May 13, 2024

The Honorable Susan Donovan House Committee Rhode Island State House Providence, RI, 02903

RE: Written Testimony on 2024 <u>**H8237</u>** AN ACT RELATING TO BUSINESSES AND PROFESSIONS -- NURSE ANESTHETISTS</u>

Position: AGAINST (CON)

Thank you, members of the committee, for the opportunity to provide testimony on H8237.

I am an experienced Nurse Practitioner for more than 20yrs in Cardiac Surgery in Rhode Island. I am writing to speak CON to the proposed bill restricting the use of Propofol and "like" medication for sedation.

I am in strong opposition to any changes eliminating my ability as a nurse practitioner to use the sedation medication "like" propofol as light or moderate sedation. As a Nurse Practitioner in Cardiac Surgery on a service led by Advanced Practice Providers (Nurse Practitioners and Physician Assistants), I am deeply concerned about the implications of these changes. Propofol has been incorporated into the practice of nurse practitioners in a variety of ways that are often safer than the use of other medications i.e. versed and fentanyl. The benefit to propofol is its short duration unlike much longer duration medication leading to propofol as the safer option for patients. Longer duration medications are unsafe to the patient, and they are not best practice. I use these medications frequently in my practice for post op cardiac surgery patients who may or may not be intubated in circumstances that may or may not be emergent to provide "light" or "moderate" sedation for various procedures. Additionally, I use these medications like dexmedetomidine for patients after heart surgery who are not intubated to treat a variety of conditions for example post operative delirium.

It is essential that any modifications to established current practices are made with consideration for the well-being of our patients majority of which are Rhode Island residents. Eliminating the use of these medications by nurse practitioners would

significantly impact patient care in a negative way. Please take these situations into consideration as you move forward with decisions.

In closing, the bill language submitted for consideration is restrictive in its limitations to Nurse Practitioners and will negatively impact hundreds of Rhode Island residents undergoing heart surgery. This will lead to complete changes in our current critical care practices resulting in many Nurse Practitioners leaving to Massachusetts critical care areas resulting in staffing shortages.

I'm available for any questions or concerns.

Respectfully,

Renee Bernard, APRN

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NP at RI Hospital (representing myself not RIH)

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