

# Wyomingites overwhelmingly want physicians to supervise nurse anesthetists and respond to anesthesia emergencies

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An overwhelming 75% of Wyoming voters oppose permitting nurse anesthetists to administer anesthesia without the supervision of a physician, and 93% of voters want to be informed prior to surgery if a

hospital does not have a physician anesthesiologist involved in their anesthesia care.

With this information, the Wyoming Society of Anesthesiologists (WYSOA) and the American Society of Anesthesiologists (ASA) question and strongly oppose Gov. Mark Gordon's request for input from Wyoming medical and nursing boards, as well as the Wyoming Department of Health, regarding "opting out" of the Centers for Medicare & Medicaid Services' [physician](#) supervision requirement in hospitals with 25 or fewer beds. This action would dismantle the [anesthesia](#) care team model in Wyoming and allow nurse anesthetists to administer anesthesia without physician supervision—something in clear opposition to what patients in Wyoming want.

A survey of registered voters in Wyoming, conducted in April 2021, found voters want a physician to supervise nurse anesthetists, as well as handle [medical complications](#) and emergencies during anesthesia and surgery. By better than a 3-1 margin, 51% to 14%, voters would be less likely to re-elect a governor or state legislator who voted to remove the existing requirement.

Proponents of the opt-out falsely claim it can improve access to care in states like Wyoming. However, the survey found:

- 58% of Wyoming voters noted it took less than 15 minutes to reach their closest hospital or [medical center](#) offering surgical care from their home.
- Almost 50% would definitely consider going to another facility for the same surgery if their hospital did not have a physician anesthesiologist.
- Over 55% would travel 90 minutes or longer to a facility that had a physician anesthesiologist if their hospital did not have a physician [anesthesiologist](#) to lead their anesthesia care.

WYSOA and ASA urge Wyomingites to contact the governor's office to oppose any efforts to opt-out of the federal requirement for physician supervision of nurse anesthetists.

"There are no [cost savings](#) for patients in Wyoming to receive anesthesia care solely by a nurse anesthetist," said WYSOA President John Mansell, M.D., FASA. "Physician supervision of anesthesia ensures patients receive safe, high-quality care. We urge the governor not to lower the standard of care for patients in Wyoming. It provides no benefit and can mean the difference between life and death."

"All patients deserve access to physician-led anesthesia care—the highest quality and safest medical care," said ASA President Randall M. Clark, M.D., FASA. "A 2017 study of 'opt-out' states found a consistent pattern of increased costs when compared to states that did not opt out of the physician-led anesthesia requirement, with inpatient surgical care costs 8.7% higher in the opt-out states. Physician anesthesiologists have up to 14 years of postgraduate medical education and [residency training](#), which includes 12,000-16,000 hours of clinical training, nearly seven times more training than nurse anesthetists."

The United States Department of Veterans Affairs' (VA) Quality Enhancement Research Initiative (QUERI) could not discern "whether more complex surgeries can be safely managed by CRNAs."

The survey of 400 registered voters in Wyoming was conducted by the National Survey Research Group. The margin of error associated with a study of this size is +/-4.9%.

Provided by American Society of Anesthesiologists

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