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# OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research  
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Legislative Budget  
Office

H.B. 362  
135<sup>th</sup> General Assembly

## Bill Analysis

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**Version:** As Introduced

**Primary Sponsors:** Reps. Baker and Robb Blasdel

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### SUMMARY

- Eliminates the current law requirement that a certified registered nurse anesthetist (CRNA) practice with a physician's, podiatrist's, or dentist's supervision, defined under existing law to mean that the CRNA is under the physician's, podiatrist's, or dentist's direction.
- Instead requires a CRNA to practice in consultation with a provider, defined by the bill to mean that the provider has requested the CRNA to perform certain tasks for a patient.
- Also eliminates the requirement that a CRNA be in the immediate presence of a physician, podiatrist, or dentist when administering anesthesia or performing its induction, maintenance, or emergence.
- Removes current law provisions establishing a timeline during which a CRNA may engage in specified activities, including selecting, ordering, and administering certain treatments, drugs, and intravenous fluids, while still maintaining CRNA authority to engage in many of those activities.
- Prohibits the State Dental and Medical Boards, when adopting rules, from prohibiting a dentist or podiatrist from consulting with a CRNA.
- Makes other changes to the law governing the practice of CRNAs, including by consolidating provisions of existing law.

### DETAILED ANALYSIS

#### Provider consultation

H.B. 362 eliminates the current law requirement that a certified registered nurse anesthetist (CRNA) practice under the supervision of a physician, podiatrist, or dentist, instead

requiring a CRNA to practice in consultation with a provider.<sup>1</sup> Under the bill, “consultation” is defined to mean that a provider, in accordance with policies established by the setting where the provider and CRNA practice, has requested the CRNA to perform certain activities for a patient (see “**CRNA scope of practice**” below).<sup>2</sup> Such a request may be made either verbally or in writing.

Note that the bill neither describes a consulting provider nor requires that such a provider act within the provider’s scope of practice when consulting with the CRNA.

## **Physician, podiatrist, or dentist supervision**

At present, Ohio law requires a CRNA to practice with the supervision of a physician, podiatrist, or dentist, defining “supervision” to mean that the CRNA is under the physician’s, podiatrist’s, or dentist’s direction.<sup>3</sup> In the case of a podiatrist or dentist, current law also requires the podiatrist or dentist to be acting within that professional’s scope of practice when directing the CRNA.<sup>4</sup>

### **Immediate presence**

In addition to replacing physician, podiatrist, or dentist supervision with provider collaboration, the bill eliminates the existing law requirement that a CRNA be in the immediate presence of a physician, podiatrist, or dentist when administering anesthesia or performing its induction, maintenance, or emergence.<sup>5</sup>

## **CRNA scope of practice**

The bill consolidates several existing law statutory sections governing a CRNA’s scope of practice and also revises in part that scope of practice, by eliminating certain activities and authorizing others.<sup>6</sup> The following table highlights the revisions. As noted above, under current law, each activity must be performed with physician, podiatrist, or dentist supervision, while under the bill, a CRNA may engage in the activities in collaboration with a provider.

Activity	Current law	H.B. 362
Administering anesthesia.	Permitted under current law in the immediate presence of a physician, podiatrist, or dentist.	Maintained by the bill, without requiring a physician’s, podiatrist’s, or dentist’s immediate presence.

<sup>1</sup> R.C. 4723.01 and 4723.43.

<sup>2</sup> R.C. 4723.01(M).

<sup>3</sup> R.C. 4723.01(M) and 4723.43(B).

<sup>4</sup> R.C. 4723.01(M).

<sup>5</sup> R.C. 4723.01(M) and 4723.43.

<sup>6</sup> R.C. 4723.43(D), 4723.433, repealed and reenacted, 4723.434, repealed, and 4723.435, repealed. See also R.C. 4761.17.

