

LETTERHEAD

ANESTHESIOLOGIST ASSISTANT PRACTICE PROTOCOL AGREEMENT

Under the supervision of [name of primary supervising anesthesiologist, or name of physician practice group], the anesthesiologist assistant provides efficient, cost-effective, quality patient care in accordance with established rules and regulations defining the anesthesiologist assistant’s scope of practice. The anesthesiologist assistant functions as a non-physician anesthesia care provider who provides care under the constant medical direction of a supervising anesthesiologist. The anesthesiologist assistant may perform such tasks, which were traditionally performed by the primary supervising anesthesiologist, if that anesthesiologist assistant has adequate orientation and has demonstrated competent performance.

Anesthesiologist Assistant: enter name
AA License Number: enter Indiana license number (or indicate, “applied”)
Address of Practice: enter address where AA will practice
Phone: enter phone number of practice

Primary Supervising Physician Anesthesiologist: enter name
Physician License Number: enter Indiana license number
CSR Number: enter Indiana CSR number
Address of Practice: enter address where Physician practices
Phone: enter phone number of practice

List any additional practice addresses.

ROLE OF THE ANESTHESIOLOGIST ASSISTANT:

[Name of AA] is delegated to perform the following tasks and procedures that are within his/her education and training and the primary supervising anesthesiologist’s scope of practice:

- List tasks and/or procedures AA will perform.

SPECIFIC MANNER OF SUPERVISION, CHART REVIEW AND EVALUATION

- Specify the manner in which the primary supervising anesthesiologist will supervise the anesthesiologist assistant.
- Include a detailed description of the process maintained for evaluation of the anesthesiologist assistant or enclose a copy of the evaluation form with the practice protocol agreement.

Typed name of AA

Date signed

Typed name of Supervising Anesthesiologist

Date signed

Have both parties sign and date agreement.

(If additional supervisors, include addendum with name and license number of each supervisor)

(This agreement must be updated annually)