UTHealth Houston
Cizik School of Nursing

Policy Number: D8110

Policy Title: BSN-DNP Nurse Anesthesia Program – Professional Conduct

Subject: Professional Conduct

Scope: Students enrolled in the BSN-DNP in Nurse Anesthesia Program

Responsible Office:
The Nurse Anesthesia Division

Effective Date: 4/2014

Date Reviewed/Revised: 2/2026

Next Scheduled Review Date: 2/2029

Responsible Executive: BSN-DNP in Nurse Anesthesia Program Director

I. POLICY AND GENERAL STATEMENT

The following guidelines will apply to the educational preparation, experience, knowledge, and ability of the doctoral nurse anesthesia student enrolled at UTHealth Houston Cizik School of Nursing. Failure to adhere to this policy will result in counseling and may result in failure of the course and/or dismissal from the program.

II. DEFINITIONS

Define any terms with specific meaning for the policy/procedure.

III. PROCEDURE

A. Nurse anesthesia doctoral students are expected to treat all persons with respect and to conduct themselves in a professional manner, and be prepared to perform accordingly in the clinical setting/area.

B. Standards of Doctoral Nurse Anesthesia Student Practice: These standards for practice shall establish a minimum acceptable performance level for doctoral nurse anesthesia student practice. The doctoral nurse anesthesia student shall:

1. Provide standard of care anesthesia services, without discrimination in regard to age, disability, economic status, gender, sexual orientation, national origin, race, religion, or health problem of the patient served;

2. Use a systematic approach to provide standard of care, evidence-based, patient-specific, goal-directed anesthesia care by:
    a. maintaining vigilance in the delivery of patient care;
    b. conducting comprehensive equipment checks prior to administration of anesthesia;
    c. performing complete preanesthetic evaluations on patients prior to providing anesthesia services;
    d. formulating an anesthesia plan of care before providing anesthesia services;

e. implementing appropriate, evidence-based, standard of care anesthesia management;
f. evaluating and managing the patient's physiologic responses to anesthetic intervention and therapeutic procedures;
g. recognizing and managing complications during provision of anesthesia services;
h. revising the anesthetic plan of care based on evaluation;
i. providing clear, handoff communication to licensed providers to ensure appropriate transfer and continuity of care;
j. performing postanesthetic evaluations on available patients to ascertain quality of provided anesthetic interventions and outcomes.

3. Institute appropriate interventions to stabilize a patient's condition and/or prevent iatrogenic complications;

4. Clarify management regimens that the doctoral nurse anesthesia student has reason to believe is inaccurate, non-efficacious or contraindicated by consulting with the appropriate supervising preceptor;

5. Know the rationale for all anesthetic interventions, administered pharmacologic agents, and monitoring modalities and correctly recommend or administer the same;

6. Accurately identify, manage, report, and document the patient's physiologic responses to anesthesia and the surgical/therapeutic procedure in a timely manner;

7. Implement measures to promote and maintain a safe environment for patients and others;

8. Implement measures to prevent exposure to infectious pathogens and communicable conditions;

9. Respect the patient's right to privacy by protecting confidential information unless obligated or allowed by law to disclose the information;

10. Promote and participate in patient education and counseling based on health needs;

11. Collaborate with the patient, members of the health care team, and when appropriate, the patient's family in the interest of the patient's health care;

12. Consult with appropriate licensed practitioners and make referrals as appropriate to provide appropriate management and continuity of care;

13. Accept only the assignments that are commensurate with one's own educational preparation, experience and knowledge and ability;

14. Obtain instruction and supervision as necessary when implementing procedures and practice;

15. Be responsible for one's own continuing competence in advanced nursing practice and individual professional growth; .

C. Professional Clinical Conduct: The professional conduct rules are intended to protect patients and the public from incompetent, unethical, or illegal conduct. The purpose of these rules is to identify unprofessional or dishonorable behaviors of the doctoral nurse anesthesia student, which the faculty of the school believes are likely to deceive, defraud, or injure patients or the public. These behaviors include, but are not limited to:

1. Failing to assess and evaluate a patient's status or failing to institute intervention which is indicated to stabilize a patient's condition or prevent complications;

2. Failing to recommend or administer medications or implement management modalities or both in a responsible manner;

3. Failing to accurately or completely identify, manage, report, and/or document a patient's physiologic response to anesthesia or to the therapeutic procedure;

4. Failing to make entries, destroying entries, and/or making false entries in records pertaining to care of patients (including programmatic case record documentation);

5. Causing or permitting physical emotional or verbal abuse or injury to the patient or the public or failing to report the same to an appropriately licensed anesthesia practitioner;

