

S5780 HANNON Same as [A 6560 Schimminger \(MS\)](#)

Text Versions: [S 5780](#)

STATE OF NEW YORK

5780

2017-2018 Regular Sessions

IN SENATE

April 28, 2017

Introduced by Sen. HANNON -- read twice and ordered printed, and
when printed to be committed to the Committee on Higher Education

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
Assem- bly, 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 § 6529-a. Anesthesiologist assistants. 1. Definitions. For
4 the purposes of this section, the following terms shall have the
5 following

6 meanings:

7 (a) "Anesthesiologist assistant" means a person who is licensed as
8 an anesthesiologist assistant pursuant to this section.

9 (b) "Anesthesiologist" means a physician who has
10 successfully

11 completed a residency in anesthesiology approved by the American
12 Board of Medicine of Anesthesiology or the American Osteopathic Board
13 of

14 Anesthesiology and who is actively and directly engaged in the
15 clinical

16 practice of medicine as an anesthesiologist.

17 (c) "Administration of anesthesia in the hospital or ambulatory
18 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
23 section, "administration of anesthesia in office-based surgery
venues"
24 means the anesthesia component of the medical or dental procedure
shall

EXPLANATION--Matter in italics (underscored) is new; matter in
brackets

[-] is old law to be omitted.

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1 be supervised by an anesthesiologist who is physically present
and
2 available to immediately diagnose and treat the patient for
anesthesia
3 complications or emergencies.
4 (d) "Deep sedation" means the administration of medication by
the
5 oral, parenteral or inhalation routes which results in a
controlled
6 state of depressed consciousness accompanied by partial loss of
protec-
7 tive reflexes. There may be an inability to independently and
contin-
8 uously maintain an open airway and/or regular breathing pattern
with
9 deep sedation, and the ability to appropriately and rationally
respond
10 to physical stimuli and verbal commands is lost.
11 (e) "General anesthesia" means the administration of a medication
by
12 the parenteral or inhalation routes which results in a controlled
state
13 of unconsciousness accompanied by a complete loss of protective
reflexes
14 including loss of the ability to independently and continuously
maintain

15 patient airway and a regular breathing pattern. There is also
an
16 inability to respond purposefully to verbal commands and/or
tactile
17 stimulation.
18 (f) "Hospital" means an institution or facility possessing a
valid
19 operating certificate issued pursuant to article twenty-eight of
the
20 public health law.
21 (g) "Ambulatory surgical center" means an institution or
facility
22 possessing a valid operating certificate issued pursuant to
article
23 twenty-eight of the public health law.
24 (h) "Immediately available" means remaining in physical proximity
so
25 as to allow the anesthesiologist to return to re-establish
direct
26 contact with the patient in order to meet the patient's medical
needs
27 and address any urgent or emergent clinical problems.
28 (i) "Moderate sedation" means a drug-induced depression of
conscious-
29 ness during which (i) the patient responds purposefully to
verbal
30 commands, either alone or accompanied by light tactile stimulation;
(ii)
31 no interventions are required to maintain a patient airway; (iii)
spon-
32 taneous ventilation is adequate; and (iv) the patient's
cardiovascular
33 function is usually maintained without assistance.
34 (j) "Monitoring" means the continual clinical observation of a
patient
35 and the use of instruments to measure, display, and record the values
of
36 certain physiologic variables such as pulse, oxygen saturation, level
of
37 consciousness, blood pressure and respiration.
38 (k) "Office-based surgery" means any surgical or other invasive
proce-
39 sure, requiring general anesthesia, moderate sedation or deep
sedation,
40 and any liposuction procedure, where such surgical or other
invasive
41 procedure or liposuction is performed by a licensee in a location
other
42 than a hospital, excluding minor procedures and procedures
requiring
43 minimal sedation.
44 (l) "Patient" means an individual who is under the care of a
physician
45 in a licensed facility or in an office, under the care of a
physician,
46 dentist, oral surgeon or podiatrist.

