

**Louisiana State Board of Medical Examiners**  
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**\*\*\* STATEMENT OF POSITION \*\*\***

**INTERVENTIONAL PAIN MANAGEMENT**  
**PROCEDURES ARE NOT DELEGABLE**

**June 2006**

**SUMMARY.** It is the opinion of the Louisiana State Board of Medical Examiners (the “Board”) that the injection of local anesthetics, steroids and analgesics, peripheral nerve blocks, epidural injections and spinal facet joint injections, when used for purposes of interventional pain management, constitute the practice of medicine, are not delegable by a physician to a non-physician by prescription, direction or supervision and may only be performed in this state by a Louisiana licensed physician. This guidance is provided by the Board to assist Louisiana physicians in the course of their professional practices.

**STATEMENT OF POSITION.** In recent months, the Board has received several requests for advisory opinions as to the legality, under applicable state law<sup>1</sup> of physician delegation, through prescription or order, of certain interventional pain management procedures to certified registered nurse anesthetist (“CRNAs”). CRNAs provide anesthetics and ancillary services and may administer local anesthetics perineurally, peridurally, epidurally, intrathetically, or intravenously, when prescribed by a physician and performed under physician direction and supervision.<sup>2</sup> In conformity with their education, training and scope of practice CRNAs, as a profession, were established to, for many years have, and currently remain essential providers of anesthesia for surgery and acute pain associated with surgery, under physician direction and supervision.

In contrast, physicians specializing in the management of chronic pain utilize some or all of these same procedures— injection of local anesthetics, steroids and analgesics, peripheral nerve blocks, epidural injections and spinal facet joint injections—as diagnostic tools to assess the cause of a patient’s chronic pain, as therapeutic modalities of treatment, and as a basis upon which to recommend additional treatment, including the need for surgical intervention and repeated or additional treatments. Due to the risk of death, paralysis, cerebral vascular accidents and infection attendant to these procedures, they are typically performed in a hospital or ambulatory surgery setting to afford patients the full range of life-saving measures that may result from an untoward event. They are also usually performed in combination with fluoroscopy and x-ray, neither of which CRNAs are formally trained to diagnose and interpret, but both of which are essential to insure proper needle and anesthetic placement for the safety of the patient. When

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<sup>1</sup> LA. REV. STAT. §§37:1261, *et seq.*

<sup>2</sup> LA. REV. STAT. §§37:930A (3), 37:930D.

used in this manner by physicians specializing in the treatment of chronic pain, these procedures are referred to as “interventional pain management.”

When used for interventional pain management purposes such procedures do not consist solely of administration of anesthesia; rather, they are interactive procedures in which the physician is called upon to make continuing adjustments based on medical inferences and judgments drawn from patient response to the anesthetic or other agent being administered. In such instances, it is not the procedures—*but the purpose and manner in which such procedures are utilized*—that demand the ongoing application of direct and immediate medical judgment, which constitutes the practice of medicine, and which may only be performed in this state by a Louisiana licensed physician.

While a CRNA may utilize these procedures on the order of and under physician direction and supervision for surgical cases and acute pain associated with surgery, for a physician to permit a CRNA, or any non-physician for that matter, to employ them to diagnose, manage or treat chronic pain patients would necessarily permit the CRNA to exercise independent medical judgment, perform diagnostic testing, render diagnoses, and provide treatment or recommendations for treatment of patients suffering with chronic pain. Such determinations are essentially diagnostic and treatment decisions that can have critical implications for the patient are reserved solely to those licensed to practice medicine in this state<sup>3</sup> and, in the Board’s view, are not delegable by a physician to a non-physician by physician prescription, direction or supervision.<sup>4</sup>

The Board’s opinion is not and cannot be altered by representations that a particular CRNA has received postdoctoral training in such areas or has performed such activities in this or another state. A non-physician may have education, training and, indeed, expertise in such area but expertise cannot, in and of itself, supply authority under law to practice medicine.

For these reasons, it is the opinion of the Board that the injection of local anesthetics, steroids and analgesics, peripheral nerve blocks, epidural injections and spinal facet joint injections, when used for interventional pain management of patients suffering from chronic pain, constitute the practice of medicine, are not delegable by a physician to a non-physician by physician prescription, direction or supervision, and may only be performed in this state by a physician licensed to practice medicine in Louisiana.

**LOUISIANA STATE BOARD OF  
MEDICAL EXAMINERS**

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<sup>3</sup> LA. REV. STAT. ANN. §37:1261(1), defines the ‘practice of medicine,’ to include:

[T]he diagnosing, treating, curing, or relieving of any bodily...disease, condition, infirmity, deformity, defect, ailment, or injury in any human being...whether by the use of any drug, instrument or force...or of what other nature, or any other agency or means...

<sup>4</sup> “No person shall practice medicine as defined herein [the Medical Practice Act] until he possesses a duly recorded license issued under this Part or a permit or registration as provided for herein.” LA. REV. STAT. ANN. §37:1271.