6. Disclosing confidential information or knowledge concerning a patient or healthcare facility except where required or allowed by law;

7. Accepting an assignment when one's physical, mental or emotional condition prevents the safe and effective delivery of care or accepting an assignment that does not take into consideration patient safety or for which one lacks the educational preparation, experience, knowledge or ability;

8. Failing to obtain instruction or supervision when implementing procedures or practices for which one lacks appropriate educational preparation, ability, knowledge and/or experience;

9. Leaving a patient under anesthesia or the clinical setting/area without notifying one's supervising preceptor (or faculty);

10. Failing to follow the policy and procedure for the wastage of medication in the facility where the student is functioning at the time of the incident;

11. Misappropriating medications, supplies, equipment, or personal items of the patient, healthcare facility, or any other persons or entity or failing to take precautions to prevent such misappropriation;

12. Offering, giving, soliciting or receiving or agreeing to receive, directly or indirectly, any fee or other consideration to or from a third party for the referral of a patient in connection with the performance of doctoral nurse anesthesia student duties;

13. Providing information that is false, deceptive, or misleading in connection with one's practice as a doctoral nurse anesthesia student (including programmatic clinical experience logs);

14. Holding one's self out to the public or patients as a CRNA or nurse anesthetist;

15. Obtaining employment as a nurse anesthetist by title or function;

16. Encumbrance of RN licensure; allowing RN licensure, ACLS and/or PALS verifications to expire;

17. Failing to obtain or maintain professional liability insurance specific for nurse anesthesia practice;

18. Removal, or request for removal (including future rotations), from a clinical site due to failure to follow institutional or practice group policy/procedure (including reporting/release for duty procedures) or substandard care/practice;

19. Failing to adhere to the Code of Ethics for the Certified Registered Nurse Anesthetist and/or the Standards for Nurse Anesthesia Practice;

    Code of Ethics for the Certified Registered Nurse Anesthetist

    https://www.aana.com/docs/default-source/practice-aana-com-web-documents-(all)/code-of- ethics-for-the-crma.pdf?sfvrsn=d70049b1_6

    Standards for Nurse Anesthesia Practice

    https: //www.aana.com/docs/default-source/practice-aana-com-web-documents-(all)/standards-for-nurse-anesthesia-practice.pdf?sfvrsn=e00049b1_18

20. Evidence of substandard, unsafe, unethical or unprofessional behavior or clinical performance;

21. Disregard of school, programmatic or clinical policies and procedures; gross insubordination; habitual absenteeism or tardiness;

22. Social Media: doctoral nurse anesthesia students are expected to adhere to the Texas Board of Nursing Position Statement 15.29, Professional Boundaries including Use of Social Media/or Nursing (January, 2020). To ensure the mission to protect and promote the welfare of the people of Texas, the Texas Board of Nursing supports both the guidelines and principles of social media use by the National Council of State Boards of Nursing (NCSBN) and American Nurses Association (ANA). In accordance with the NCSBN guidelines and Board Rules, it is the Board's position that:

    > *Nurses have an ethical and legal obligation to maintain patient privacy and confidentiality at all times and when using social media do not identify patients by name or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy. Nurses must promptly report any identified breach of confidentiality or privacy [Board Rule 217.11(1)(E) and (K)].*
    >
    > *Nurses maintain professional boundaries in the use of electronic media. The nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Nurses do not refer to*

patients in a disparaging manner, even if the patient is not identified or transmit information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient [Board Rule 217.11(1)(J)].

Nurses must provide nursing services without discrimination and do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments [Board Rules 217.11(1)(L) and 217.12 (6)(C), (D), and (F)].

Nurses must be aware of and comply with all laws and rules, including employer policies regarding the use of electronic devices including employer-owned computers, cameras and use of personal devices in the work place. In addition, nurses must ensure appropriate and therapeutic use of all patient-related electronic media, including patient- related images, photos, or videos in accordance with applicable laws, rules, and institutional policies and procedures [Board Rule 217.11(1)(A)]

https://www.bon.texas.gov/practice_bon_position_statements.asp

Adapted from The Statutes Regulating the Practice of Professional Nursing, Texas Board of Nursing (Rule 217.11. Standards of Professional Nursing Practice, Rule 217.12 Unprofessional Conduct).

IV. CONTACTS

List the phone number and email/web address of the office and/or person who is the subject matter expert on this policy and can answer questions regarding application and interpretation of the policy.

Contact	Telephone	Email/Web Address
BSN-DNP in Nurse Anesthesia Program Director	713-500-2100	soninfo@uth.tmc.edu