



Connecticut Association of Nurse Anesthetists

Written Testimony of
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House Bill No. 6391
An Act Concerning the Practice of Advanced Practice Registered Nurses

Wednesday, March 20, 2013
Connecticut General Assembly's Public Health Committee

Good day Senator Gerratana, Representative Johnson, Senator Welch, Representative Srinivasan and members of the Public Health Committee. Thank you for this opportunity to testify on House Bill 6391, "An Act Concerning the Practice of Advanced Practice Registered Nurses." My name is Pauleen Consebido. I am a Certified Registered Nurse Anesthetist (CRNA) and a licensed Advanced Practice Registered Nurse (APRN). I am here today representing the Connecticut Association of Nurse Anesthetists (CANA).

Nurse anesthetists have been providing anesthesia care to patients for 150 years. There are more than 45,000 nurse anesthetists across the United States. Nurse anesthetists are a part of Connecticut's approximately 3,800 licensed Advanced Practice Registered Nurses. The administration of anesthesia is within the scope of practice of CRNAs and is therefore a recognized specialty in both nursing and medicine. Nurse anesthetists provide anesthesia in every setting in which anesthesia care is delivered including hospitals, obstetric units, ambulatory surgical centers, office based practices, the U.S. military and Department of Veterans Affairs healthcare facilities.

In the state of Connecticut, there are two anesthesia models in which nurse anesthetists practice. Nurse anesthetists are either a part of an anesthesia care team in a hospital or outpatient setting or contract with a freestanding surgical center. In the hospital or outpatient setting, the anesthesiologist and nurse anesthetist work together as a team to provide anesthesia coverage for several anesthetizing locations at one time. In the surgical center or office-based practice, nurse anesthetists work with the surgeon to provide anesthesia care to patients. Both approaches of anesthesia delivery serve our patients, the citizens of Connecticut, well.

I would like to state clearly CANA's position regarding House Bill 6391. We are not seeking a legislative change to our section of the statute. At this time, Connecticut CRNAs do not experience those same concerns with access to health care as our APRN colleagues. Since the beginning of discussions on this most important legislation, CANA has communicated this position to the members of the APRN

Coalition, to the leadership of the Public Health Committee, to the staff of the Department of Public Health and our anesthesiologist colleagues.

We support our APRN colleagues. As the number of insured individuals and families is expected to increase with full implementation of the Affordable Care Act, a decrease in healthcare costs while increasing access to healthcare becomes increasingly important for the citizens of Connecticut.

Once again, thank you for the opportunity to address the committee regarding this important legislation. I would be glad to answer any questions.