32 Concord Ave

No. Kingstown, RI 02852

May 14,2024

Re: Support of Bill H8237

Dear Representative Tanzi,

I am Certified Registered Nurse Anesthetist (CRNA) and have been practicing for over 40 years. I am also a clinical Instructor at the RIC/St. Joseph's Hospital School Nurse Anesthesia.

I have grave concerns regarding Nurse Practitioners (NPs) working INDEPENDENTLY in Gastroenterology (GI) settings who are sedating patients with the general anesthetic drug PROPOFOL. There is a fine line between "moderate" sedation and "unconscious" general anesthesia using propofol. Moreover, there is no reversal agent for propofol unlike other drugs. Within seconds, a patient can go from sedated to unconsciousness where emergency airway management becomes critical. In all my years of administering anesthesia, sedating patients in the GI unit remains my most challenging. Often time we are sharing an airway with the GI doc while they insert a large snake-like tube down a patient's esophagus. Chances of aspiration, bronchospasm and/or a laryngospasm are just a few of the complications that requires early recognition, a skilled anesthetist trained in airway rescue and a host of anesthetic drugs to stabilize the patient. Our training is extensive due to the depth of knowledge needed for safely sedate/anesthetizes a patient. Requirement includes a BSN in nursing, 2-4 years of ICU experience followed by a three-year doctoral program which is solely anesthesia-based.

This is by no means a turf war between NPs and CRNAs, but strictly a serious patient-safety concern. Nps do great work in ICUs where their patients are already intubated and in the ER setting where they are coupled with ER doctors. This bill speaks specifically to the NP working INDEPENDENTLY in GI settings sedating patient with the powerful general anesthetic drug PROPOFOL Moreover, the FDA has a WARNING LABEL on and in every box that reads, "Propofol should be administered ONLY by persons trained in the administration of GENERAL ANESTHESIA. Additionally, the ASA and AANA share the same position statement.

I sincerely thank you in advance for the time and consideration you will give to the gravity of this bill.

Your constituent.

Maria Mariorenzi Barone, MSNA, CRNA, APRN