

Department of Anesthesia

Title:

**"Ten Commandments" of the
Anesthesia Care**

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In 1998 we initiated the "Ten Commandments" of the Anesthesia Care Team to ensure that physicians and nurses worked together in a collegial atmosphere of respect and cooperation. While issued under a humorous rubric, they are time-tested and remain important. They should guide all members of the Department in their interactions with colleagues.

Preamble:

We are fortunate to have a Department of Anesthesia that comprises a mature and dedicated group of physician consultants and nurse practitioners in the fields of anesthesia, pain management and critical care. They serve as excellent role models for the student nurse anesthetists and resident physicians in training. It is therefore incumbent on all members of the Department to create the proper atmosphere that both continuously improves patient care and fosters a climate of ongoing education. To those ends, we resolve:

1. All members of the Department of Anesthesia are committed to the concept of the Anesthesia Care Team.
2. All members of the Anesthesia Care Team will treat their colleagues with comity and respect.
3. There will be discussion of the planned anesthetic management before the start of every case; no anesthetic can begin before the discussion.
4. The manner in which the member of the Anesthesia Care Team practices is STYLE; that which is discussed preoperatively is SUBSTANCE.
5. Physician orders and instructions as well as Department policy are SUBSTANCE.
6. What has not been discussed in pre-anesthetic planning among the Team members is STYLE.
7. No direct order by the attending anesthesiologist can be disregarded except in emergency conditions.
8. The politics of the respective national organizations will not be brought into the operating room and should be transparent to the patients under our care at all times.

9. No member of the Anesthesia Care Team need undertake or assume the care of a patient if the clinician is unfamiliar or uncomfortable with the anesthetic management.
10. All members of the Anesthesia Care Team should properly identify themselves and their role in the anesthetic management to the patient.
11. An attending Anesthesiologist cannot “take over” a case without going in the room to see the anesthetic in progress and informing the resident, SRNA or CRNA that he/she has taken the case over.
12. There is no automatic guarantee of relief at a fixed time for any member of the ACT (Attending, CRNA, or resident). The Anesthesiologist “running the floor” will relieve people as the clinical caseload permits.
13. No staff member, whether MD, CRNA or resident may leave at the end of the day before checking with the Anesthesiologist “running the floor”. This includes satellite locations.
14. Late call is shared by all if you take the night call, you take late call. If you don’t take late call, there is no expectation of relief in the evening before your assigned cases are finished.
15. The attending Anesthesiologist will visit each room once per hour at a minimum. The Anesthesiologist supervising CRNAs, Residents or SRNAs is ultimately responsible for ensuring breaks for all members of his/her team.
16. The “division of labor” within the ACT is to be determined by discussion among the ACT members. This would include, but not be limited to: Setting up the room, starting the IV, getting the drugs, and going for the patient.
17. The junior member of the Act cannot proceed beyond that point agreed upon in the discussion of the planned anesthetic management without the attending Anesthesiologist being present. (See Commandment 5).
18. An attending Anesthesiologist must be present for all anesthetic inductions. The attending Anesthesiologist must complete the FINAL ATTENDING EVALUATION (including risks, benefits and alternatives/options) prior to the induction.
19. Post-anesthetic notes are required the day after surgery for all AM Admit and In-patients. Ultimately it is the responsibility of the attending Anesthesiologist to ensure that it has been done by a member of the ACT.
20. Collegial respect and discussion will solve most of the problems encountered in any day.