



**Representative Kellie Deeter**  
House District 54

Chair Schmidt, Ranking Member Somani, and members of the House Health Committee, thank you for the opportunity to provide sponsor testimony on House Bill 423. This legislation regulates the practice of surgical assistants and surgical technologists in Ohio. This issue has been considered in past General Assemblies, with the House passing a version in the 134th. While it did not advance in the Senate, I believe surgical assisting is uniquely justified for licensure because it involves invasive tasks that directly affect surgical outcomes and patient safety.

I have worked in the operating room for the past 27 years in multiple capacities, including surgical assisting. Most people are surprised to learn that Ohio has no minimum requirements for education or training for individuals who perform invasive, hands-on tasks as surgical assistants. These professionals carry out critical functions such as assisting with incisions, placing and securing wound drains, suturing, cutting tissue, and providing wound care. I personally performed these tasks for almost a decade.

While the title includes the word *assistant*, these individuals are, in fact, performing surgery. Cutting tissue, harvesting veins for grafts, and suturing are all surgical procedures. The seriousness of that responsibility cannot be overstated and deserves proper recognition through education and credentialing standards.

Working alongside surgical assistants are surgical technologists, allied health providers who ensure the operating room is organized, sterile, and prepared for each procedure. They also help prepare patients for surgery through anesthesia support, patient positioning, and skin antisepsis; handle surgical specimens responsible for proper diagnosis and treatment; and operate with more than a thousand different instruments and subspecialty tools. Both assistants and technologists are essential to safe and effective surgical care.

Yet in Ohio, neither role has consistent requirements for education, training, or credentialing. National bodies such as the American College of Surgeons recommend credentialing standards for surgical assistants, and many states, including Colorado, Illinois, Kentucky, Nebraska, Tennessee, Texas, and Virginia, already require licensure or registration. Ohio lags in establishing these minimum safeguards.

House Bill 423 creates a straightforward regulatory framework under the State Medical Board of Ohio. The bill would:

- Require evidence of proper credentialing for surgical assistants to practice in Ohio.
- Provide a “grandfathering” provision, allowing individuals who have practiced in the last six months to be automatically eligible for licensure as assistants.
- Waive requirements for nurses and physician assistants.
- Establish a licensure framework consistent with how the State Medical Board regulates other healthcare professionals.
- Allow waivers for surgical assistants in physician shortage areas, giving rural and underserved hospitals flexibility.
- Require surgical technologists to hold a certification from an accredited program

HB 423 incorporates staggered effective dates to provide sufficient time for surgical assistants and technologists to comply with the new law and obtain professional certification or licensure. Together with the grandfathering provisions, runway for training, and flexibility for hospitals in physician shortage areas, HB 423 is carefully designed to prevent workforce disruptions during implementation.

House Bill 423 strikes the right balance: ensuring that those performing invasive surgical tasks meet minimum training and education standards, while also avoiding unnecessary barriers to entering the workforce. This legislation enhances patient safety, supports the surgical team, and brings Ohio in line with national best practices.

I respectfully ask for your support of House Bill 423. Thank you for the opportunity to present this testimony, and I would be happy to answer any questions from the committee.