

...it does appear the AANA is entering into a new campaign of misinformation on scope of practice – one that we, as we always have, will meet with sound science and facts. We saw it during our campaign to preserve high-quality care in the VA. We saw it in New York last year. We have seen it this year in the seven states where the AANA and its state societies attempted to dismantle existing patient safety standards that ensured patient access to physician-led, team-based models of anesthesia. It didn't persuade anyone at the VA or in New York or so far in any of the states where it has been introduced. In each case, physician-delivered and physician-led care was preserved.

In debate after debate, ASA has successfully responded to the misinformation the AANA foists upon state and federal policymakers. We point out that "nurse anesthesiologist" is a shameless term created to confuse patients. We explain the vast difference in education, skills and training between our medical specialty and nurse anesthetists. We present the fact that the data cited by the AANA to suggest equivalency in care is from brazen, self-funded advocacy studies paid for by the AANA itself. We give policymakers the independent studies that show superior outcomes with the involvement of anesthesiologists. And team-based, physician led anesthesia care is now a World Health Organization standard. The AANA and its state societies throw a lot of contempt at our medical specialty. But the good news is that with professionalism and facts, we are winning. And when we win, our patients win.

The AANA campaign (through its state component associations) is little more than vitriol. It is about appropriating the name of our medical specialty, disrupting successful team-based models, and ridiculous accusations of "fraud," "overcompensation" and "barriers." For ASA and our members, it is all about our patients and what is best for them.

The AANA positions simply do not reflect reality. Throughout the country, our members continue to work successfully with nurse anesthetists in a team-based model that frequently also includes anesthesiologist assistants. We are grateful to work with all members of the care team. ASA is committed to preserving and strengthening physician-delivered and physician-led team-based models because that is what is best for our patients. We won't be distracted from this mission.

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