

2024 -- S 3035 SUBSTITUTE A

LC005994/SUB A

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

A N A C T

RELATING TO BUSINESSES AND PROFESSIONS -- NURSE ANESTHETISTS

Introduced By: Senators F. Lombardi, Ciccone, Burke, Felag, Gallo, Rogers, and de la Cruz
Date Introduced: May 02, 2024
Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

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- SECTION 1. Chapter 5-34.2 of the General Laws entitled "Nurse Anesthetists" is hereby amended by adding thereto the following section:
- 5-34.2-2.1 Safe administration of sedation.**
- (a) Registered nurses (RNs) and advanced practice registered nurses (APRNs), other than licensed certified registered nurse anesthetists (CRNAs), as defined in this chapter, and RNs enrolled in a nurse anesthesiology training program approved by the Council on Accreditation of Nurse Anesthesia Educational programs (COA) or its predecessors or successors, shall not administer agents that are primarily used and classified as general anesthetics for minimal, moderate, deep sedation, or general anesthesia, including, but not limited to, ketamine, propofol, etomidate, sodium thiopental, methohexital, dexmedetomidine, or volatile gases (e.g. sevoflurane, isoflurane, desflurane), except as otherwise authorized in this section, nor shall they administer or manage deep sedation or general anesthesia for any diagnostic, therapeutic, or surgical procedures using any drug or medication.
- (b) For situations requiring the immediate and emergent facilitation of airway management (rapid sequence intubation) or to maintain sedation for tracheally intubated and mechanically ventilated patients, an RN or APRN may initiate, titrate, and bolus intravenous/intraosseous (IV/IO) agents if a CRNA, other qualified anesthesia provider, or a qualified emergency room, intensive care, or other physician trained in airway management acting within their scope of practice and approved by their governing body is immediately present and available if needed to secure the

1 airway.

2 (c) Nothing in this section shall prohibit:

3 (1) The administration of local infiltration anesthesia, digital blocks or pudendal blocks by

4 an APRN acting within the scope of their education and training;

5 (2) The injection of local anesthetic agents under the skin or application of topical

6 anesthetic agents by a RN or APRN when prescribed by a qualified physician, dentist, or APRN

7 with prescriptive authority who is licensed to practice in this state; provided, however, other than

8 intravenous administration of lidocaine, this provision shall not permit a registered nurse to

9 administer local anesthetics perineurally, peridurally, epidurally, intrathecally, or intravenously, or;

10 (3) The administration and/or titration of propofol, ketamine, or dexmedetomidine to

11 emergency room or intensive care unit patients who are being sedated and are tracheally intubated,

12 by a RN or APRN acting within the scope of their education and training.

13 SECTION 2. Chapter 5-34 of the General Laws entitled "Nurses" is hereby amended by

14 adding thereto the following section:

15 **5-34-3.1 Safe administration of sedation.**

16 Certified nurse practitioners, registered nurses (RNs), and advanced practice registered

17 nurses, who do not hold a valid license or accreditation, other than RNs enrolled in a COA approved

18 training program, shall not administer deep sedation or general anesthesia for any diagnostic,

19 therapeutic, or surgical procedure using any drug or medication. The position of "Anesthesia

20 Sedation Nurse Practitioner", so called, is not a recognized subspecialty of the nurse practitioner

21 profession.

22 SECTION 3. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

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1 This act would establish that the elective and/or independent administration of propofol,
2 and all FDA classified general anesthetics, for any surgery or procedure, is not, generally, within
3 the "scope of practice" of nurse practitioners as defined in § 5-34-3 and would restrict the
4 administration of anesthesia medication to licensed registered nurse anesthetists with certain
5 exceptions.

6 This act would take effect upon passage.

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