



Guidelines on Minimum Assistance Required for the Safe Conduct of Anaesthesia

Version	Effective Date
1	FEB 1993 (Reviewed FEB 2002)
2	APR 2012
3	JUN 2017
4	DEC 2024

Document No.	HKCA – T7 – v4
Prepared by	College Guidelines Committee
Endorsed by	HKCA Council
Next Review Date	2028



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1. INTRODUCTION

1.1 The presence of a trained assistant for the anaesthesiologist during the conduct of anaesthesia is a major contributory factor to safe patient management.

1.2 The assistant must have undertaken appropriate training in order to provide effective support.

2. SCOPE

2.1 These recommendations apply wherever general anaesthesia, regional anaesthesia, and monitored anaesthetic care are administered by an anaesthesiologist.

3. PRINCIPLES

3.1 The assistant may be an assistant specifically employed and trained for the task, or a nurse assistant with appropriate training.

3.2 The assistant

3.2.1 Should not have any other duties that would prevent them from providing dedicated assistance to the anaesthesiologist during anaesthesia.

3.2.2 Must be present during preparation for and induction of anaesthesia. The assistant must remain under immediate direction of the anaesthesiologist until instructed that this level of assistance is no longer required.

3.2.3 Must be immediately available as required during the maintenance of anaesthesia.

3.2.4 Must be present at the conclusion of anaesthesia.

3.2.5 Staff employed for the above task must be adequately trained for their role.

3.2.6 Should maintain and upgrade their knowledge and skills with education activities. The assistant should receive training on use of new anaesthetic technique and equipment.



3.3 There must be provision for a service to ensure the availability and maintenance in good order of equipment used in accordance with the College Guideline T2 *Recommended Minimum Facilities for Safe Anaesthetic Practice in Operating Suites* and College Guideline T8 *Recommended Minimum Facilities for Safe Anaesthetic Practice outside Operating Suites*.

4. STAFFING

4.1 The assistant to the anaesthesiologist is an essential member of the staff establishment in all locations where anaesthesia is administered.

4.2 Management must ensure that staff establishments and rostering practices allow the allocation of an assistant to the anaesthesiologist for every case where anaesthesia is administered.

4.3 The number and status of assistants in the staff establishment will be determined by the number and types of procedures undertaken by the anaesthesia service at each facility.

4.4 If there is insufficient number of assistants to an anaesthesia service, the clinical practice should be limited to ensure a safe, quality-based patient care.

4.5 The duties of the assistants in each location must be specified in an appropriate job description.

4.6 For administrative and educational reasons, where a number of assistants are employed, a nurse or one of their members who is appropriately trained should be designated as the supervisor.

4.7 Trainee assistants may work independently but must be supervised. The level of supervision depends on the experience of trainees and the supervisor must be available in the institution.

4.8 Whilst assisting the anaesthesiologist, the assistant must be wholly and exclusively responsible to that anaesthesiologist.



5. EDUCATIONAL REQUIREMENTS FOR ASSISTANTS

5.1 A trained assistant to the anaesthesiologist must have completed a training program, which at a minimum covers the knowledge, skills, and competencies outlined in this document. The duration of the training program will be determined by the program provider taking into account recognition of prior learning, and achievement of the core competencies listed below.

5.2 As a minimum, the training program must include:

5.2.1 Input from anaesthesiologists in curriculum development, preparation and delivery of relevant lectures, practical supervision and assessments. For facilities for specialized services with homogeneous case mix, such as dental unit, endoscopy centers, ophthalmology surgery or in-vitro fertilization clinic, the specialist anaesthesiologist in-charge of the anaesthetic service shall determine the required skills and knowledge when designing the training program for anaesthetic assistants.

5.2.2 Teaching and assessment on elements of the basic sciences appropriate to anaesthesia, including physiology, pharmacology, anatomy and clinical measurement.

5.2.3 Teaching and assessment on non-technical skills, including communication, working in a team environment and situational awareness.

