THE PRACTICE of anaesthesia is entirely hospital based; hospital planning in general is therefore of considerable interest to the anaesthetist, but he is particularly concerned with the plans for areas where he is to carry out his work. In the past, the anaesthetist's activities were mainly confined to surgical anaesthesia, but recent developments have expanded his interests into areas outside the operating room. This expansion is still in full progress and its extent can hardly be predicted.

In order to plan anaesthetic facilities, the scope of the specialty and its interaction with other specialties must be defined. A general concept could be evolved by comparing or contrasting anaesthesia with other medical specialties (Fig. 1). All medical and surgical specialties dealing with patients follow a general pattern in their approach:

1. The patient is examined.
2. On the basis of the examination, a diagnosis is made.
3. Based on the diagnosis, specific treatment is instituted.
4. General measures are taken to support the patient physically and mentally, to alleviate symptoms, and to promote favourable conditions for the specific treatment.

Other specialties have developed, such as laboratory medicine or radiology, to support the investigative effort leading to a diagnosis. Surgery and radiotherapy can be considered as specific forms of therapy. Physical medicine is a form of supportive therapy furthering the general care of the patient. Anaesthesia can also be placed in a similar position, providing specific types of patient care that are applicable to a wide range of diagnoses.

The American Society of Anesthesiologists has recently published the following statement defining anaesthesiology (ASA Directory 1968, page 299):

Anaesthesiology is a practice of medicine dealing with but not limited to (1) the management of procedures for rendering a patient insensible to pain and emotional stress during surgical, obstetrical and certain medical procedures; (2) the support of life functions under the stress of anaesthetic and surgical manipulations; (3) the clinical management of the patient unconscious from whatever cause; (4) the management of problems of pain relief; (5) the management of problems in cardiac and respiratory resuscitation; (6) the application of specific methods of inhalation therapy; (7) the clinical management of various fluid, electrolyte and metabolic disturbances.

This concept clarifies the involvement of anaesthesia with other specialties and delineates anaesthesia's claim to an important role in certain aspects of patient care.

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Figure 1. The place of anaesthesia in providing medical care.