At a Glance

CRNAs are highly valued in today’s healthcare environment because they deliver the same safe, high-quality anesthesia care as other anesthesia professionals but at a lower cost, helping to control rising healthcare costs.

- Managed care plans recognize CRNAs for providing high-quality anesthesia care with reduced expense to patients and insurance companies.
- A landmark 2010 study published in Nursing Economic$ (updated in 2016) shows that a CRNA working as the sole anesthesia provider is 25 percent more cost-effective than the next most cost-effective anesthesia delivery model.
- The mean annual salary of anesthesiologists is approximately 2½ times greater than the salary of CRNAs. Because Medicare pays the same fee for an anesthesia service whether it is provided by a CRNA, an anesthesiologist or both working together, the higher compensation of the anesthesiologist is borne by the hospital, healthcare facility or the patient.

CRNAs are highly educated advanced practice registered nurses who deliver anesthesia in exactly the same ways, for the same types of procedures and just as safely as physician anesthesiologists. CRNAs are well prepared to respond appropriately in emergency situations.

- CRNAs are trained to administer every type of anesthesia to all types of patients in any healthcare setting where anesthesia is delivered. All anesthesia professionals give anesthesia the same way.
- Nurse anesthetists are required to have a minimum of 7-8½ years of education, training and experience before they can become a CRNA. Today’s CRNAs enter the workforce with a master’s or doctoral degree.
- 97 percent of employers report high satisfaction levels with the preparedness of recently graduated CRNAs.
- CRNAs have an average of 2.9 years of critical care experience before entering a nurse anesthesia program, the only anesthesia professionals with this level of experience prior to beginning their formal anesthesia education.

CRNAs deliver essential healthcare in thousands of communities and are able to prevent gaps in access to anesthesia services, especially in rural, inner-city and other medically underserved areas of the country.

- The nation’s nearly 54,000 nurse anesthetists deliver more than 49 million anesthetics to patients each year.
- CRNAs practice in every healthcare setting where anesthesia is delivered, from traditional hospitals to physicians’ offices.
- CRNAs are the primary providers of anesthesia care in rural America; to maternity patients; in the Veteran’s Administration and U.S. military; and in many medically underserved inner-city communities.

CRNAs consistently deliver upon their main mission—to achieve a safe anesthesia experience and quality outcome for each patient.

- Numerous studies confirm that anesthesia care is equally safe regardless of whether it is provided by a CRNA working alone, an anesthesiologist working alone or a CRNA working with an anesthesiologist, most notably the study titled “No Harm Found When Nurse Anesthetists Work Without Supervision by Physicians” published in 2010 in Health Affairs.
- The Institute of Medicine (now the Health and Medicine Division of the National Academies of Sciences, Engineering and Medicine), the American Association of Nurse Anesthetists, and the American Society of Anesthesiologists all say that anesthesia care is nearly 50 times safer than it was just 30 years ago.