Whereas, Our American Medical Association (AMA) supports nonphysician providers’ role within the patient-centered, physician-led health care team; and

Whereas, Nonphysician providers’ contributions to the delivery of care should not be confused with being a medical specialist; and

Whereas, Physicians receive 12 to 14 years of education, including medical school, and 12,000 to 16,000 hours of clinical training to specialize in the practice of medicine with the necessary knowledge to understand and treat the entire human body; and

Whereas, In 2018 the American Association of Nurse Anesthetists (AANA) approved the descriptor “nurse anesthesiologist” as an appropriate term to refer to a nurse anesthetist; and

Whereas, In 2018 the New Hampshire Board of Nursing issued a position statement that recognizes “Nurse Anesthesiologist” and “Certified Registered Nurse Anesthesiologist” as optional, accurate descriptors”¹; and

Whereas, Having strong truth-in-advertising laws helped safeguard patients in Texas, where the Texas Association of Nurse Anesthetists shared its awareness of the AANA approval of the “nurse anesthesiologist” term and cautioned its members that any nomenclature comparing nurses to physicians that misleads patients could result in disciplinary or legal action; and

Whereas, Our AMA policy provides that anesthesiology is the practice of medicine; and

Whereas, To avoid unnecessary confusion by other health care providers, the public and especially patients and their families, efforts must be taken to prevent the misappropriation of medical specialties titles; therefore be it

RESOLVED, That our American Medical Association reaffirm support of the Scope of Practice Partnership’s Truth in Advertising Campaign to ensure patients receive accurate information about who is providing their care (AMA Policy H-405.969) (Reaffirm HOD Policy); and be it further

RESOLVED, That our AMA oppose any misappropriation of medical specialties’ titles and work with state medical societies to advocate for states and administrative agencies overseeing nonphysician providers to authorize only the use of titles and descriptors that align with the nonphysician providers’ state issued licenses and national board certification. (Directive to Take Action)

Fiscal Note: Not yet determined

Received: 05/01/19

RELEVANT AMA POLICY

Anesthesiology is the Practice of Medicine H-160.929

It is the policy of the AMA that anesthesiology is the practice of medicine. Our AMA seeks legislation to establish the principle in federal and state law and regulation that anesthesia care requires the personal performance or supervision by an appropriately licensed and credentialed doctor of medicine, osteopathy, or dentistry.

Citation: (Sub. Res. 216, I-98; Reaffirmed: BOT Rep. 23, A-09; Reaffirmed: BOT Rep. 9, I-11

Definition of a Physician H-405.969

1. The AMA affirms that a physician is an individual who has received a "Doctor of Medicine" or a "Doctor of Osteopathic Medicine" degree or an equivalent degree following successful completion of a prescribed course of study from a school of medicine or osteopathic medicine.

2. AMA policy requires anyone in a hospital environment who has direct contact with a patient who presents himself or herself to the patient as a "doctor," and who is not a "physician" according to the AMA definition above, must specifically and simultaneously declare themselves a "non-physician" and define the nature of their doctorate degree.

3. Our AMA actively supports the Scope of Practice Partnership in the Truth in Advertising campaign.