Expert Organization Positions on Non-CRNA Advanced Practice Registered Nurses Administering Propofol and Managing Deep Sedation

Summary:

The **overwhelming consensus** among leading anesthesia and safety organizations is that **Propofol should only be administered by professionals trained in anesthesia**, such as Certified Registered Nurse Anesthetists (CRNAs) and anesthesiologists. The administration of Propofol by **non-anesthesia-trained Nurse Practitioners is not supported** due to patient safety concerns.

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1. American Society of Anesthesiologists (ASA)

Position: Strongly opposed to Propofol administration by non-anesthesia professionals, including most NPs.

- **Quote:**

  > "Because of the rapid and profound changes in sedative/anesthetic depth and the risk of respiratory depression, Propofol should be administered only by individuals trained in the administration of general anesthesia and who are not simultaneously involved in the procedure."

- **Additional Guidance:**
  In Monitored Anesthesia Care (MAC), a **qualified anesthesia provider** (anesthesiologist or CRNA) must be present if sedation might become deep or general.
- **References:**
  - ASA Statement on Safe Use of Propofol
  - ASA Statement on Monitored Anesthesia Care (MAC)

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2. Anesthesia Patient Safety Foundation (APSF)

Position: Not supportive of non-anesthesia providers (e.g., NPs) administering Propofol.

- **Quote:**

  > "The APSF believes that non-anesthesia professionals should not administer Propofol for sedation unless they are specifically trained and credentialed in deep sedation and capable of rescue from general anesthesia."

- **Rationale:**
  The sedation continuum is unpredictable. Patients may unintentionally transition into deep sedation or general anesthesia, requiring immediate advanced airway and resuscitation skills.
- **Reference:**
  - APSF Article: Who Should Administer Propofol?

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3. American Association of Nurse Anesthesiology (AANA)

Position: Opposes administration of Propofol by non-anesthesia-trained providers.

- **Quote:**

  > "Propofol is a potent sedative-hypnotic agent intended only for use by persons trained in the administration of general anesthesia."

- **Emphasis:**
  Emphasizes proper licensure, education, and clinical training in anesthesia-specific pharmacology, physiology, and emergency airway management.
- **Reference:**
  - AANA Propofol FAQ

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4. Centers for Medicare & Medicaid Services (CMS)

Position: Deep sedation and general anesthesia must be administered by qualified anesthesia personnel.

- **Quote (Tag A-1004):**

  > "Deep sedation and general anesthesia must be administered by qualified anesthesia personnel (anesthesiologist, CRNA, or anesthesiologist assistant, as allowed by state law)."

- **Reference:**
  - CMS State Operations Manual – Appendix A

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5. U.S. Food and Drug Administration (FDA)

Position: Limits Propofol use to providers trained in general anesthesia.

- **Label Warning:**

  "For general anesthesia or monitored anesthesia care (MAC) sedation, administration of Propofol should be by persons trained in the administration of general anesthesia and not involved in the conduct of the surgical/diagnostic procedure."

- **Reference:**
  - FDA Propofol Prescribing Information

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6. The Joint Commission

Position: Organizations must ensure that only qualified personnel administer Propofol and other deep sedatives, in compliance with state law.

- **Guidance:**
  Providers must be able to **rescue patients** from deeper levels of sedation than intended, which requires anesthesia training.
- **Reference:**
  - Sentinel Event Alert #49

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7. State Boards of Nursing and Medicine

Position: Varies significantly by state. In most states, NPs are **not authorized** to independently administer Propofol for deep sedation unless they are also CRNAs.

- **Example:**
  - **Texas Board of Nursing**: NPs may not administer deep sedation or general anesthesia unless CRNA-certified.
    Texas BON Position 15.18
  - **California BRN**: Propofol use must fall under a standardized procedure and is generally restricted to anesthesia providers.
    CA BRN Guidance

Consensus Conclusion:

Organization	Supports Propofol by Non-Anesthesia NPs?	Notes
ASA	✗ No	Restricted to anesthesia-trained personnel
APSF	✗ No	Cites high patient safety risk
AANA	✗ No	Reserved for anesthesia professionals
CMS	✗ No	Deep sedation = anesthesia care
FDA	✗ No	Labeling limits use
Joint Commission	⚠ No (unless trained & credentialed)	Must comply with law and have rescue ability
State Boards	⚠ Varies	Generally, not allowed unless CRNA