



House Bill 138
Senate Health Committee
Proponent Testimony
Kelly Shank, OAAPN Board President
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Chairman Huffman, Vice-Chair Antani, Ranking Member Antonio, and members of the Senate Health Committee, I am Kelly Shank, President of the Ohio Association of Advanced Practice Nurses (OAAPN). Thank you for the opportunity to testify in support of HB 138, which seeks to address an inconsistency in Ohio law related to the issuance and authority of do-not-resuscitate orders carried out by emergency medical services (EMS) personnel.

OAAPN represents the more than 16,000 Advanced Practice Registered Nurses (APRNs) licensed in Ohio and providing health care services across the four advanced practice specialties: certified registered nurse anesthetists, certified nurse practitioners, certified clinical nurse specialists, and certified nurse midwives. Our members provide care in all manner of health care settings, from large hospital systems to independent primary care offices, and across all geographic areas of the state, both rural and urban. As part of the regular care our professionals provide to Ohioans, APRNs are often in a position working with patients and their families to issue do-not-resuscitate (DNR) orders. We have seen firsthand how the minor inconsistency in Ohio's laws can have a dramatic, detrimental impact on the care provided to Ohioans by EMS personnel.

HB 138 is simply a corrective measure to address a technical gap in the law with respect to EMS personnel and DNR orders issued by APRNs and Physician Assistants (PAs). The bill corrects an oversight in the statute that allows APRNs and PAs to issue a DNR order, but does not allow EMS personnel to follow through on such an order. This means that EMS personnel are not legally authorized to follow through on a legally issued DNR order. When APRNs and PAs were given authority in the revised code to issue a DNR order, the law overseeing EMS personnel was not updated to account for this authority.

The effect of HB 138 would be to allow EMS personnel to follow DNR orders from all healthcare professionals that are authorized by Ohio law to issue such orders. Unfortunately, as the law stands now, there have been instances when a patient's wishes have not been granted due to this flaw in the statute.

As an example, when an APRN signs a DNR order for a patient and then that patient is being transferred to another location by EMS personnel, should the patient go into cardiac arrest during the transfer, the EMS personnel are not permitted to follow the patient's wishes. Instead the law requires them to do everything they can to keep that person alive, despite knowing that their actions conflict with what the patient wanted. The patients and their families are forced to deal with the confusion and frustration of having their health care wishes ignored and their loved ones physically and emotionally traumatized, on top of already having to deal with the difficult situation of end-of-life care. HB 138 would alleviate the unnecessary pain these situations cause by establishing consistency in Ohio statute regarding the issuance of DNR orders to be carried out by EMS personnel.



The bill also makes changes to the revised code to ensure this type of technical oversight does not occur again for EMS personnel by removing from statute the list of specific services that EMS personnel may provide. Instead, the bill requires the state board that oversees EMS personnel to establish the specific services they can provide through the rulemaking process.

By correcting this oversight, HB 138 helps establish consistency in requirements for EMS personnel, thereby limiting confusion and increasing the quality of care provided to Ohioans. Thank you for the opportunity to provide proponent testimony. We urge favorable passage of HB 138.