Activity	Current law	H.B. 362
Performing anesthesia induction, maintenance, and emergence.	Permitted under current law in the immediate presence of a physician, podiatrist, or dentist.	Maintained by the bill, without requiring a physician's, podiatrist's, or dentist's immediate presence.
Performing epidural or spinal anesthetic procedures.	No provision.	Specifically authorized by the bill.
Obtaining informed consent for anesthesia care.	Permitted under current law.	Maintained by the bill.
Performing and documenting evaluations and assessments, which may include ordering and evaluating one or more diagnostic tests for conditions related to the administration of anesthesia.	<p>Permitted under current law, but only when performed as follows:</p> <ul style="list-style-type: none"> <li>▪ During the time period that begins on a patient's admission for a surgery or procedure and ends with the patient's discharge from recovery;</li> <li>▪ While the CRNA is physically present at the health care facility;</li> <li>▪ While the CRNA's supervising physician, podiatrist, or dentist is also physically present at the health care facility; and</li> <li>▪ Under a written policy adopted by the health care facility's medical, nursing, and pharmacy directors.</li> </ul>	No provision.
Performing pre-anesthetic preparation and evaluation, post-anesthetic preparation and evaluation, post-anesthesia care, and clinical support functions.	Permitted under current law.	Maintained by the bill, but also specifies that clinical support functions include selecting, ordering, and administering treatments, drugs, and intravenous (IV) fluids.

Activity	Current law	H.B. 362
<p>Selecting, ordering, and administering treatments, drugs, and IV fluids.</p>	<p>Permitted under current law, but only when performed as follows:</p> <ul style="list-style-type: none"> <li>▪ During the time period that begins on a patient’s admission for a surgery or procedure and ends with the patient’s discharge from recovery;</li> <li>▪ As necessary for patient management and care AND for conditions related to the administration of anesthesia;</li> <li>▪ While the CRNA is physically present at the health care facility;</li> <li>▪ While the CRNA’s supervising physician, podiatrist, or dentist is physically present at the health care facility; and</li> <li>▪ Under a written policy adopted by the health care facility’s medical, nursing, and pharmacy directors.</li> </ul>	<p>Maintains CRNA authority to perform the activities, but eliminates all the current law conditions except for the following: as necessary for patient management and care AND for conditions related to the administration of anesthesia.</p>
<p>Directing a registered nurse (RN), licensed practical nurse (LPN), or respiratory therapist to do the following:</p> <ul style="list-style-type: none"> <li>▪ Provide supportive care, including monitoring vital signs, conducting electrocardiograms, and administering IV fluids;</li> <li>▪ Administer treatments, drugs, and IV fluids for conditions related to the administration of anesthesia.</li> </ul>	<p>Permitted under current law when performing clinical support functions if the following conditions are met:</p> <ul style="list-style-type: none"> <li>▪ The RN, LPN, or therapist is authorized by law to provide such care;</li> <li>▪ With respect to the administration of treatments, drugs, and IV fluids for anesthesia-related conditions, a physician, podiatrist, or dentist has ordered them.</li> </ul>	<p>Maintained by the bill, but eliminates the condition that the treatment, drugs, and IV fluids be ordered by a physician, podiatrist, or dentist.</p>

Activity	Current law	H.B. 362
<p>Directing an RN, LPN, or respiratory therapist to do the following:</p> <ul style="list-style-type: none"> <li>▪ Provide supportive care, including monitoring vital signs, conducting electrocardiograms, and administering IV fluids;</li> <li>▪ Administer treatments, drugs, and IV fluids for conditions related to the administration of anesthesia.</li> </ul>	<p>Also permitted under current law separate from clinical support functions if the direction occurs as follows:</p> <ul style="list-style-type: none"> <li>▪ During the time period that begins on a patient's admission for a surgery or procedure and ends with the patient's discharge from recovery;</li> <li>▪ As necessary for patient management and care;</li> <li>▪ While the CRNA is physically present at the health care facility;</li> <li>▪ While the CRNA's supervising physician, podiatrist, or dentist is physically present at the health care facility;</li> <li>▪ Under a written policy adopted by the health care facility's medical, nursing, and pharmacy directors.</li> </ul>	<p>Maintained by the bill, but without any of the current law conditions.</p>
<p>Prescribing a drug for use outside the health care facility where the CRNA practices.</p>	<p>Specifies that such prescribing is not authorized.</p>	<p>Same as current law.</p>

### Note on verbal orders

The bill maintains an existing law provision specifying that a CRNA is not prohibited from implementing a verbal order of a supervising physician, podiatrist, or dentist, except that the bill instead refers to a consulting provider's verbal order.<sup>7</sup>

### