1	A bill to be entitled
2	An act relating to anesthesiologist assistants;
3	amending ss. 458.3475 and 459.023, F.S.; revising the
4	definitions of the terms "anesthesiologist" and
5	"direct supervision"; revising requirements for the
6	written protocol between an anesthesiologist assistant
7	and a supervising anesthesiologist; revising
8	provisions related to duties and functions
9	anesthesiologist assistants may perform; providing
10	that a certain applicant for clinical hospital
11	privileges may not be denied such privileges if the
12	applicant's supervising anesthesiologist is a staff
13	member in good standing at that hospital, with an
14	exception; revising licensure requirements for
15	anesthesiologist assistants; providing an effective
16	date.
17	
18	Be It Enacted by the Legislature of the State of Florida:
19	
20	Section 1. Paragraphs (a) and (g) of subsection (1),
21	paragraph (b) of subsection (2), subsection (3), and paragraphs
22	(a) and (b) of subsection (6) of section 458.3475, Florida
23	Statutes, are amended to read:
24	458.3475 Anesthesiologist assistants
25	(1) DEFINITIONSAs used in this section, the term:
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26 "Anesthesiologist" means an allopathic or osteopathic (a) 27 physician who holds an active, unrestricted license; who has 28 successfully completed an anesthesiology training program approved by the Accreditation Council on Graduate Medical 29 30 Education or its equivalent; and who is certified by the American Board of Anesthesiology, is eligible to take that 31 32 board's examination, or is certified by the Board of Certification in Anesthesiology affiliated with the American 33 34 Association of Physician Specialists.

35 "Direct supervision" means the physical presence of a (q) supervising anesthesiologist on the premises such that the 36 37 supervising anesthesiologist is reasonably available as needed 38 onsite, personal supervision by an anesthesiologist who is 39 present in the office when the procedure is being performed in 40 that office, or is present in the surgical or obstetrical suite 41 when the procedure is being performed in that surgical or 42 obstetrical suite and who is in all instances immediately 43 available to provide assistance and direction to the 44 anesthesiologist assistant 45 performed.

46

(2) PERFORMANCE OF SUPERVISING ANESTHESIOLOGIST.-

(b) An anesthesiologist or group of anesthesiologists must, upon establishing a supervisory relationship with an anesthesiologist assistant, file with the board a written protocol that includes, at a minimum:

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51 The name, address, and license number of the 1. 52 anesthesiologist assistant. 53 2. The name, address, license number, and federal Drug 54 Enforcement Administration number of each physician who will be 55 supervising the anesthesiologist assistant. 56 3. The address of the anesthesiologist assistant's primary 57 practice location and the address of any other locations where the anesthesiologist assistant may practice. 58 59 4. The date the protocol was developed and the dates of all revisions. 60 The signatures of the anesthesiologist assistant and 61 5. either the single supervising anesthesiologist or a supervising 62 anesthesiologist designated by the group, as applicable all 63 64 supervising physicians. The duties and functions of the anesthesiologist 6. 65 66 assistant. 7. The conditions or procedures that require the personal 67 68 provision of care by an anesthesiologist. 69 The procedures to be followed in the event of an 8. 70 anesthetic emergency. 71 72 The protocol must be on file with the board before the 73 anesthesiologist assistant may practice with the 74 anesthesiologist or group. An anesthesiologist assistant may not practice unless a written protocol has been filed for that 75

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anesthesiologist assistant in accordance with this paragraph, and the anesthesiologist assistant may only practice under the direct supervision of an anesthesiologist who <u>is identified in</u> <u>the has signed the protocol</u>. The protocol must be updated biennially.

81

(3) PERFORMANCE OF ANESTHESIOLOGIST ASSISTANTS. -

82 An anesthesiologist assistant may assist an (a) anesthesiologist in developing and implementing an anesthesia 83 84 care plan for a patient, may personally administer the 85 prescribed anesthetic under the direct supervision of an 86 anesthesiologist, and may perform tasks and services as 87 specified in a written protocol approved by the supervising anesthesiologist, including, but not limited to, any of the 88 89 following. In providing assistance to an anesthesiologist, an 90 anesthesiologist assistant may perform duties established by 91 rule by the board in any of the following functions that are 92 included in the anesthesiologist assistant's protocol while 93 under the direct supervision of an anesthesiologist:

94 1. Obtain a comprehensive patient history and present the95 history to the supervising anesthesiologist.

96 2. Pretest and calibrate anesthesia delivery systems and 97 monitor, obtain, and interpret information from the systems and 98 monitors.

3. Assist the supervising anesthesiologist with theimplementation of medically accepted monitoring techniques.

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4. Establish basic and advanced airway interventions,
including intubation of the trachea and performing ventilatory
support.

104 5. Administer intermittent vasoactive drugs and start and105 adjust vasoactive infusions.

106 6. Administer anesthetic drugs, adjuvant drugs, and107 accessory drugs.

108 7. Assist the supervising anesthesiologist with the 109 performance of epidural anesthetic procedures and spinal 110 anesthetic procedures.

111 8. Administer blood, blood products, and supportive 112 fluids.

9. Support life functions during anesthesia health care, including induction and intubation procedures, the use of appropriate mechanical supportive devices, and the management of fluid, electrolyte, and blood component balances.

117 10. Recognize and take appropriate corrective action for 118 abnormal patient responses to anesthesia, adjunctive medication, 119 or other forms of therapy.

120 11. Participate in management of the patient while in the 121 postanesthesia recovery area, including the administration of 122 any supporting fluids or drugs.

123 12. Place special peripheral and central venous and
124 arterial lines for blood sampling and monitoring as appropriate.
125 (b) Nothing in this section or chapter prevents third-

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126 party payors from reimbursing employers of anesthesiologist 127 assistants for covered services rendered by such 128 anesthesiologist assistants. 129 (c) After 90 days following the submission of a completed

130 <u>application for clinical privileges at a hospital, an</u> 131 <u>anesthesiologist assistant may not be denied clinical hospital</u> 132 <u>privileges, except for cause, if the supervising</u> 133 <u>anesthesiologist is a staff member in good standing at that</u> 134 <u>hospital.</u>

135(d)An anesthesiologist assistant must clearly convey to136the patient that he or she is an anesthesiologist assistant.

137 <u>(e) (d)</u> An anesthesiologist assistant may perform 138 anesthesia tasks and services within the framework of a written 139 practice protocol developed between the supervising 140 anesthesiologist and the anesthesiologist assistant.

141 (f) (e) An anesthesiologist assistant may not prescribe, 142 order, or compound any controlled substance, legend drug, or 143 medical device, nor may an anesthesiologist assistant dispense 144 sample drugs to patients. Nothing in this paragraph prohibits an 145 anesthesiologist assistant from administering legend drugs or controlled substances; intravenous drugs, fluids, or blood 146 147 products; or inhalation or other anesthetic agents to patients 148 which are ordered by the supervising anesthesiologist and 149 administered while under the direct supervision of the supervising anesthesiologist. 150

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151 (6) ANESTHESIOLOGIST ASSISTANT LICENSURE. -152 Any person desiring to be licensed as an (a) 153 anesthesiologist assistant must apply to the department. The 154 department shall issue a license to any person certified by the 155 board to: 156 1. Be at least 18 years of age. 157 2. Have satisfactorily passed a proficiency examination with a score established by the National Commission on 158 159 Certification of Anesthesiologist Assistants. 160 Be certified in advanced cardiac life support. 3. Have completed the application form and remitted an 161 4. application fee, not to exceed \$1,000, as set by the boards. An 162 application must include: 163 164 a. A certificate of completion of an approved graduate 165 level program. 166 b. An acknowledgment A sworn statement of any prior felony 167 convictions. 168 An acknowledgment A sworn statement of any prior с. 169 discipline or denial of licensure or certification in any state. 170 Two letters of recommendation from anesthesiologists. d. 171 (b) A license must be renewed biennially. Each renewal must include: 172 173 A renewal fee, not to exceed \$1,000, as set by the 1. 174 boards. 175 2. An acknowledgment A sworn statement of no felony Page 7 of 14

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176 convictions in the immediately preceding 2 years. 177 Section 2. Paragraphs (a) and (g) of subsection (1), 178 paragraph (b) of subsection (2), subsection (3), and paragraphs (a) and (b) of subsection (6) of section 459.023, Florida 179 180 Statutes, are amended to read: 181 459.023 Anesthesiologist assistants.-182 (1)DEFINITIONS.-As used in this section, the term: 183 "Anesthesiologist" means an osteopathic or allopathic (a) 184 physician who holds an active, unrestricted license; who has 185 successfully completed an anesthesiology training program approved by the Accreditation Council on Graduate Medical 186 187 Education, or its equivalent, or the American Osteopathic Association; and who is certified by the American Osteopathic 188 189 Board of Anesthesiology or is eligible to take that board's 190 examination, is certified by the American Board of 191 Anesthesiology or is eligible to take that board's examination, 192 or is certified by the Board of Certification in Anesthesiology 193 affiliated with the American Association of Physician 194 Specialists. 195 (g) "Direct supervision" means the physical presence of a 196 supervising anesthesiologist on the premises such that the 197 supervising anesthesiologist is reasonably available as needed 198 onsite, personal supervision by an anesthesiologist who is 199 present in the office when the procedure is being performed in that office, or is present in the surgical or obstetrical suite 200 Page 8 of 14

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201 when the procedure is being performed in that surgical or 202 obstetrical suite and who is in all instances immediately 203 available to provide assistance and direction to the 204 anesthesiologist assistant while anesthesia services are being 205 performed.

206

(2) PERFORMANCE OF SUPERVISING ANESTHESIOLOGIST.-

(b) An anesthesiologist or group of anesthesiologists must, upon establishing a supervisory relationship with an anesthesiologist assistant, file with the board a written protocol that includes, at a minimum:

The name, address, and license number of the
 anesthesiologist assistant.

213 2. The name, address, license number, and federal Drug 214 Enforcement Administration number of each physician who will be 215 supervising the anesthesiologist assistant.

3. The address of the anesthesiologist assistant's primary practice location and the address of any other locations where the anesthesiologist assistant may practice.

4. The date the protocol was developed and the dates ofall revisions.

5. The signatures of the anesthesiologist assistant and either the single supervising anesthesiologist or a supervising anesthesiologist designated by the group, as applicable all supervising physicians.

225

6. The duties and functions of the anesthesiologist

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assistant.

226

2022

227 7. The conditions or procedures that require the personal 228 provision of care by an anesthesiologist. 229 8. The procedures to be followed in the event of an 230 anesthetic emergency. 231 232 The protocol must be on file with the board before the 233 anesthesiologist assistant may practice with the 234 anesthesiologist or group. An anesthesiologist assistant may not 235 practice unless a written protocol has been filed for that anesthesiologist assistant in accordance with this paragraph, 236 237 and the anesthesiologist assistant may only practice under the 238 direct supervision of an anesthesiologist who is identified in 239 the has signed the protocol. The protocol must be updated biennially. 240 241 (3) PERFORMANCE OF ANESTHESIOLOGIST ASSISTANTS. -242 An anesthesiologist assistant may assist an (a) 243 anesthesiologist in developing and implementing an anesthesia 244 care plan for a patient, may personally administer the 245 prescribed anesthetic under the direct supervision of an anesthesiologist, and may perform tasks and services as 246 247 specified in a written protocol approved by the supervising 248 anesthesiologist, including, but not limited to, any of the 249 following. In providing assistance to an anesthesiologist, an 250 anesthesiologist assistant may perform duties established by

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251 rule by the board in any of the following functions that are included in the anesthesiologist assistant's protocol while 252 under the direct supervision of an anesthesiologist: 253 254 1. Obtain a comprehensive patient history and present the 255 history to the supervising anesthesiologist. 256 2. Pretest and calibrate anesthesia delivery systems and 257 monitor, obtain, and interpret information from the systems and 258 monitors. 259 3. Assist the supervising anesthesiologist with the 260 implementation of medically accepted monitoring techniques. Establish basic and advanced airway interventions, 261 4. 262 including intubation of the trachea and performing ventilatory 263 support. 264 5. Administer intermittent vasoactive drugs and start and 265 adjust vasoactive infusions. 266 6. Administer anesthetic drugs, adjuvant drugs, and 267 accessory drugs. 7. Assist the supervising anesthesiologist with the 268 269 performance of epidural anesthetic procedures and spinal anesthetic procedures. 270 271 8. Administer blood, blood products, and supportive fluids. 272 273 9. Support life functions during anesthesia health care, 274 including induction and intubation procedures, the use of 275 appropriate mechanical supportive devices, and the management of Page 11 of 14

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276 fluid, electrolyte, and blood component balances.

277 10. Recognize and take appropriate corrective action for
278 abnormal patient responses to anesthesia, adjunctive medication,
279 or other forms of therapy.

280 11. Participate in management of the patient while in the 281 postanesthesia recovery area, including the administration of 282 any supporting fluids or drugs.

283 12. Place special peripheral and central venous and 284 arterial lines for blood sampling and monitoring as appropriate.

(b) Nothing in this section or chapter prevents thirdparty payors from reimbursing employers of anesthesiologist assistants for covered services rendered by such anesthesiologist assistants.

(c) After 90 days following the submission of a completed application for clinical privileges at a hospital, an anesthesiologist assistant may not be denied clinical hospital privileges, except for cause, if the supervising anesthesiologist is a staff member in good standing at that hospital.

295(d)An anesthesiologist assistant must clearly convey to296the patient that she or he is an anesthesiologist assistant.

297 <u>(e) (d)</u> An anesthesiologist assistant may perform 298 anesthesia tasks and services within the framework of a written 299 practice protocol developed between the supervising 300 anesthesiologist and the anesthesiologist assistant.

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301 (f) (e) An anesthesiologist assistant may not prescribe, 302 order, or compound any controlled substance, legend drug, or 303 medical device, nor may an anesthesiologist assistant dispense 304 sample drugs to patients. Nothing in this paragraph prohibits an 305 anesthesiologist assistant from administering legend drugs or 306 controlled substances; intravenous drugs, fluids, or blood 307 products; or inhalation or other anesthetic agents to patients 308 which are ordered by the supervising anesthesiologist and 309 administered while under the direct supervision of the 310 supervising anesthesiologist. ANESTHESIOLOGIST ASSISTANT LICENSURE.-311 (6) 312 Any person desiring to be licensed as an (a) anesthesiologist assistant must apply to the department. The 313 314 department shall issue a license to any person certified by the 315 board to: 316 1. Be at least 18 years of age. 317 Have satisfactorily passed a proficiency examination 2. 318 with a score established by the National Commission on 319 Certification of Anesthesiologist Assistants. 320 3. Be certified in advanced cardiac life support. 321 4. Have completed the application form and remitted an 322 application fee, not to exceed \$1,000, as set by the boards. An 323 application must include: 324 a. A certificate of completion of an approved graduate 325 level program.

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326 b. An acknowledgment A sworn statement of any prior felony 327 convictions. 328 с. An acknowledgment A sworn statement of any prior 329 discipline or denial of licensure or certification in any state. 330 d. Two letters of recommendation from anesthesiologists. 331 (b) A license must be renewed biennially. Each renewal 332 must include: 333 1. A renewal fee, not to exceed \$1,000, as set by the 334 boards. 335 2. An acknowledgment A sworn statement of no felony 336 convictions in the immediately preceding 2 years. 337 Section 3. This act shall take effect July 1, 2022.

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