

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

**Facility:** UPMC Mercy

**Specialty:** CERTIFIED REGISTERED NURSE ANESTHETIST

<b>TRAINING/ CERTIFICATION</b>	<ul style="list-style-type: none"><li>• Completion of a course of nurse education in a program accredited by the National League of Nursing;</li><li>• Possession of a valid license as a Professional Nurse in the Commonwealth of Pennsylvania;</li><li>• Completion of a course of education in a school of nurse anesthesia accredited by the Council on Accreditation of Nurse Anesthesia Programs/Schools, or its equivalent;</li><li>• Certification or eligibility for certification as a Registered Nurse Anesthetist by the Council on Certification of Nurse Anesthetists;</li><li>• Compliance with recertification requirements set forth by the Council on Recertification of Nurse Anesthetists.</li></ul>
<b>OTHER</b>	N/A