



# OHIO LEGISLATIVE SERVICE COMMISSION

---

## Bill Analysis

Elizabeth Molnar

### **H.B. 191**

132nd General Assembly  
(As Introduced)

**Reps.** Gonzales, McColley, Brinkman, Fedor, Riedel, Keller, Stein

---

### **BILL SUMMARY**

- Permits a certified registered nurse anesthetist (CRNA) to practice without a supervising dentist, physician, or podiatrist, including when administering anesthesia.
  - Grants a CRNA authority to select and order the anesthesia to be administered.
  - Allows a CRNA to select, order, and administer other drugs during certain periods and for the treatment of conditions related to the administration of anesthesia.
  - Authorizes a CRNA to direct nurses, respiratory therapists, and other persons to administer such drugs and perform clinical support functions.
- 

### **CONTENT AND OPERATION**

#### **Certified registered nurse anesthetists**

The bill makes four main changes to the law governing the practice of certified registered nurse anesthetists (CRNAs). First, it eliminates the requirement that a CRNA practice under the direction of a supervising dentist, physician, or podiatrist, including the requirement that the CRNA administer anesthesia only in the immediate presence of the supervising practitioner. Second, it permits a CRNA – during the period before, during, and after a surgery or procedure is performed – to select, order, and administer other drugs for conditions related to the administration of anesthesia. Third, the bill allows a CRNA to direct nurses, respiratory therapists, and other persons to administer such drugs and perform clinical support functions in the same time period. Fourth, it modifies the activities a CRNA may perform and authorizes additional activities,

including ordering and evaluating diagnostic tests for preanesthetic preparation and establishing anesthesia care plans.

### **Supervision and practice**

The bill eliminates the current law requirement that a CRNA practice under the supervision of a dentist, physician, or podiatrist. Supervision is described as being under the direction of a supervising practitioner acting within that practitioner's scope of practice.<sup>1</sup> In relation to this supervision, the services a CRNA is authorized to provide under current law are described as follows:

(1) With supervision and in the immediate presence of the supervising practitioner, a CRNA may administer anesthesia and perform anesthesia induction, maintenance, and emergence;

(2) With supervision, a CRNA may perform preanesthetic preparation, postanesthesia care, and clinical support functions.<sup>2</sup>

In addition to eliminating the requirement that a CRNA practice only under supervision, the bill modifies some of the services that a CRNA currently may perform and authorizes a CRNA to perform other services. The bill retains an existing provision specifying that a CRNA must act in a manner that is consistent with the CRNA's education and certification and in accordance with rules adopted by the Ohio Board of Nursing.<sup>3</sup>

### **Selecting, ordering, and administering drugs**

Current law grants each advanced practice registered nurse (APRN) specialty, other than the CRNA specialty, authority to prescribe or furnish most drugs and therapeutic devices as part of the APRN license.<sup>4</sup> Accordingly, CRNAs lack authority at present to select and order anesthesia and other drugs.<sup>5</sup>

The bill, however, authorizes a CRNA to select and order anesthesia. This authority is in addition to the CRNA's existing authority to administer anesthesia,

---

<sup>1</sup> R.C. 4723.01(M), 4723.43(B), 4723.432(B), 4731.27(C), and 4731.35(A).

<sup>2</sup> R.C. 4723.01(M) and 4723.43(B).

<sup>3</sup> R.C. 4723.43(B).

<sup>4</sup> See R.C. 4723.43 and 4723.481, not in the bill, with respect to certified nurse practitioners, certified nurse-midwives, and clinical nurse specialists.

<sup>5</sup> R.C. 4723.43(B).

which, under the bill, will no longer have to be performed in the immediate presence of a supervising practitioner.

The bill permits a CRNA to select, order, and administer fluids, treatments, and drugs for conditions related to the administration of anesthesia. This may occur before, during, and after the administration of anesthesia and as necessary for patient management and care in the period before, during, and after a surgery or procedure is performed.<sup>6</sup>

In addition, the bill authorizes a CRNA to select, order, and administer pain relief therapies. This may occur during the period after a surgery or procedure.<sup>7</sup>

The bill provides that it does not authorize a CRNA to prescribe a drug for use outside the facility or other setting where the nurse provides anesthesia care.<sup>8</sup>

### **Delegation**

The bill authorizes a CRNA to direct registered nurses, licensed practical nurses, respiratory therapists, and other persons to do the following for patient management and care in the period before, during, and after a surgery or procedure is performed:

(1) Administer fluids, treatments, and drugs for the treatment of conditions related to administration of anesthesia. The bill specifies that these activities may be performed before, during, and after the anesthesia's administration.

(2) Perform clinical support functions.<sup>9</sup>

The persons being directed by a CRNA must be authorized by law to administer fluids, treatments, and drugs and perform clinical support functions. Neither existing law nor the bill defines "clinical support functions."

### **Revised and additional services and activities**

In addition to the changes in a CRNA's practice described above, the bill permits a CRNA to do all of the following:

---

<sup>6</sup> R.C. 4723.43(B) and 4729.01(I).

<sup>7</sup> R.C. 4723.43(B).

<sup>8</sup> R.C. 4723.43(B).

<sup>9</sup> R.C. 4723.43(B) and 4761.17(A) and (C).

(1) Document preanesthetic preparation and evaluation, in addition to the existing authority to perform the preparation and evaluation. The bill specifies that these activities may include ordering and evaluating one or more diagnostic tests and consulting with one or more other health professionals.

(2) Establish anesthesia care plans, which may address the administration of general, local, and regional anesthesia, including sedation;

(3) Determine whether planned anesthesia is appropriate;

(4) Obtain informed consent for anesthesia care;

(5) Perform assessments before administering anesthesia;

(6) Perform and document postanesthesia care preparation and evaluation. Existing law refers only to the authority to perform postanesthesia care.

(7) Perform postanesthesia care assessments, including on admission to or release or discharge from postanesthesia recovery areas;

(8) Respond to emergencies relating to airway management.<sup>10</sup>

The bill eliminates current provisions specifying that a CRNA is authorized to perform anesthesia induction, maintenance, and emergence and to perform clinical support functions.

### **Penalties**

The bill prohibits a CRNA from knowingly doing the following in a manner that does not comply with its provisions:

(1) Issuing orders for drugs;

(2) Directing other persons to administer drugs.<sup>11</sup>

A person who violates this prohibition is guilty of a fifth degree felony on a first offense and a fourth degree felony on a subsequent offense.<sup>12</sup>

---

<sup>10</sup> R.C. 4723.43(B).

<sup>11</sup> R.C. 4723.44(B).

<sup>12</sup> R.C. 4723.99, not in the bill.

---

## HISTORY

ACTION

DATE

Introduced

04-26-17

H0191-I-132.docx/ks

