



Testimony in Opposition to HB 2295

Before the House Committee on Health Care

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Chair Greenlick and members of the Committee:

For the record, my name is Dr. Mary Karlet. I am a certified registered nurse anesthetist (CRNA) and program director of the nurse anesthesia program at OHSU. Thank you for the opportunity to appear before the Committee and share my concerns in opposition to HB 2295. HB 2295 would recognize a new type of anesthesia provider called an anesthesiologist assistant, or AA. Currently anesthesia care is provided in Oregon by either Certified Registered Nurse Anesthetists (CRNA) or anesthesiologists.

I have been a practicing CRNA for over 25 years and am a long-time nurse anesthesia educator. I have also served as a consultant helping to develop nurse anesthesia programs throughout the country and have been a senior site reviewer for the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) since 1995. As you can see, my nurse anesthesia educational roots run deep.

As the director of our state's nurse anesthesia program at OHSU, I would like to highlight three points today about CRNA education: 1) CRNA applicant criteria, 2) Nurse anesthesia educational process and 3) Where OHSU CRNA graduates work in Oregon.

CRNA Applicant Criteria

Our application process is very competitive. For admission to the program, the COA standards require: four years of professional nursing education; a baccalaureate degree; RN licensure; and at least one year of critical care experience as a professional RN. Time spent as an RN is critical for applicants to develop skills as an independent decision maker and the capability of interpreting advanced monitoring based on knowledge of patient physiological and pharmacological principles.

At OHSU, most applicants have more than two years of critical care experience as an RN, making our students significantly experienced in working with critically ill patients and developing critical care thinking skills. Again, that is just for entry into the nurse anesthesia program.

In contrast, Anesthesiologist Assistants can enter their training programs with NO requirement for patient care experience.

Nurse Anesthesia Educational Process

Once admitted, the nurse anesthesia student spends 24 to 36 months in a full-time program of study that includes both didactic and clinical education. Our graduate program at OHSU awards a Master's degree from the School of Nursing with intense didactic and clinical education.

The nurse anesthesia clinical curriculum provides students with opportunities for experiences in the perioperative process that are unrestricted and that promote their development as competent safe nurse anesthetists. At OHSU, students rotate to large community hospitals in Portland, but also to small critical access hospitals in rural Oregon, such as Good Shepherd Hospital in Hermiston and Curry General Hospital in Gold Beach.

The clinical curriculum prepares the student for the full scope of current practice in a variety of work settings, including performing general and regional anesthesia to adult, pediatric, obstetric and cardiac patients. On average, OHSU students graduate with 900 cases.

Nurse anesthetists thus enter their programs having a strong foundation delivering quality patient care, and nurse anesthetists complete their programs with critical care thinking skills that make them capable of high-level independent judgment and function, which is critical to meeting the array of patient needs encountered in our complex care settings.

Where OHSU CRNA Graduates Work

Since inception in 2006, the program has had 80 graduates. Over 50% of OHSU's graduates stay and practice in Oregon. Because of the extensive clinical education in rural and metropolitan hospitals, OHSU graduates are prepared to work in any setting in Oregon. This means they can work in a team setting with an anesthesiologist, but they are equally prepared to work safely as sole anesthesia providers in hospitals, clinics and out-patient facilities. OHSU graduates are working in Portland, but they are also providing anesthesia care to patients in Silverton, Hood River, Hermiston, Newport, Newberg, and other rural areas of our state. Anesthesiologist Assistants cannot practice autonomously, making them unable to serve rural Oregon like CRNAs.

I would like to finally add, that this past summer, the Oregon Anesthesiology Group (OAG) approached our nurse anesthesia program, requesting that we invite our graduates to apply for newly adopted CRNA positions in their group. I am hopeful, that OAG pursues this path, so that they can work with the safe and time-tested anesthesia providers that are being trained here in our state. CRNAs provide excellent care here in Oregon, and along with our anesthesiologist colleagues, we are meeting the anesthesia needs of the citizens of Oregon.

Thank you again for the opportunity to talk with you regarding my concerns, as an educator, about HB 2295. I am nearing retirement and will soon be passing the baton to a new generation of nurse anesthesia leaders. As I do so, I would like to know that here in Oregon, patients will continue to receive excellent anesthesia care from highly trained CRNAs and anesthesiologists.

I respectfully encourage your opposition to HB 2295. Thank you for your time, I'm happy to answer any questions you might have.