American Society of Anesthesiologists™

Preserve Safe Care for Veterans

The American Society of Anesthesiologists is urging the new U.S. Department of Veterans Affairs (VA) leadership reject a proposed new standard of care that would eliminate anesthesiologists from the surgical care of Veterans. The standard, if implemented, will place the health and lives of Veterans at risk.

Issue

In April 2020, Richard Stone, MD, former VHA Acting Under Secretary for Health, issued a memorandum ("Stone Memo") that put a process in place to change how anesthesia is delivered in VA. Dr. Stone is seeking to shift VA from a physician-nurse Anesthesia Team model (physician anesthesiologist working with Certified Registered Nurse Anesthetists (CRNA)) to a CRNA, nurse-only model. The standard promoted by the Stone Memo lowers the standard of care for Veterans.

Despite strong objections from many stakeholders, including over 350 VA anesthesiologists who have three times formally invoked VA's "Stop the Line" patient safety whistleblower program, Dr. Stone's proposal remains pending within VA as part of VA's new Federal Supremacy Initiative. This is an initiative announced last November through an Interim Final Rule and requires VA to "standardize" care through new VA-only "national standards of practice" for all health professionals who work in VA facilities.

Under the Federal Supremacy Initiative, VA will supersede established state health care practice laws and regulations – the vast majority of which represent a higher standard of care. **There is grave concern the standard under the Stone Memo will be made permanent through these national standards. Removing highly trained anesthesiologists from the care of Veterans unnecessarily puts the health and lives of more than 9 million Veterans at risk.**

Background

VA's longstanding policy for surgical anesthesia care provides for physician-delivered or physician-nurse team-based models of anesthesia care in VA facilities. This policy was recently reaffirmed after over 6 years of research and study by VA from 2009-2017, including two comments periods. This generated a record 200,000 comments, including tens of thousands from Veterans and Veterans' families opposing the nurse-only model of care for anesthesia. VA's final rule permitted nurse practitioners, clinical nurse specialties, and nurse midwives to practice in the nurse-only model. Nurse anesthetists were explicitly excluded.

KEY POINTS

- The standard promoted by the Stone Memo would place the VA well outside the norm of care models utilized by the nation's top quality health care systems, the care model for 96% of civilians in the United States. This includes the Mayo Clinic, Cleveland Clinic, MD Anderson and the Johns Hopkins Medical Center – all of which use anesthesiologists personally performing anesthesia or leading teams of nurse anesthetists.

- The nurse anesthetist-only models of care are inappropriate for the older, sicker VA patients, and particularly so for Veterans suffering from medical conditions associated with Agent Orange and Burn Pit exposure.

- Prior to the issuance of the memorandum, neither Dr. Stone nor the Office of Nursing Services (ONS) collected workforce data to determine the need for the policy change. A system-wide cancellation of surgeries and other procedures requiring anesthesia resulted in overstaffing of both VA physician anesthesiologists and nurse anesthetists. There was and continues to be no anesthesia workforce shortage in VA.