47 (m) "Peri-operative period" means the period of time commencing
upon
48 the medical evaluation of the patient before surgery and ending upon
the
49 patient's medical discharge from the recovery room.

50 (n) "Physically present" by an anesthesiologist means the ability
to
51 react and respond in an immediate and appropriate manner so as to
make
52 possible the continuous exercise of medical judgment throughout
the
53 administration of the anesthesia.

54 (o) "Supervision" means that an anesthesiologist shall direct
the
55 anesthesia services that the anesthesiologist assistant is
performing
56 including but not limited to a pre-anesthetic examination and
evalu-

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1 ation, prescribing the anesthesia, including post-operative
medications
2 as needed for pain and discomfort, including nausea and vomiting,
and
3 shall be immediately available during the entire peri-operative
period
4 for diagnosis, treatment, and management of anesthesia-related
compli-
5 cations or emergencies, and assure the provision of indicated post-
an-
6 esthesia care.

7 2. Licensure. For issuance of a license to practice as a
licensed

8 anesthesiologist assistant the applicant shall fulfill the
following

9 requirements:

10 (a) Application: file an application with the department which
shall

11 be in such form as provided by the commissioner;

12 (b) Age: be at least twenty-one years of age and of good moral
charac-

13 ter;

14 (c) Education:

15 (i) have obtained a bachelor's or higher degree approved by the
board

16 of medicine;

17 (ii) have satisfactorily completed an anesthesiologist
assistant

18 program that is accredited by the commission on accreditation of
allied

19 health education programs or by a predecessor or successor entity;

20 (iii) passed the certifying examination administered by and
obtained

21 active certification from the national commission on certification
of

22 anesthesiologist assistants or a successor entity; and

23 (iv) biennially complete forty hours of continuing medical
education
24 or hold a current certificate issued by the national commission
on
25 certification of anesthesiologist assistants or its successor; and
26 (d) Fees: pay to the department a fee of one hundred seventy-
five
27 dollars for initial licensure and a triennial registration fee of
one
28 hundred fifty-five dollars.
29 3. Use of title. Only a person licensed under this section shall
use
30 the title "anesthesiologist assistant" or use the letters "A.A."
after
31 his or her name.
32 4. Performance of anesthesiologist assistants. The practice of
anesth-
33 esiologist assistants licensed under this section shall:
34 (a) include the administration of anesthesia to a patient but
only
35 under the supervision of an anesthesiologist who is immediately
avail-
36 able;
37 (b) each anesthesiologist who agrees to act as the supervising
anesth-
38 esiologist of an anesthesiologist assistant shall adopt a written
prac-
39 tice protocol which delineates the services that the
anesthesiologist
40 assistant is authorized to provide and the manner in which the
anesthe-
41 siologist will supervise the anesthesiologist assistant. The
anesthe-
42 siologist shall base the provisions of the protocol on consideration
of
43 relevant quality assurance standards, including regular review by
the
44 anesthesiologist of the medical records of the patients of the
anesthe-
45 siologist assistant. The supervising anesthesiologist shall
supervise
46 the anesthesiologist assistant in accordance with the terms of
the
47 protocol under which the assistant practices and the rules for
super-
48 vision of anesthesiologist assistants; and
49 (c) be consistent with policies and procedure approved by the
medical
50 staff and governing staff of the health care facility or free
standing
51 ambulatory surgical center defined under article twenty-eight of
the
52 public health law where applicable.
53 5. An individual who is duly enrolled in a program of
educational
54 preparedness to become an anesthesiologist assistant may
administer

55 anesthesia to a patient but only under the direct personal
supervision
56 of an anesthesiologist.

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1 6. The commissioner is authorized and directed to promulgate
regu-
2 lations to implement the provisions of this section.

3 § 2. This act shall take effect on the first day of the twelfth
month

4 which commences after this act shall have become a law; provided,
howev-

5 er, that effective immediately, the addition, amendment and/or repeal
of

6 any rule or regulation necessary for the implementation of this act
on

7 its effective date are authorized and directed to be made and
completed

8 on or before such effective date.