Job Class Profile:  Anaesthesia Assistant I

Pay Level:  CG-38  Point Band:  848-881

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**JOB SUMMARY**

The Anaesthesia Assistant I performs full working level technical and therapeutic work in anaesthesia respiratory therapy while assisting an Anesthesiologist in patient assessment, treatment and education. Duties include the establishment and management of ventilator life support, invasive and non-invasive monitoring and airway management in the operating room and any facility location where anesthesia services may be needed; assisting in the induction, maintenance, emergence and the recovery of the patient during the period of preoperative care; co-ordinating, implementing and managing a preventative maintenance program for anesthesia and hemodynamic monitoring equipment; and functioning in an independent capacity while performing the full range of duties and may perform brief periods of relief for the Anesthesiologist, provided the patient is hemodynamically stable.

**Key and Periodic Activities**

— Performs clinical duties during anesthesia pre-op including performing history and physical on patient pertaining to anesthesia and reports to the Anaesthesiologist; reviews patient blood work and x-rays and reports any findings to the Anaesthesiologist; assists in the preparation of the patient for surgery and administers medications as requested by the Anesthesiologist; and assists with regional anesthesia procedures by preparing equipment and injection of local anesthetic medications.

— Performs, or assists with, airway management, including endotracheal intubation, insertion of laryngeal masks and resuscitator/mask ventilation, as well as, insertion of indwelling devices such as intravenous lines, intra-arterial catheters, nasogastric tubes, etc., with the use of local anaesthetics.

— Monitors patient progress in the operating room; delivers prescribed pharmaceutical agents under the direction of Anaesthesiologist, via injection, inhalation and oral; updates anaesthesia monitoring records; and reports patient status to the Anaesthesiologist.

— Administers prescribed pharmacological agents such as inhalational anaesthetics, neuromuscular blocking agents, vaspressors, benzodiazepines and narcotics to the patient under the guidance of the attending Anaesthesiologist, observing for side effects and efficacy of treatment before and during anaesthesia to ensure the patient responds appropriately.

— Monitors and adjusts patient therapeutics in relation to depth of anaesthesia, sedation, neuromuscular relaxation, etc., as per hospital protocols; assesses the patient’s physiological status during anaesthesia by monitoring vital signs and anaesthetic gases; advises the
Key and Periodic Activities

Anaesthesiologist of the patient’s status.
- Performs diagnostic duties such as blood sampling and analysis, pulmonary functioning testing, end tidal carbon dioxide (CO2) monitoring, pulse oximetry, transcutaneous monitoring, etc.
- Assists the Anaesthesiologist with difficult intubation procedures including patient preparation, procuring and setting up of specialized airway management equipment; physical positioning of the patient for the surgical procedures; verification and administration of blood and blood products; and with the insertion of Swan Ganz catheters and central venous catheters.
- Assists at the emergence from anaesthesia by delivering muscle relaxant reversal agents, aspirating secretions from the trachea and pharynx, removing laryngeal mask airways and endotracheal extubation of the patient; assists with the transfer of ventilated and/or anaesthetized patients to the post anaesthesia recovery room or to other areas of the hospital as required; and ensures accurate and complete anaesthetic records.
- Provides short-term relief for the Anaesthesiologist in the operating room as per hospital protocols; provides support for cases in Acute and Chronic Pain Clinics and in patient care areas external to the preoperative environment, and during bronchoscope procedures; responds to cardiac arrests and other emergency events in the operating room, post anaesthetic recovery room and other patient locations as per hospital protocols.
- Operates cell saver equipment to salvage and maintain the quality of blood transfused to patients.
- Sets up, tests, calibrates and operates patient care equipment; performs equipment verification procedures as per manufacturers’ recommendations or hospital protocols; maintains accurate records of preventative maintenance and equipment repair for risk/quality purposes; troubleshoots anaesthetic and anaesthesia related equipment and corrects diagnosed problems and/or refers action to biomedical service or company representatives.
- Provides clinical and technical instruction on aspects of anaesthesia monitoring and life support equipment to physicians and other health care professionals; acts as a preceptor for students in the operating room setting.
- Performs audits and workload measurements and maintains records and reports.

