

Chairperson Donovan and members of the House Health and Human Services Committee:

The safety of our loved ones and community members should not be at risk because of the **mismanagemnt** of the Department of Anesthesia in the largest healthcare system in the state...

My name is Kayla Sangster. I am a Certified Registered Nurse Anesthetist (CRNA) and lifelong Rhode Island resident. I started as a Registered Nurse in the Trauma Intensive Care Unit (ICU) at Rhode Island Hospital (RIH) in 2009. Over the course of my 7 years prior to attending Northeastern University for my Master's Degree in Nurse Anesthesia I worked on several ICUs at RIH and Massachusetts General Hospital (MGH) to gain the experience I felt necessary for applying to school. My full-time clinical anesthesia training took place in the Department of Anesthesia at RIH over 22 months, completing far over the minimum 2000 hours required by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

Upon certification, I joined Lifespan's Department of Anesthesia as a staff CRNA in June 2019. My last day at Lifespan was July 31, 2023. Over my 6 total years in the department, I witnessed a drastic change in the department's culture. The shifts became less flexible, and retaliation happened daily, typically in the form of undesirable work assignments and/or locations as we staffed several sites in addition to RIH. The impact this had on my personal well-being and family life led to my resignation. I tell you this because in addition to myself, the department has seen the departure of another 11 CRNAs since January 2023 for reasons like mine. A total of 19 CRNAs have left since 2022, and another 4 retired with very little success in recruitment to replace them. The culture of silence affected and continues to affect CRNAs and physician anesthesiologists alike, and Lifespan's Department of Anesthesia will continue to hemorrhage safe, well-trained, experienced providers until something changes. Furthermore, the tremendous loss of staff has created a need for an overcommitted department to develop creative staffing solutions to provide anesthesia in all the locations they have agreed to.

This information provides a background on how this situation came to be. Lifespan's Department of Anesthesia arrived at the decision to utilize Nurse Practitioners (NP) in the gastroenterology (GI) suite to provide care for patients undergoing endoscopies and colonoscopies. The GI suite is one of the most difficult areas to provide anesthesia in. The patients undergoing these procedures at the hospital are sicker than their outpatient counterparts, often having various comorbidities including metabolic, cardiac, and pulmonary diseases. Furthermore, patients are kept at depths of anesthesia often equivalent to general anesthesia to provide adequate conditions for the GI doctor to complete the intended procedure while maintaining the patient's natural airway, meaning no breathing tube is placed. This type of anesthetic is primarily provided using the medication propofol. This type of anesthesia should never be delivered by anyone who has not had extensive anesthesia training and board certification in their specialty.

Furthermore, propofol is accompanied with a boxed warning stating the medication should "only be administered by persons trained in the administration of general anesthesia." The American Society of Anesthesiologists (ASA) has issued additional statements addressing the safe administration of propofol, which will be provided to you in other testimony and/or documents. There are multiple physicians who support our stance; however, they are afraid to speak out. For example, many of the GI doctors fear if they speak out publicly against this practice at Lifespan, they will lose the entirety of the anesthesia services offered to them that many of their patients' desperately need.

In conclusion, I respectfully implore you to remember that patient safety should be the driving force of every decision in healthcare. When the people of Rhode Island seek care, they expect and trust that the providers caring for them are the safest, most educated, and most skilled in practice. The safety of our loved ones and community members should not be at risk because of the mismanagement of the Department of Anesthesia in the largest healthcare system in the state.

Respectfully submitted,

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House District 30