

To whom it may concern:

Please accept this comment as a strong objection to SB 36 which will expand the scope of practice for APRNs and CRNAs and allow them to perform evaluative services and treatments that they have received no formal training to do. The practice of Interventional Pain Management (IPM) requires in depth evaluation of patients to determine the precise cause of pain and these evaluative services are not part of the formal training provided to CRNAs. In addition the vast majority of procedures involved in IPM are also not taught in CRNA training programs including the use of fluoroscopy which is now standard of care for IPM procedures even for epidural injections for which CRNAs do receive some limited training. In other words, even the techniques CRNAs are taught are not c/w the techniques used standardly in IPM today to ensure safety. There is no access problem in CT at this time and so no urgent need to expand the scope of practice of CRNAs.

This bill will expose CT citizens to increase risk from procedures which are being safely performed by board certified physicians. The procedures performed in IPM when not done properly can result in nerve injury, paralysis, and even death and therefore it is essential that providers be properly trained in formal training programs. CRNAs simply do not possess such training. In addition the evaluative services which are not taught in any CRNA training program are equally as important or else unnecessary procedures will be performed with risk and no benefit.

Furthermore, unsupervised prescription of opioid medication by providers untrained in this area has already proven to disrupt the appropriate balance of assuring proper access to pain management care while mitigating the potential for abuse and diversion. Such is the case with Primary Care Physicians who possess far more training than CRNA's and APRN's. In some states, the use of chronic opioid medication is already restricted to pain management specialists (physicians with residency and fellowship training in ACGME accredited program). Allowing untrained nurses to have independent practice privileges in the dynamic area of pain management would be premature and unsafe.

This will also increase the costs to the health care system with no added benefit. Thank you for allowing us the opportunity to comment on this important matter which could seriously effect CT citizens.

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