

## ARTICLE 15. ANESTHESIOLOGIST ASSISTANTS

### [Rule 1.](#)

### Anesthesiologist Assistant Licensure

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#### 844 IAC 15-1-1 Scope

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 1. This rule establishes application and licensure requirements, fees, scope of practice standards, continuing certification standards, and standards for practice protocols for anesthesiologist assistants. (*Medical Licensing Board of Indiana; 844 IAC 15-1-1; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#)*)

#### 844 IAC 15-1-2 Definitions

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 2. (a) The definitions in this section apply throughout this rule.

(b) "Administer a drug" means the direct application of a drug, whether by injection, inhalation, ingestion, or any other means, to the body of a patient.

(c) "Anesthesiologist" means an individual who:

(1) has successfully completed a training program in anesthesiology accredited by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or an equivalent organization;

(2) holds an unlimited license under [IC 25-22.5](#) to practice medicine or osteopathic medicine; and

(3) is actively engaged in the clinical practice of anesthesiology.

(d) "Anesthesiologist assistant" means an individual who meets the qualifications of and is licensed under [IC 25-3.7](#).

(e) "Anesthesiologist assistant student" means an individual who is currently enrolled in an approved program.

(f) "Approved program" means a medical-based program for the education and training of anesthesiologist assistants that is accredited by the Commission on Accreditation of Allied Health Education Programs or its predecessor or successor organization.

(g) "Available immediately" means the anesthesiologist is in physical proximity that allows the anesthesiologist to reestablish direct contact with the patient to meet medical needs and any urgent or emergent clinical problems. These responsibilities may also be met through coordination among anesthesiologists of the same group or department who have signed the protocol under section 8 of this rule.

(h) "Board" refers to the medical licensing board of Indiana established by [IC 25-22.5](#).

(i) "Interventional pain management" means the practice of medicine devoted to the diagnosis and treatment of chronic pain, through the use of such techniques as:

(1) ablation of targeted nerves;

(2) percutaneous precision needle placement within the spinal column with placement of drugs such as local anesthetics, steroids, or analgesics in targeted areas of the spinal column; or

(3) surgical techniques, such as laser or endoscopic discectomy, intrathecal infusion pumps, and spinal cord stimulators.

(j) "NCCAA" refers to the National Commission for Certification of Anesthesiologist Assistants, or its successor organization.

(k) "Supervision" means:

(1) overseeing the medical services rendered by an anesthesiologist assistant consistent with the terms of the written practice protocol; and

(2) maintaining a physical proximity that allows the anesthesiologist to be available immediately if needed at all times that anesthesia services are rendered by the anesthesiologist assistant.

*(Medical Licensing Board of Indiana; 844 IAC 15-1-2; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#))*

#### **844 IAC 15-1-3 Licensure; application**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 3. (a) The application for licensure of an anesthesiologist assistant must be made upon forms supplied by the board.

(b) Each application for licensure as an anesthesiologist assistant shall include the following information:

(1) An official transcript sent directly from the institution of higher learning where the applicant received a baccalaureate degree.

(2) An official transcript sent directly from the approved program where the applicant received a degree, including the degree conferred and the date of graduation.

(3) Verification from NCCAA of the applicant's certification status.

(4) If the name on any document differs from the applicant's name, a notarized or certified copy of a marriage certificate or legal proof of name change.

(5) One (1) passport-type photo taken of the applicant within the last eight (8) weeks.

(c) All information in the application shall be submitted under oath or affirmation, subject to the penalties of perjury.

(d) An applicant who currently holds, or has previously held, a license, certification, or registration issued by another state to practice any health profession must request verification of license status from the state that issued that license, certification, or registration. The verification must be sent directly to the board from the agency that issued the license, certification, or registration. Official electronic verification will also be accepted.

(e) Each applicant for licensure as an anesthesiologist assistant shall submit an executed authorization and release form supplied by the board that:

(1) authorizes the board or any of its authorized representatives to inspect, receive, and review all documents, records, or other information pertaining to the applicant;

(2) authorizes and directs any person, corporation, partnership, association, organization, institute, forum, or officer thereof, to furnish, provide, and supply to the board all relevant documents, records, or other information pertaining to the applicant; and

(3) releases the board, or any of its authorized representatives, and any person, corporation, partnership, association, organization, institute, forum, or officer thereof, from any and all liability regarding such inspection, review, receipt, furnishing, or supplying of any such information.

