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# OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research  
and Drafting

Legislative Budget  
Office

H.B. 224  
133rd General Assembly

## Bill Analysis

**Version:** As Introduced

**Primary Sponsors:** Reps. Cross and Wilkin

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### SUMMARY

- Maintains the requirement that a certified registered nurse anesthetist (CRNA) practice under the supervision of a physician, podiatrist, or dentist, but also requires the CRNA to consult with a physician, podiatrist, or dentist before performing activities authorized by the bill or already permitted under current law.
- Grants a CRNA authority to select anesthesia if the CRNA is in the immediate presence of a physician, podiatrist, or dentist.
- Allows a CRNA to select, order, and administer other drugs for the treatment of conditions related to the administration of anesthesia.
- Permits a CRNA – when performing clinical functions – to order fluids, treatments, drugs, and diagnostic tests and to evaluate the results of those tests.
- Authorizes a CRNA to direct nurses and respiratory therapists to perform specified tasks, including administering drugs.

### DETAILED ANALYSIS

#### **Certified registered nurse anesthetists: overview**

The bill makes several changes to the law governing the practice of certified registered nurse anesthetists (CRNAs). While it maintains the requirements that a CRNA practice under the direction of a supervising physician, podiatrist, or dentist and administer anesthesia only in the immediate presence of a supervising practitioner, it also requires the CRNA to consult with a practitioner before performing activities authorized by the bill or already permitted under existing law.

The bill permits a CRNA – as necessary for patient management and care – to select, order, and administer drugs for conditions related to the administration of anesthesia. It allows a CRNA to direct nurses and respiratory therapists to perform certain tasks, including

administering drugs. In addition, the bill modifies the activities a CRNA may perform and authorizes additional activities, such as selecting anesthesia, ordering and evaluating diagnostic tests, and establishing anesthesia care plans.

### **Supervision, consultation, and practice**

The bill retains the current law requirement that a CRNA practice under the supervision of a physician, podiatrist, or dentist. 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 existing 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 maintaining the requirement that a CRNA practice only under the supervision of a practitioner, the bill establishes a requirement that the CRNA also consult with a practitioner before performing services already authorized under current law or permitted by the bill.

The bill also 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 anesthesia in the immediate presence of a supervising practitioner. This authority is in addition to the CRNA's existing authority to

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<sup>1</sup> R.C. 4723.43(B). See also R.C. 4723.01(M), 4723.432(B), 4731.27(C), and 4731.35(A), not in the bill.

<sup>2</sup> R.C. 4723.01(M), not in the bill, and 4723.43(B).

<sup>3</sup> R.C. 4723.43(B)(1).

<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).

administer anesthesia in the immediate presence of a supervising practitioner. The bill, though, does not authorize the CRNA to order anesthesia.

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 as necessary for patient management and care.<sup>6</sup> In addition, the bill authorizes a CRNA to select, order, and administer pain relief therapies.<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>

### **Clinical functions**

Current law permits a CRNA to perform *clinical support functions*, but does not define or describe those functions. Under the bill, a CRNA may instead perform *clinical functions* if the functions are either of the following:

1. Completed pursuant to a physician consultation;
2. Specified in the clinical experience standards established for nurse anesthetist education programs by a national accreditation organization selected by the Board of Nursing.<sup>9</sup>

The bill further authorizes a CRNA – when performing clinical functions – to order fluids, treatments, drugs, and one or more diagnostic tests and to evaluate the results of those tests.<sup>10</sup>

### **Delegation**

The bill authorizes a CRNA to direct registered nurses, licensed practical nurses, and respiratory therapists to do the following for patient management and care:

1. Administer fluids, treatments, and drugs for the treatment of conditions related to administration of anesthesia;
2. Provide supportive care, including monitoring vital signs, conducting electrocardiograms, and performing intravenous therapy.<sup>11</sup>

The persons being directed by a CRNA must be authorized by law to administer fluids, treatments, and drugs and provide supportive care.

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<sup>6</sup> R.C. 4723.43(B)(1)(f) and 4729.01(l).

<sup>7</sup> R.C. 4723.43(B)(1)(g) and 4729.01(l).

<sup>8</sup> R.C. 4723.43(B)(2).

<sup>9</sup> R.C. 4723.43(B)(1)(j).

<sup>10</sup> R.C. 4723.43(B)(1)(k).

<sup>11</sup> R.C. 4723.43(B)(1)(i) and 4761.17(A) and (C).

## 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:

1. Perform and document evaluations and assessments, which may include ordering and evaluating one or more diagnostic tests and consulting with one or more other health professionals;
2. Establish anesthesia care plans;
3. Determine whether planned anesthesia is appropriate;
4. Obtain informed consent for anesthesia care;
5. Perform and document postanesthesia care preparation and evaluation. (Existing law refers only to the authority to perform postanesthesia care.)<sup>12</sup>

The bill retains current provisions specifying that a CRNA is authorized to perform anesthesia induction, maintenance, and emergence in the immediate presence of a supervising practitioner.<sup>13</sup>

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## HISTORY

Action	Date
Introduced	04-29-19

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<sup>12</sup> R.C. 4723.43(B)(1).

<sup>13</sup> R.C. 4723.43(B)(1)(e).