SKILL

Knowledge

General and Specific Knowledge:
- Anaesthesia, respiratory, nursing, ultrasound, pharmacy and biomedical engineering.
- New advancements in patient treatments, patient care outcomes and environmental safety.
- Organizational policies and procedures.

Formal Education and/or Certification(s):
- Minimum: 3 Year Specialized Program in Respiratory Therapy. Registration with the Canadian Society of Respiratory Therapists with a professional designation as a Registered Respiratory Therapist (RRT) or 3 Year Nursing Program or Undergraduate Degree in Nursing with licensure with the Association of Registered Nurses of Newfoundland and Labrador; plus post graduate Diploma in Anaesthesia Assistant Program.
— Certification in Basic Life Support, Advanced Cardiac Life Support (Preoperative Program), and Neonatal Resuscitation Program (Child Health Program).

**Years of Experience:**
— Minimum: 1-2 years of experience.

**Competencies:**
— Ability to calibrate and/or repair machines and equipment.
— Ability to operate machinery (medical equipment).
— Computer, communication, and patient assessment skills.
— Critical thinking and decision making.

**Interpersonal Skills**
— A range of interpersonal skills are used to perform activities such as listening; asking questions; communicating routine and complex information and direction to peers, nurses and physicians; providing care/comfort/nurturing to patients in care; providing in-service and orientation to students, physicians and other health professionals; gaining the co-operation of others to complete work; addressing issues and/or solving technical problems; dealing with upset or angry people face to face waiting for surgery; and providing advice or guidance to others.
— Communications occur with a range of contacts including employees within immediate work area and department; supervisors/managers, sales representatives, students, and patients; and with employees/peers in other departments, suppliers/contractors, professional associations and professional advisors.
— The most significant contacts are with anaesthesiologists regarding patient care when required to take over while they leave the operating room for a break, where proper communication is essential in order to care for the patient while having surgery; other physicians, supervisor, and health care professionals regarding patient care, patient safety and specialized equipment; and anaesthesia residents, anaesthesia respiratory therapist, respiratory therapy students and support staff while teaching/guiding/orienting students on different equipment, procedures and techniques required in their studies.

**EFFORT**

**Physical Effort**
— The demands of the job regularly results in considerable fatigue requiring the need for strength and endurance.
— Regularly lifts up to 25 lbs., but occasionally lifts objects over 50 lbs., and uses gross motor skills when lifting the head of a patient while inserting a breathing tube, positioning patients for surgery from their back to their stomach, pushing patients on stretchers from room to room, pushing heavy anaesthesia machines and moving large medical gas tanks.
— Regularly stands and walks in the performance of activities while moving patients and equipment from operating room to recovery or intensive care or to run quickly in the event of an emergency that needs assistance in the operating room; occasionally sitting (during surgery) and climbing (stepladders to reach for supplies).
— Occasionally works in awkward and cramped positions when anaesthetizing patients and having to use instruments needed to perform the procedure.
— When in surgery, where a lot of bleeding is experienced, must simultaneously operate a blood recovery machine, a rapid blood administration machine along with several medication pumps that contain different drugs.

— Uses fine finger or precision work on a regular basis when repairing and assembling anaesthesia related equipment (anaesthesia monitors, suction regulators, medical gas equipment and electronic charting).

**Concentration**

— **Visual** concentration is required when observing patients during surgery, especially when relieving the anaesthesiologist for a break, while observing the monitors and patient for blood pressure, electrocardiogram (EKG), oxygen level and respiratory changes. Alertness and awareness with eyes as a result of moving from the monitors to the patient and being cognitive of the numerical values and the wave forms that are displayed on the monitor.

— **Auditory** concentration includes listening for alarms on ventilator or monitors, hearing acuity of patients’ lungs, and determining whether patients are breathing adequately using a stethoscope.

— Other sensory demands include **touching** a patient during a procedure to provide resuscitation or ventilation, as well as to administer medication. Uses **smell** to detect an anaesthetic gas agent leak during surgery.

