

To Whom It May Concern,

My name is Keith Buehler and I am a Certified Registered Nurse Anesthetist (CRNA) in Rhode Island that resides in Middletown, RI. I am writing to address Bill H8237. First I would like to acknowledge the valuable contributions of other nurse practitioner (NP) specialties and their ability to competently and safely expand care for Rhode Island patients. Bill H8237 does not diminish the scope of nurse practitioners but rather focuses on patient safety.

CRNAs possess expertise in airway management after three years of intense didactic and clinical training, often with over 2500 to 3000 hours of clinical experience in anesthesia, including hundreds of intubations and critical airway management experiences. Imagine this clinical experience that has happened to me several times. A patient in the GI suite receiving anesthesia for a colonoscopy or a esophagogastroduodenoscopy (EGD) begins with an oxygen saturation of 100 percent and after the initiation of anesthesia ceases to breath and begins to desaturate to 60 percent. The anesthesia provider has several choices to make now, does the provider place an oral airway and perform a jaw thrust/chin lift, does the provider deepen the patient and place a laryngeal mask airway (LMA), or does the provider deepen and paralyze the patient then place an endotracheal tube (ETT)? If this all sounds complicated, thats because it is. It takes significant experience and training to navigate this thought process. This thought process needs to be rapid in order to prevent patient harm. All this can be performed quickly with proper training and experience which CRNAs possess and nurse practitioners do not. Again, this is simply a patient safety issue. Without rapid intervention this patient could rapidly deteriorate and lose their pulse leading to CPR and a rescue effort.

Just as you would not want me, a CRNA, sewing your knee after a knee replacement, perscribing your child antibiotics, or searching for polyps during your colonoscopy, you should not vote for any legislation that permits providers not trained in anesthesia to administer anesthesia. The consequences can lead patient harm or even death. My fear is that only a tragic event will make us realize the mistake of not supporting Bill H8237.

Thank you,

Keith Buehler, CRNA

*Keith Buehler, CRNA*