

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
95th General Assembly
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As Engrossed: H2/13/25

A Bill

HOUSE BILL 1251

By: Representatives L. Johnson, F. Allen, Barnes, K. Ferguson, Gramlich, Long, Magie, K. Moore, Perry, Pilkington, J. Richardson

By: Senators K. Hammer, Irvin, D. Wallace, Flippo, G. Leding, F. Love, J. Payton

For An Act To Be Entitled

AN ACT TO ESTABLISH THE ARKANSAS ANESTHESIOLOGIST ASSISTANT ACT; TO PROVIDE FOR LICENSURE OF ANESTHESIOLOGIST ASSISTANTS; AND FOR OTHER PURPOSES.

Subtitle

TO ESTABLISH THE ARKANSAS ANESTHESIOLOGIST ASSISTANT ACT; AND TO PROVIDE FOR LICENSURE OF ANESTHESIOLOGIST ASSISTANTS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 17, Chapter 95, is amended to add an additional subchapter to read as follows:

Subchapter 12 – Arkansas Anesthesiologist Assistant Act

17-95-1201. Title.

This subchapter shall be known and may be cited as the “Arkansas Anesthesiologist Assistant Act”.

17-95-1202. Definitions.

As used in this subchapter:

(1) "Anesthesiologist" means a physician who has completed a residency in anesthesiology and is board eligible or board certified in the specialty of anesthesiology;

(2) "Anesthesiologist assistant" means a graduate of an approved



program who is licensed to perform services delegated and directly supervised by a supervising anesthesiologist;

(3) "Approved program" means a program for the education and training of anesthesiologist assistants accredited by the Commission on Accreditation of Allied Health Education Programs; and

(4) "Direct supervision" means the on-site, personal supervision by an anesthesiologist who is:

(A) Licensed by and in good standing with the Arkansas State Medical Board;

(B) Present in the office or surgical or obstetrical suite when a procedure is being performed in the office or surgical or obstetrical suite; and

(C) In all instances immediately available to provide assistance and direction to the anesthesiologist assistant while anesthesia services are being performed.

17-95-1203. Arkansas State Medical Board – Powers and duties under subchapter.

(a) The Arkansas State Medical Board shall:

(1) License and renew the licenses of qualified applicants under this subchapter;

(2)(A) Maintain a current list of every person licensed to practice under this subchapter.

(B) The list under subdivision (a)(2)(A) of this section shall show:

(i) The licensee's last known place of residence;
and

(ii) The date and number of the license;

(3) Discipline persons who violate this subchapter and incur necessary expenses of the prosecution;

(4) Keep a record of all proceedings of the board under this subchapter and make the record available to the public for inspection during reasonable business hours;

(5) Conduct hearings regarding discipline of a licensee under this subchapter or denial, revocation, or suspension of a license under this subchapter; and

(6)(A) Share information on a case-by-case basis of a person whose license has been suspended, revoked, or denied under this subchapter.

(B) The information under subdivision (a)(6)(A) of this section shall include:

(i) The name of the person whose license has been suspended, revoked, or denied;

(ii) The type and cause of the action;

(iii) The date upon which a penalty is imposed;

(iv) The type of penalty imposed; or

(v) The duration of the penalty imposed.

(C) The information under subdivision (a)(6)(A) of this section shall be available for public inspection during reasonable business hours and shall be supplied to licensing entities in other states upon request.

(b) The board may:

(1) Promulgate rules as necessary to enforce this subchapter consistent with state law;

(2) Employ personnel as necessary to assist the board in performing its duties under this subchapter;

(3) Establish license renewal requirements and procedures under this subchapter, including without limitation continuing medical education hours, as deemed appropriate by the board ;

(4)(A) Secure the services of resource consultants as deemed necessary by the board in performing its duties under this subchapter.

(B) The board shall reimburse resource consultants for all actual and necessary expenses incurred while engaged in consultative service to the board; and

(5) Establish and assess fees under this subchapter by rule.

17-95-1204. Licensing.

(a) A person applying for licensure as an anesthesiologist assistant under this subchapter shall submit an application to the Arkansas State Medical Board on forms approved by the board.

(b) An application under this section is not effective for more than one (1) year from the date of the original submission of the application and fee, after which time an applicant shall submit to the board a new

application and fee.

(c)(1) To qualify for licensure under this subchapter, an applicant under this section shall obtain a passing score on the examination administered through the National Commission for Certification of Anesthesiologist Assistants.

(2) A passing score under subdivision (c)(1) of this section shall be established by the National Commission for Certification of Anesthesiologist Assistants.

17-95-1205. Supervisory relationship.

(a) An anesthesiologist or anesthesiologist group, upon entering into a supervisory relationship with a licensed anesthesiologist assistant, shall file with the Arkansas State Medical Board a written protocol, including without limitation:

(1) The name, address, and license number of the anesthesiologist assistant;

(2) The name, address, license number, and United States Drug Enforcement Administration registration number of each anesthesiologist who will supervise the anesthesiologist assistant;

(3) The address of the anesthesiologist assistant's primary practice location where the anesthesiologist assistant may practice;

(4) The date the protocol was developed and the date of all revisions;

(5) The designation and signature of the primary supervising anesthesiologist;

(6) The signatures of the anesthesiologist assistant and all supervising anesthesiologists;

(7) The duties and functions of the anesthesiologist assistant;

(8) The conditions or procedures that require the provision of care by a supervising anesthesiologist; and

(9) The procedures to be followed in the event of an anesthetic emergency.

(b) The protocol required under subsection (a) of this section shall be filed with the board before the anesthesiologist assistant begins practice with the supervising anesthesiologist or anesthesiology group.

(c) An anesthesiologist assistant may perform the following duties

under the direct supervision of an anesthesiologist:

(1) Obtain a comprehensive patient history and present the history to the supervising anesthesiologist;

(2) Pretest and calibrate anesthesia delivery systems and monitor, obtain, and interpret information from the anesthesia delivery systems;

(3) Assist the supervising anesthesiologist with implementation of monitoring techniques;

(4) Establish basic and advanced airway interventions, including intubations of the trachea and performance of ventilator support;

(5) Administer intermittent vasoactive drugs and start and adjust vasoactive infusions;

(6) Administer anesthetic drugs, adjuvant drugs, and accessory drugs;

(7) Perform epidural anesthetic procedures and spinal anesthetic procedures;

(8) Administer blood, blood products, and supportive fluids;

(9) Support life functions during the administration of anesthesia, including without limitation induction and intubation procedures, the use of appropriate mechanical supportive devices, and the management of fluids, electrolytes, and blood component balances;

(10) Recognize and take appropriate corrective action for abnormal patient responses to anesthesia, adjunctive medication, or other forms of therapy;

(11) Participate in management of the patient while in the post-anesthesia recovery area, including the administration of supporting fluids; and

(12) Place special peripheral and central venous and arterial lines for blood sampling and monitoring as appropriate.

(d)(1) The supervising anesthesiologist shall delegate only tasks and procedures to the anesthesiologist assistant that are within the supervising anesthesiologist's scope of practice.

(2) The anesthesiologist assistant may work in any setting that is within the scope of practice of the supervising anesthesiologist's practice.

(e) Continuity of supervision in practice settings requires the

anesthesiologist assistant to document in the anesthesia record any change in supervising anesthesiologist.

(f) The tasks and procedures performed by the anesthesiologist assistant shall be documented in the appropriate medical record.

/s/L. Johnson