— **Repetitive tasks that require alertness** are monitoring a patient when the anaesthesiologist leaves the operating room for a break and watching a monitor with 4-6 waveforms across a screen for 10-15 minutes at a time numerous times a day.

— **Eye/hand coordination** is required when giving medications while moving patients and when calibrating, repairing or operating anaesthetic equipment.

— **Time pressures, deadlines and/or interruptions** include emergencies, changes in operating room scheduled surgeries, the availability of medical residents and unscheduled events.

— **Exact results and precision** is required for the calibration of patient equipment ranging from life support to diagnostics.

**Complexity**

— Tasks and activities are different/unrelated and require the use of a broad range of skills, and a diversity of knowledge. While some are repetitive/well defined, unrelated aspects include patient care, technical functions related to equipment/systems and providing instruction to students and other health professionals.

— Constantly deals with highly technical tasks or problems and challenges/problems/issues where ideas for solutions may be provided in a team setting.

— Typical complexities include patient assessment and care while relieving the anaesthesiologist during surgery and technical problems associated with equipment/systems and inventory.

— References used to address challenges/problems/issues include anaesthesiologists, supervisor, professional practice consultant, biomedical staff, vendor representatives, national list services, operational manuals, internet websites and policies and procedures.

**RESPONSIBILITY**

**Accountability and Decision-Making**
— Work tasks and activities are somewhat prescribed or controlled.
— Requires approval for large-scale purchases of equipment and policy/procedure changes.
— Has discretion within predetermined limits and procedures in relation to ordering equipment and exercising discretion and judgment in patient care procedures, and treatments. Exercises a high degree of discretion with patients in relation to their care.
— Discretion and judgment are used to interpret directions and apply guidelines to make clinical decisions in patient care activities within professional standards. Functions with significant autonomy when monitoring a patient and administering medications to maintain anesthesia.
— Provides information, advice and guidance to members of the interdisciplinary team, patients, physicians, and students related to the anesthesia practice, treatments, procedures, tests and results.

**Impact**

— Work activities have an impact on the immediate work area, within the department, outside the department and organization, and on patients. The most significant impacts are on health and safety of patients.
— There are positive and negative impacts resulting from the decisions made regarding equipment (repair and purchase), processes and systems (instruct/guide physicians and residents on the proper use of equipment/systems), information (providing advice and guidance on anaesthesia and respiratory care to health care professionals), human resources (training staff), health and safety (patients) and corporate image. Errors that could occur involve patient management such as performing procedures incorrectly, giving patients wrong medications and errors in documentation.
— Work tasks and activities are somewhat prescribed or controlled. Works within scope of practice. Problems are identified within hours of identification and detected by either the employee or the physician and appropriate adjustments are made immediately. Safety policies and procedures are in place that would mitigate this happening.

**Development and Leadership of Others**

— Not responsible for supervision of staff.
— Provides development and leadership in the form of clinical and technical instructions to physicians and health care professionals on aspects of anaesthesia monitoring and life support equipment and acting as a preceptor for students in an operating room setting.

**WORKING CONDITIONS**

**Environmental Working Conditions**

— Required to wear masks (i.e. sometimes n-95 respirators), respirators for formulins or cidex spills, gowns and gloves for all invasive procedures, eye shields for protection against blood splatters and practices universal and safety precautions including yearly in-service for patient movement and positioning to prevent back injury and utilizing eye wash station for accidental eye contamination.
— There is limited likelihood of receiving minor cuts, bruises, and illnesses, and limited likelihood of receiving fractures, or a partial or total disability.
— Exposed to unusual/distracting noise (equipment used in surgery), fumes (bone cement fumes),
hazardous chemicals (formalin or cidex), infectious diseases (HIV, TB, H1N1, etc.), sharp objects (needles), odours (bowel surgery and purulent infections), bodily fluids and waste (needle sticks, draw and administer blood products), wet and slippery areas (operating room floors cleaned after each case), radiation (x-rays), physical dangers or threats (patients waking up from surgery are sometimes confused/aggressive), and heavy equipment (moving anaesthesia machines from operating room to angiography suite or large medical gas tanks).