

**RCW 18.71D.040 Permitted duties to be delegated.** (1) An anesthesiologist assistant may not exceed the scope of their supervising anesthesiologist's practice and may assist with those duties and responsibilities delegated to them by the supervising anesthesiologist, and for which they are competent to assist with based on their education, training, and experience. Duties which an anesthesiologist may delegate to an anesthesiologist assistant include but are not limited to:

- (a) Assisting with preoperative anesthetic evaluations, postoperative anesthetic evaluations, and patient progress notes, all to be cosigned by the supervising anesthesiologist within 24 hours;
- (b) Administering and assisting with preoperative consultations;
- (c) Under the supervising anesthesiologist's consultation and direction, order perioperative pharmaceutical agents, medications, and fluids, to be used only at the facility where ordered, including but not limited to controlled substances, which may be administered prior to the cosignature of the supervising anesthesiologist. The supervising anesthesiologist may review and if required by the facility or institutional policy must cosign these orders in a timely manner;
- (d) Changing or discontinuing a medical treatment plan, after consultation with the supervising anesthesiologist;
- (e) Calibrating anesthesia delivery systems and obtaining and interpreting information from the systems and monitors, in consultation with an anesthesiologist;
- (f) Assisting the supervising anesthesiologist with the implementation of medically accepted monitoring techniques;
- (g) Assisting with basic and advanced airway interventions, including but not limited to endotracheal intubation, laryngeal mask insertion, and other advanced airways techniques;
- (h) Establishing peripheral intravenous lines, including subcutaneous lidocaine use;
- (i) Establishing radial and dorsalis pedis arterial lines;
- (j) Assisting with general anesthesia, including induction, maintenance, and emergence;
- (k) Assisting with procedures associated with general anesthesia, such as but not limited to gastric intubation;
- (l) Administering intermittent vasoactive drugs and starting and titrating vasoactive infusions for the treatment of patient responses to anesthesia;
- (m) Assisting with spinal and intravenous regional anesthesia;
- (n) Maintaining and managing established neuraxial epidurals and regional anesthesia;
- (o) Assisting with monitored anesthesia care;
- (p) Evaluating and managing patient controlled analgesia, epidural catheters, and peripheral nerve catheters;
- (q) Obtaining venous and arterial blood samples;
- (r) Assisting with, ordering, and interpreting appropriate preoperative, point of care, intraoperative, or postoperative diagnostic tests or procedures as authorized by the supervising anesthesiologist;
- (s) Obtaining and administering perioperative anesthesia and related pharmaceutical agents including intravenous fluids and blood products;
- (t) Participating in management of the patient while in the preoperative suite and recovery area;

(u) Providing assistance to a cardiopulmonary resuscitation team in response to a life-threatening situation;

(v) Participating in administrative, research, and clinical teaching activities as authorized by the supervising anesthesiologist; and

(w) Assisting with such other tasks not prohibited by law under the supervision of a licensed anesthesiologist that an anesthesiologist assistant has been trained and is proficient to assist with.

(2) Nothing in this section shall be construed to prevent an anesthesiologist assistant from having access to and being able to obtain drugs as directed by the supervising anesthesiologist. An anesthesiologist assistant may not prescribe, order, compound, or dispense drugs, medications, or devices of any kind. [2024 c 362 s 4.]