



Statement on Qualifications of Anesthesia Providers in the Office-Based Setting

Committee of Origin: Ambulatory Surgical Care

(Approved by the ASA House of Delegates on October 13, 1999; last amended on October 21, 2009; and reaffirmed on October 23, 2019)

ASA policy documents, including the “Guidelines for Ambulatory Anesthesia and Surgery,” and “Statement on the Anesthesia Care Team” state that all anesthetics should be delivered by or under the medical direction of an anesthesiologist. ASA acknowledges, however, that Medicare regulations and the laws or regulations of virtually all states recognize that where anesthesiologist participation is not practical, nonphysician anesthesia providers must at a minimum be medically supervised by a licensed physician.

ASA believes that anesthesiologist participation in all office-based surgery is the best means to achieve the safest anesthesia care. It does not oppose, however, regulatory requirements that, where necessary, speak merely in terms of “physician” medical supervision. Those requirements should, however, require that the medically supervising physician be specifically trained in sedation, anesthesia and rescue techniques appropriate to the type of sedation or anesthesia being provided and to the office-based surgery being performed.

ASA believes that specific anesthesia training for medically supervising, while important in all anesthetizing locations, is especially critical in connection with office-based surgery where normal institutional back-up or emergency facilities and capacities are often not available.

This statement should be read in conjunction with ASA’s *Guidelines for Office-Based Anesthesia*, adopted by its House of Delegates in October 2004.