



## **STATEMENT ON REGIONAL ANESTHESIA & INVASIVE LINE PROCEDURES**

The American Academy of Anesthesiologist Assistants (AAAA) remains committed to patient safety as a primary goal. Certified anesthesiologist assistants (CAAs) work exclusively within the Anesthesia Care Team (ACT), a collaborative model where a physician anesthesiologist supervises and delegates certain tasks related to anesthesia delivery to a CAA.

The AAAA supports the right of the supervising physician anesthesiologist to delegate to a CAA the technical aspects of regional anesthesia (procedures that numb a specific area) and invasive monitoring procedures (methods for obtaining detailed, real-time information about a patient's physical condition).

Within the specialty practice of anesthesia, we hold that the term 'anesthesiologist' should be used exclusively for allopathic or osteopathic physicians who have completed an ACGME or COCA-accredited residency program in anesthesiology.

The decision on the most suitable anesthetic technique and monitoring methods for a particular patient is a medical judgment requiring the expertise of a physician anesthesiologist. CAAs can carry out the practical aspects of regional anesthesia and invasive line placements, roles essential to the efficient operation of the ACT. However, when performed by a CAA, a regional anesthesia or invasive line procedure must always be carried out under the supervision of, and with explicit consent from, the attending physician anesthesiologist.

This approach supports the AAAA's emphasis on patient safety and ensures that medical decisions are made by the most qualified professionals. We believe that such collaborative practices allow for the best patient outcomes.

The AAAA acknowledges that the relevant licensing and credentialing bodies ultimately decide the scope of practice in a given region and institution.