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**AB-876 Nurse anesthetists: scope of practice.** (2025-2026)

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**Assembly Bill No. 876**

**CHAPTER 169**

An act to amend Sections 2826 and 2833.6 of, and to add Sections 2826.5, 2826.6, and 2826.7 to, the Business and Professions Code, relating to healing arts.

[ Approved by Governor October 01, 2025. Filed with Secretary of State October 01, 2025. ]

**LEGISLATIVE COUNSEL'S DIGEST**

AB 876, Flora. Nurse anesthetists: scope of practice.

Existing law, the Nurse Anesthetists Act, provides for the certification and regulation of nurse anesthetists by the Board of Registered Nursing. Existing law requires the utilization of a nurse anesthetist to provide anesthesia services in an acute care facility to be approved by the acute care facility administration and the appropriate committee, as defined, and at the discretion of the physician, dentist, or podiatrist. Existing law makes a nurse anesthetist who is not an employee of an acute care facility subject to the bylaws of the facility.

This bill would expressly provide that a nurse anesthetist is authorized to perform anesthesia services. The bill would define "anesthesia services" for purposes of the act to mean, among other things, preoperative, intraoperative, and postoperative care and pain management provided by a nurse anesthetist for patients receiving anesthesia pursuant to an order by a physician, dentist, or podiatrist for anesthesia services. Under the bill, an order by a physician, dentist, or podiatrist for anesthesia services for a specific patient would be deemed the authorization for the nurse anesthetist to select and implement the modality of anesthesia for the patient and to abort or modify the modality of anesthesia during the course of care. The bill would provide that the selection and administration of medication by a nurse anesthetist for preoperative, intraoperative, and postoperative care and for pain management purposes pursuant to an order by a physician, dentist, or podiatrist shall not constitute a prescription as that term is defined in a specified provision of federal law.

The bill would state that the provisions of the Nurse Anesthetists Act are declaratory of existing law and of an advisory opinion, including specified case law.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: no

**THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:**

**SECTION 1.** Section 2826 of the Business and Professions Code is amended to read:

**2826.** As used in this article:

(a) "Nurse anesthetist" means a person who is a registered nurse licensed by the board who has met standards for certification from the board. In the certification and recertification process, the board shall consider the standards of the National Board of

Certification and Recertification for Nurse Anesthetists, or a successor national professional organization approved by the board, and may develop new standards if there is a public safety need for standards more stringent than the councils' standards. In determining the adequacy for public safety of the councils' standards or in developing board standards, the board shall comply with the provisions of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

(b) "Accredited program" means a program for the education of nurse anesthetists that has received approval from the board. In the approval process, the board shall consider the standards of the Council on Accreditation of Nurse Anesthesia Education Programs and Schools and may develop new standards if the councils' standards are determined to be inadequate for public safety. In determining the adequacy for public safety of the councils' standards or in developing board standards, the board shall comply with the provisions of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

(c) "Anesthesia services" include all of the following:

(1) Preoperative, intraoperative, and postoperative care and pain management provided by a nurse anesthetist for patients receiving anesthesia pursuant to an order by a physician, dentist, or podiatrist for anesthesia services.

(2) Selecting and administering medication pursuant to an order for anesthesia services by a physician, dentist, or podiatrist.

(3) Providing emergency, critical care, and resuscitation services.

(d) "Appropriate committee" means the committee responsible for anesthesia practice that is responsible to the executive committee of the medical staff.

(e) "Trainee" means a registered nurse enrolled in an accredited program of nurse anesthesia.

(f) "Graduate" means a nurse anesthetist who is a graduate of an accredited program of nurse anesthesia awaiting initial certification results for not more than one year from the date of graduation.

**SEC. 2.** Section 2826.5 is added to the Business and Professions Code, to read:

**2826.5.** A nurse anesthetist is authorized to perform anesthesia services.

**SEC. 3.** Section 2826.6 is added to the Business and Professions Code, to read:

**2826.6.** An order by a physician, dentist, or podiatrist for anesthesia services for a specific patient shall be the authorization for the nurse anesthetist to select and implement the modality of anesthesia for the patient and to abort or modify the modality of anesthesia for the patient during the course of care.

**SEC. 4.** Section 2826.7 is added to the Business and Professions Code, to read:

**2826.7.** The selection and administration of medication by a nurse anesthetist, including controlled substances, for preoperative, intraoperative, and postoperative care and for pain management purposes pursuant to an order by a physician, dentist, or podiatrist shall not constitute a prescription, as that term is defined in Section 1300.01 of Title 21 of the Code of Federal Regulations.

**SEC. 5.** Section 2833.6 of the Business and Professions Code is amended to read:

**2833.6.** Nothing in this article shall be construed to restrict, expand, alter, or modify the existing scope of practice of, a nurse anesthetist and is declaratory of existing law and advisory opinion, including, but not limited to, California Society of Anesthesiologists v. Brown (2012) 204 Cal.App.4th 390.