

HOUSE BILL 55

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(PRE-FILED)

2lr1059
CF 2lr0332

By: **Delegate Cullison**

Requested: October 29, 2021

Introduced and read first time: January 12, 2022

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health Occupations – Nurse Anesthetists – Drug Authority and Collaboration**

3 FOR the purpose of authorizing a nurse anesthetist to prescribe, order, and administer
4 drugs, including controlled dangerous substances, without obtaining approval from
5 a practitioner with whom the nurse anesthetist collaborates, subject to certain
6 limitations; authorizing a nurse anesthetist to collaborate with a podiatrist; and
7 generally relating to nurse anesthetists.

8 BY repealing and reenacting, with amendments,
9 Article – Health Occupations
10 Section 8–513, 12–101(b), and 12–102(e)
11 Annotated Code of Maryland
12 (2021 Replacement Volume)

13 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
14 That the Laws of Maryland read as follows:

15 **Article – Health Occupations**

16 8–513.

17 (a) In this section, “perioperative assessment and management” means the
18 assessment and management of a patient preoperatively, intraoperatively, and
19 postoperatively.

20 (b) (1) A nurse anesthetist may perform the following functions:

21 (i) Perioperative assessment and management of patients requiring
22 anesthesia services;

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



- 1 (ii) Administration of anesthetic agents;
- 2 (iii) Management of fluids in intravenous therapy; [and]
- 3 (iv) Respiratory care; AND

4 (V) SUBJECT TO PARAGRAPH (4) OF THIS SUBSECTION,
5 PRESCRIPTION, ORDERING, AND ADMINISTRATION OF DRUGS, INCLUDING A DRUG
6 THAT IS CLASSIFIED AS A CONTROLLED DANGEROUS SUBSTANCE UNDER TITLE 5,
7 SUBTITLE 4 OF THE CRIMINAL LAW ARTICLE.

8 (2) A nurse anesthetist has the right and obligation to refuse to perform a
9 delegated act if in the nurse anesthetist's judgment, the act is:

- 10 (i) Unsafe;
- 11 (ii) An invalidly prescribed medical act; or
- 12 (iii) Beyond the clinical skills of the nurse anesthetist.

13 (3) Paragraph (1) of this subsection may not be construed to authorize a
14 nurse anesthetist to:

- 15 (i) Diagnose a medical condition;
- 16 (ii) Provide care that is not consistent with the scope of practice of
17 nurse anesthetists; or
- 18 (iii) Provide care for which the nurse anesthetist does not have proper
19 education and experience.

20 (4) A NURSE ANESTHETIST MAY PRESCRIBE DRUGS UNDER
21 PARAGRAPH (1) OF THIS SUBSECTION:

22 (I) ONLY IN AN AMOUNT THAT DOES NOT EXCEED A 10-DAY
23 SUPPLY;

24 (II) ONLY FOR AN INDIVIDUAL WITH WHOM THE NURSE
25 ANESTHETIST HAS, AT THE TIME OF PRESCRIPTION, ESTABLISHED A CLIENT OR
26 PATIENT RECORD;

27 (III) ONLY IN CONNECTION WITH THE DELIVERY OF ANESTHESIA
28 SERVICES; AND

29 (IV) WITHOUT OBTAINING APPROVAL FROM A PRACTITIONER

1 **WITH WHOM THE NURSE ANESTHETIST COLLABORATES UNDER SUBSECTION (C) OF**
2 **THIS SECTION.**

3 (c) A nurse anesthetist shall collaborate with an anesthesiologist, a licensed
4 physician, [or] a dentist, **OR A PODIATRIST** in the following manner:

5 (1) An anesthesiologist, a licensed physician, [or] a dentist, **OR A**
6 **PODIATRIST** shall be physically available to the nurse anesthetist for consultation at all
7 times during the administration of, and recovery from, anesthesia;

8 (2) An anesthesiologist shall be available for consultation to the nurse
9 anesthetist for other aspects of the practice of nurse anesthesia; and

10 (3) If an anesthesiologist is not available, a licensed physician [or], dentist,
11 **OR PODIATRIST** shall be available to provide this type of consultation.

12 (d) The nurse anesthetist shall ensure that a qualified anesthesia provider:

13 (1) Performs a thorough and complete preanesthetic assessment;

14 (2) Obtains informed consent for the planned anesthetic intervention from
15 the patient or an individual responsible for the patient; and

16 (3) Formulates a patient-specific plan for anesthesia care.

17 (e) The nurse anesthetist as part of the standards of practice shall:

18 (1) Implement and adjust an anesthesia care plan as needed to adapt to
19 the patient's response to the anesthesia;

20 (2) Monitor a patient's physiologic condition for untoward identifiable
21 reactions and initiate appropriate corrective actions as required;

22 (3) Enter prompt, complete, and accurate documentation of pertinent
23 information on a patient's record;

24 (4) Transfer responsibility for care of a patient to other qualified providers
25 in a manner that ensures continuity of care and patient safety;

26 (5) Ensure that appropriate safety precautions are taken to minimize the
27 risks of fire, explosion, electrical shock, and equipment malfunction;

28 (6) Maintain appropriate infection control standards;

29 (7) Evaluate anesthesia care to ensure its quality;

1 (8) Maintain continual competence in anesthesia practice; and

2 (9) Respect and maintain the basic rights of patients.

3 (f) This section may not be construed to require a written collaboration
4 agreement between a nurse anesthetist and an anesthesiologist, a physician, [or] a dentist,
5 **OR A PODIATRIST.**

6 12–101.

7 (b) “Authorized prescriber” means any licensed dentist, licensed dental hygienist
8 with prescriptive authority under § 4–206.4 of this article, licensed physician, licensed
9 podiatrist, licensed veterinarian, advanced practice nurse with prescriptive authority
10 under § 8–508 of this article, **LICENSED NURSE ANESTHETIST**, or other individual
11 authorized by law to prescribe prescription or nonprescription drugs or devices.

12 12–102.

13 (e) (1) This title does not prohibit:

14 (i) A dentist, physician, or podiatrist from administering a
15 prescription drug or device in the course of treating a patient; [or]

16 (ii) A licensed dental hygienist from administering medication under
17 § 4–206.4 of this article; **OR**

18 **(III) A NURSE ANESTHETIST FROM ADMINISTERING**
19 **MEDICATION UNDER § 8–513 OF THIS ARTICLE.**

20 (2) For the purposes of paragraph (1)(i) of this subsection, “administering”
21 means the direct introduction of a single dosage of a drug or device at a given time, whether
22 by injection or other means, and whether in liquid, tablet, capsule, or other form.

23 **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**
24 **October 1, 2022.**