

MEDICAL SOCIETY
of the
STATE OF NEW YORK

Morris Auster, Esq.

Senior Vice President /
Chief Legislative Counsel

Division of Governmental Affairs

MEMORANDUM IN OPPOSITION

**IN ASSEMBLY HIGHER
EDUCATION COMMITTEE**

A.6958-A (REYES)

**IN SENATE HIGHER EDUCATION
COMMITTEE**

S.769-A (COONEY)

**AN ACT to amend the education law, in relation to
creating the profession of nurse anesthetist.**

The above referenced legislation would amend the Education Law to formally create the profession of certified registered nurse anesthetist and permit them to practice without adequate supervision. While we appreciate efforts to enhance access to care for patients, **the Medical Society of the State of New York is seriously concerned with the patient safety consequences of this legislation and therefore urges that it be defeated.**

Despite advances in medicine and anesthesia, every procedure and surgery have risks. When life threatening emergencies arise, they require highly trained anesthesiologists to provide immediate medical intervention. This existing standard in the NYS Health Code and was established 30 years and requires that all patients who require anesthesia in hospitals or ambulatory surgical centers be guaranteed a physician anesthesiologist, or a nurse anesthetist supervised by a physician.

This legislation would enable a nurse anesthetist who has practiced more than 3,600 hours to be able to work in an "interdependent role" as a member of a health care team in which the medical care of the patient is "overseen" by a physician, dentist or podiatrist. The words "interdependent" and "overseen" are not defined in the bill. Moreover, this bill disregards that nurse anesthetists are trained to work under supervision and within the anesthesia care team model. It further disregards that, under the existing standard, the physician anesthesiologist assumes the medical and legal responsibility of the patient's care. The bill fails to recognize that physician anesthesiologists and nurse anesthetists have different skill sets and training and that working together further benefits the patient. It also fails to recognize that the physician anesthesiologist has advanced clinical training in order to independently determine if and when medical intervention is required.

It also proposes that a nurse anesthetist who has practiced 3,600 or less clinical hours work "under the direction" of a physician, dentist or podiatrist. However, the definition of "direction" lacks clarity and has essentially has no meaning. The amended bill does not require a physician to provide on-site direction, be physically present, or be immediately available. Other states adopting a direction standard require medical direction of the nurse anesthetist, and the immediate presence or

availability of a physician anesthesiologist. Instead, this bill states that “direction” means “coordination” and “communication” between the physician and nurse anesthetist which, in a critical care environment, is unworkable for immediate on-site medical interventions when an emergency arises.

Because of their education and training, the physician anesthesiologist is the most qualified member of the anesthesia care team to administer anesthesia (individually or through medical supervision of a nurse anesthetist). A physician anesthesiologist’s role must be clear when creating nurse anesthetists’ scope of practice because: (i) the existing standard of care requires the physician anesthesiologist to be physically present and immediately available while supervising a nurse anesthetist; (ii) this standard of care is consistent with the anesthesia care team model wherein physician anesthesiologists and nurse anesthetists work together as a team to achieve best results; and (iii) this standard has proven to save patient lives. Unfortunately, this legislation does not contain such provisions.

We appreciate efforts to enhance the availability of care access for patients, but such efforts should not come at the expense of patient safety. Therefore, we urge that this legislation be defeated.

**MMA – Oppose
4/25/24**

Respectfully Submitted,

MSSNY DIVISION OF GOVERNMENTAL AFFAIRS