

**UPMC  
Clinical Scope of Practice Request  
Criteria Summary Sheet**

**Facility:** UPMC Horizon

**Specialty:** CERTIFIED REGISTERED NURSE ANESTHETIST

<b>TRAINING/ CERTIFICATION</b>	<ul style="list-style-type: none"><li>• The registered nurse has successfully completed the educational program of a school for nurse anesthetists accredited by the Council on Accreditation of Nurse Anesthesia Education Programs of Nurse Anesthesia of the American Association of Nurse Anesthetists (AANA).</li><li>• Licensed in the Commonwealth of Pennsylvania as a Registered Nurse</li></ul>
<b>OTHER</b>	<p>The CRNA does not function as an independent health practitioner, and shall only function under the direction and responsible supervision of an Anesthesiologist who is a member of UPMC Horizon Medical Staff.</p> <p><u>ADDITIONAL CONSIDERATIONS</u></p> <ol style="list-style-type: none"><li>1. Successful completion of the certification examination administered by the AANA Council on Certification of Nurse Anesthetists.</li><li>2. Current certification by the AANA Council.</li><li>3. Current professional liability in amounts established by the UPMC Horizon Board.</li><li>4. No physical or mental conditions that would prevent the CRNA from exercising the requested privileges/duties.</li></ol>