5.2.4 Supervised practical experience in anaesthetising locations.

5.2.5 Assessments, which confirm the participants can demonstrate the knowledge and skills articulated within the core competencies, including but not limited to a combination of direct observation and examinations.

6. CORE COMPETENCIES

6.1 Understanding of the following topics is necessary and must be reinforced by appropriate practical experience obtained while providing assistance to anaesthesiologists.

6.2 The assistant must demonstrate, be assessed on, and maintain the core competencies outlined below.



6.3 Assistants to the anaesthesiologist who work in specialised scopes of practice (for example cardiac or paediatric anaesthesia) must demonstrate and maintain the core competencies outlined below, as well as any additional skills required.

6.4 Standards

- 6.4.1 Understand and adhere to anaesthesia standards and protocols.
- 6.4.2 Apply workplace, occupational health and safety regulations.
- 6.4.3 Liaise with other health professionals and healthcare workers.
- 6.4.4 Discuss legal responsibilities including confidentiality.

6.5 Anaesthesia equipment

6.5.1 Describe the care, use and servicing of all equipment related to the provision of anaesthesia services including:

- Anaesthesia delivery systems and ventilators
- Monitoring equipment including ultrasound devices
- Airway devices including fiberoptic instruments
- Intravascular devices

6.5.2 Describe the cleaning and sterilisation of equipment related to the provision of anaesthesia services.

6.5.3 Describe the various infection control issues for staff, patients and equipment.

6.5.4 Apply measures to prevent pollution.

6.6 Safety

6.6.1 Describe and apply safety principles to reduce potential hazards that may arise from the following:

- Electricity
- Radiation
- Lasers
- Gas cylinders and pipelines
- Biological fluid exposure



6.6.2 Ensure staff and patient safety when utilising equipment in anaesthetising locations

6.7 Anaesthesia Techniques

6.7.1 Discuss anaesthesia techniques involving all areas of perioperative practice including:

- Participation and preparation of surgical safety checklist
- Patient positioning
- Patient transfer
- Monitoring
- Induction
- Securing the airway
- Maintenance
- Emergence

6.8 Regional anaesthesia

6.8.1 Describe regional and local anaesthesia, including all commonly used techniques for regional and local blockade

6.9 Monitored anaesthetic care

6.9.1 Describe the principles of monitored anaesthetic care for diagnostic and interventional medical, dental or surgical treatment as articulated in College Guideline P16 *Guidelines on Monitored Care by an Anaesthesiologist*.

6.10 Invasive techniques and ultrasound

6.10.1 Assist the anaesthesiologists with invasive techniques including insertion of peripheral, central venous and arterial lines.

6.10.2 Assist the anaesthesiologists with ultrasound techniques for nerve and vascular location.

6.10.3 Outline the ongoing management of central venous catheters and arterial lines.

6.10.4 Discuss the use of endoscopy of the airways and rapid infusion devices.



6.11 Therapeutics

6.11.1 Describe the safe storage, preparation and use of drugs, fluids and other therapeutic substances, which are commonly administered during anaesthesia.

6.11.2 Assist with the handling of drugs, fluids and therapeutic substances as directed by the anaesthesiologist.

6.12 Emergency care

6.12.1 For the following emergency situations:

- Cardiopulmonary resuscitation
- Management of the difficult airway, failed intubation and “can’t intubate, can’t oxygenate”
- Massive blood loss
- Anaphylaxis
- Malignant hyperthermia

6.12.2 Understand the algorithms for crisis management.

6.12.3 Describe the role of the anaesthetic assistant.

6.12.4 Provide the necessary equipment.

6.12.5 Assist the anaesthesiologist as required.

6.13 Postoperative pain

6.13.1 Outline postoperative pain management alternatives and list the equipment that may be required.

6.14 Work environment

6.14.1 Discuss and demonstrate non-technical skills including:

- Communication
- Working in a team environment
- Situational awareness



7. REFERENCE

- Australian and New Zealand College of Anaesthetists PS8 Statement on the Assistant for the Anaesthetist (2016)
- Association of Anaesthetists of Great Britain and Ireland Guideline: The Anaesthesia Team 3 (May 2010)