

## **128th MAINE LEGISLATURE**

## FIRST REGULAR SESSION-2017

| Legislative Document | No. 1166                  |
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| S.P. 387             | In Senate, March 23, 2017 |

An Act Regarding Anesthesia Care in Rural Maine

Reference to the Committee on Labor, Commerce, Research and Economic Development suggested and ordered printed.

Heath & Print

HEATHER J.R. PRIEST Secretary of the Senate

Presented by Senator CUSHING of Penobscot. Cosponsored by Representative FECTEAU of Biddeford and Senators: LANGLEY of Hancock, VOLK of Cumberland, Representatives: AUSTIN of Gray, BATES of Westbrook, HICKMAN of Winthrop, MASTRACCIO of Sanford, POULIOT of Augusta, STETKIS of Canaan.

| 1                          | Be it enacted by the People of the State of Maine as follows:  |
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| 2                          | Sec. 1. 32 MRSA §2211 is enacted to read:  |
| 3                          | <u>§2211. Nurse anesthetist; authority</u>   |
| 4<br>5                     | <b>1. Definitions.</b> For purposes of this section, unless the context otherwise indicates, the following terms have the following meanings.  |
| 6<br>7                     | <u>A.</u> "Critical access hospital" has the same meaning as in Title 22, section 7932, subsection 10.   |
| 8                          | B. "Rural area" has the same meaning as in Title 22, section 5104, subsection 10.  |
| 9<br>10<br>11<br>12        | 2. Authority generally. A certified registered nurse anesthetist is responsible and accountable to a licensed physician or dentist for aspects of anesthesia practice that require execution of the medical regimen as prescribed by that physician or dentist, except as provided in subsection 3.  |
| 13<br>14<br>15<br>16<br>17 | 3. Authority; critical access hospitals and rural hospitals. In a critical access hospital or in a hospital located in a rural area, a certified registered nurse anesthetist may, in accordance with the bylaws and policies of the facility in which the certified registered nurse anesthetist is practicing, formulate and implement a patient-specific plan for anesthesia care, which may include: |
| 18                         | A. A preanesthetic assessment;   |
| 19                         | B. Verification of informed consent;   |
| 20                         | C. Adjustments and corrective actions as indicated;  |
| 21<br>22                   | D. Ordering appropriate laboratory tests and diagnostic imaging tests in the preoperative period and immediate postoperative period; and   |
| 23<br>24<br>25<br>26       | E. Ordering and prescribing prescription drugs in the preoperative period and immediate postoperative period in accordance with this paragraph. For controlled substances listed in United States Drug Enforcement Administration Schedules III, IIIN, IV and V, a certified registered nurse anesthetist may prescribe drugs only:  |
| 27                         | (1) For a supply of not more than 4 days, with no prescription refills; and  |
| 28<br>29                   | (2) For an individual for whom the certified registered nurse anesthetist has, at the time of the prescription, established a client or patient record.  |
| 30<br>31<br>32             | <b>Sec. 2. Rules.</b> The State Board of Nursing shall adopt rules to implement this Act.<br>Rules adopted pursuant to this section are routine technical rules as defined in the Maine<br>Revised Statutes, Title 5, chapter 375, subchapter 2-A.   |
| 33                         | SUMMARY  |
| 34<br>35                   | This bill permits certified registered nurse anesthetists in critical access hospitals and hospitals located in rural areas to conduct a preanesthetic assessment, verify informed   |

- consent, make indicated adjustments and corrections, order appropriate lab tests and diagnostic imaging tests and prescribe certain drugs. 1
- 2