

Chair Patterson, Vice chair Knope and Senate HealthCare Committee members,  
(see slide #1)

I am Michael Rochlin, a Master's prepared, Registered Nurse (RN) with over 40 years Occupational Health & Safety experience. I am pleased to appear before you today to testify in support of SB 758.

Since 2015, I have gained advanced education and training as a Cannabinoid Therapeutic Nurse Specialist, AKA Cannabis Nurse, with the American Cannabis Nurse Association (ACNA), a National Non-Profit Professional Nurse Specialty Organization. ACNA Mission is to advance excellence in cannabis nursing practice through advocacy, collaboration, education, research, and policy development.

I was elected to the ACNA Board of Directors in 2019, and Chair the ACNA Policy & Government Affairs Committee.

In addition, I am

- Director of the Oregon Cannabis Clinicians Group (OCCG),
- A Professional Member of the Oregon Nurses association (ONA),
- Member of the City of Portland Cannabis Policy Oversight Team (CPOT), Chair the CPOT Competency Training Subcommittee, developing Training for State and Local Public Health Agencies
- Member of the Oregon Cannabis Commission (OCC) Governance/Framework and Patient Equity Subcommittee.

The following views are my own professional opinion, and do not necessarily represent the views of OCCG, ACNA, ONA, OCC or CPOT.

I enthusiastically support SB 758, sections 7 & 23.

Both section changes are long overdue to protect patient rights & safety in Oregon.

This Bill helps to:

- Clarify Policy for the State Nursing License Agency, the Oregon State Board of Nursing (OSBN).

- See slide #2, for OSBN interpretive statement:

oit prohibits protected free speech discussions between Nurses and their patients, many of whom are the most vulnerable citizens.

oit also shows the Nurse Rule to advocate for patients, but then restricts this role of Nursing practice with a narrow view of education with this stigmatizing and punitive statement of risk, without considering benefits. It continues legacy policies of patient education discrimination, eg, allowing full education with very high risk and potentially deadly drugs: for example, narcotics, like fentanyl are allowed full education, but not a more beneficial and much less harmful botanical medicine like cannabis, that has been used safely for medical treatments for centuries.

Currently, the only medical providers in Oregon who may recommend cannabis to patients are Medical Doctors (MDs) and Doctors of Osteopathy (DOs). This severely restricts patient access to cannabis as the primary care provider (PCP) may typically not be a MD or DO.

In addition, only "doctors" are currently protected from disciplinary action from their Licensing Board, for discussing cannabis benefits and risks with their patients, but not Nurses.

Many of our most vulnerable Oregon citizens on Medicaid/Oregon Health Plan (OHP) may receive primary care from a medical provider other than a MD or DO, such as a Nurse Practitioner AKA PCP (Primary Care Provider).

Other states, such as our neighbor Washington state, have allowed for a broad range of PCPs, including Nurse Practitioners, for decades, to provide equal access for safe information and to recommend the use of cannabis for their patients.

This Bill also:

- Aligns OSBN with modern standards of National Nursing Practice, for patients using cannabis.

•(See Slide #3, for National Council of State Boards of Nursing, NCSBN National Nursing Guidelines). The National Nursing Practice Guidelines support the ethical Practice of Nursing, ensuring patient rights and safety in an equitable manner.

The updated language in this Bill will help Nurses advocate fully with evidence-based health education, for their most vulnerable patients. Per the most recent Gallup Poll, on a 19 year running streak, Nurses are the #1 most ethical and honest profession – trusted messengers for health education.

Expanding the definition of licensed medical providers in Oregon