(f) Application forms submitted to the board must be complete. Except as otherwise required by this section, all supporting documents required by the application must be submitted with the application. *(Medical Licensing Board of Indiana; 844 IAC 15-1-3; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#))*

#### **844 IAC 15-1-4 Licensure renewal**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-1-9](#); [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 4. (a) An anesthesiologist assistant may renew a license by:

(1) paying the renewal fee required under section 6 of this rule on or before the expiration date of the license; and

(2) submitting proof of meeting the criteria for continued certification by the NCCAA or successor organization.

(b) Applications for renewals must be made under oath or affirmation.

(c) An individual who practices as an anesthesiologist assistant while the individual's license has expired is considered to

be practicing without a license and is subject to discipline under [IC 25-1-9](#). (*Medical Licensing Board of Indiana; 844 IAC 15-1-4; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#)*)

**844 IAC 15-1-5 Anesthesiologist assistant students**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 5. Anesthesiologist assistant students may be trained under the supervision of an anesthesiologist. (*Medical Licensing Board of Indiana; 844 IAC 15-1-5; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#)*)

**844 IAC 15-1-6 Fees**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 6. The board shall charge and collect the following nonrefundable fees:

Application for licensure	\$100
License renewal	\$50 biennially
Verification of licensure	\$10

(*Medical Licensing Board of Indiana; 844 IAC 15-1-6; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#)*)

**844 IAC 15-1-7 Scope of practice**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 7. (a) An anesthesiologist assistant may practice only:

- (1) under the supervision of an anesthesiologist; and
- (2) as described in a written practice protocol adopted under this rule and [IC 25-3.7-2-4\(b\)](#).

(b) In providing medical services under the supervision of an anesthesiologist, an anesthesiologist assistant has authority to do any of the following:

- (1) Obtain a comprehensive patient history and perform relevant elements of a physical exam.
- (2) Pretest and calibrate anesthesia delivery systems and obtain and interpret information from the systems and monitors.
- (3) Implement medically accepted monitoring techniques.
- (4) Establish basic and advanced airway interventions, including intubation of the trachea and performance of ventilatory support.
- (5) Administer intermittent vasoactive drugs and start and adjust vasoactive infusions.
- (6) Administer:
  - (A) anesthetic drugs;
  - (B) adjuvant drugs; and
  - (C) accessory drugs.
- (7) Implement:
  - (A) spinal;
  - (B) epidural; and
  - (C) regional anesthetic procedures.
- (8) Administer:
  - (A) blood;

(B) blood products; and

(C) supportive fluids.

(9) Place deep vein catheters and arterial catheters.

(10) Provide assistance to a cardiopulmonary resuscitation team in response to a life-threatening situation.

(11) Participate in administrative, research, and clinical teaching activities as authorized by the supervising anesthesiologist.

(12) Perform other medical services not prohibited by law under the supervision of an anesthesiologist that:

(A) an anesthesiologist assistant has been trained in and is proficient to perform; and

(B) are customarily within the specific area of practice of the supervising anesthesiologist.

(c) An anesthesiologist who is supervising an anesthesiologist assistant shall personally participate in the induction of general anesthesia except in emergency cases when the anesthesiologist is needed to address another emergency.

(d) An anesthesiologist may not supervise more than four (4) anesthesiologist assistants concurrently.

(e) An anesthesiologist assistant's scope of practice does not include interventional pain management.

(f) The supervising anesthesiologist has the final decision making authority regarding:

(1) the anesthetic planning and management; and

(2) the provision of medical services by the anesthesiologist assistant.

*(Medical Licensing Board of Indiana; 844 IAC 15-1-7; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#))*

#### **844 IAC 15-1-8 Practice protocol**

Authority: [IC 25-3.7-2-3](#)

Affected: [IC 25-3.7](#); [IC 25-22.5](#)

Sec. 8. (a) Each anesthesiologist who agrees to act as the supervising anesthesiologist of an anesthesiologist assistant shall adopt a written protocol that:

(1) is consistent with this rule and [IC 25-3.7-2-4](#); and

(2) is based upon the anesthesiologist's professional medical judgment.

(b) If an anesthesiologist assistant will be supervised by more than one (1) anesthesiologist in a group, each member of the group who will supervise the anesthesiologist assistant shall jointly enter into a protocol with the anesthesiologist assistant.

(c) Supervision responsibilities may be met through coordination among anesthesiologists in the same group or department who have signed the protocol. *(Medical Licensing Board of Indiana; 844 IAC 15-1-8; filed Feb 26, 2016, 9:09 a.m.: [20160323-IR-844150300FRA](#); readopted filed Nov 22, 2022, 12:22 p.m.: [20221221-IR-844220255RFA](#))*

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