGIST ASSISTANTS LICENSED UNDER THIS SECTION SHALL:

37 (A) INCLUDE THE ADMINISTRATION OF ANESTHESIA TO A PATIENT BUT ONLY  
38 UNDER THE SUPERVISION OF AN ANESTHESIOLOGIST WHO IS IMMEDIATELY AVAIL-  
39 ABLE;

40 (B) EACH ANESTHESIOLOGIST WHO AGREES TO ACT AS THE SUPERVISING ANESTH-  
41 ESIOLOGIST OF AN ANESTHESIOLOGIST ASSISTANT SHALL ADOPT A WRITTEN PRAC-  
42 TICE PROTOCOL WHICH DELINEATES THE SERVICES THAT THE ANESTHESIOLOGIST  
43 ASSISTANT IS AUTHORIZED TO PROVIDE AND THE MANNER IN WHICH THE ANESTHE-  
44 SIOLOGIST WILL SUPERVISE THE ANESTHESIOLOGIST ASSISTANT. THE ANESTHE-  
45 SIOLOGIST SHALL BASE THE PROVISIONS OF THE PROTOCOL ON CONSIDERATION OF  
46 RELEVANT QUALITY ASSURANCE STANDARDS, INCLUDING REGULAR REVIEW BY THE  
47 ANESTHESIOLOGIST OF THE MEDICAL RECORDS OF THE PATIENTS OF THE ANESTHE-  
48 SIOLOGIST ASSISTANT. THE SUPERVISING ANESTHESIOLOGIST SHALL SUPERVISE  
49 THE ANESTHESIOLOGIST ASSISTANT IN ACCORDANCE WITH THE TERMS OF THE  
50 PROTOCOL UNDER WHICH THE ASSISTANT PRACTICES AND THE RULES FOR SUPER-  
51 VISION OF ANESTHESIOLOGIST ASSISTANTS; AND

52 (C) BE CONSISTENT WITH POLICIES AND PROCEDURE APPROVED BY THE MEDICAL  
53 STAFF AND GOVERNING STAFF OF THE HEALTH CARE FACILITY OR FREE STANDING  
54 AMBULATORY SURGICAL CENTER DEFINED UNDER ARTICLE TWENTY-EIGHT OF THE  
55 PUBLIC HEALTH LAW WHERE APPLICABLE.

1 5. AN INDIVIDUAL WHO IS DULY ENROLLED IN A PROGRAM OF EDUCATIONAL  
2 PREPAREDNESS TO BECOME AN ANESTHESIOLOGIST ASSISTANT MAY ADMINISTER  
3 ANESTHESIA TO A PATIENT BUT ONLY UNDER THE DIRECT PERSONAL SUPERVISION  
4 OF AN ANESTHESIOLOGIST.

5 6. THE COMMISSIONER IS AUTHORIZED AND DIRECTED TO PROMULGATE REGU-  
6 LATIONS TO IMPLEMENT THE PROVISIONS OF THIS SECTION.

7 S 2. This act shall take effect on the first of the twelfth month  
8 which commences after this act shall have become a law; provided, howev-  
9 er, that effective immediately, the addition, amendment and/or repeal of  
10 any rule or regulation necessary for the implementation of this act on  
11 its effective date is authorized and directed to be made and completed  
12 on or before such effective date.