

Senator Monnes Anderson,

I may not be able to attend the committee hearing on SB 136 on Monday, March 25th, as I will have other obligations. I would like to send to you my issues. I am open to discussion.

1) There is an opioid crisis in this state. The past practice of pushing narcotics for chronic pain is not working. The original proponents for this, Russell Portenoy, MD now has grave reservations (Wall Street Journal, 12/15/2012). The truth is that narcotics for non-cancer chronic pain has an increased morbidity and mortality, much less the risk for diversion and overdose. There needs to be limits on over-prescribing and more judicial pain management. Chronic pain is best managed by a multi-modality system involving medication, physical therapy and counseling. Both the OMA and the OMB have published articles in the last two weeks that detail our problems. Increased use of narcotics is not the answer.

2) Is there no other health-care provider involved in the peri-operative management of a patient that requires a CRNA to prescribe narcotics?

3) How would medical records be kept? CRNA's are in OR's. Nurse Practitioners are in clinics and because of this, ANP's have a system for follow-up and monitoring of patients. CRNA's do not. There is such a difference in practice that there is no comparison as to the requirements for documentation.

4) CRNA's may claim to have pain management skills, but where is the certification? Not all CRNA programs claim to have chronic pain as a part of training. Pain specialists, especially anesthesiologists who have done a Pain Fellowship, are infinitely more qualified. A general practicing anesthesiologist or CRNA does not have the proper training to do chronic pain.

The risk of narcotic over-prescribing and drug diversion in this state has led to fatalities. This is ultimately a patient safety issue. If there is no qualified reason for CRNA's to have prescriptive privileges, they should not be granted. SB 136 is unnecessary and increases risks to patients.

I am happy to discuss any of the above and listen to arguments. Please feel free to contact me at any time. As a patient with chronic pain issues, I know that medications alone are not the answer.

Sincerely,

Frank Palmrose, MD

President, Oregon Society of Anesthesiologists

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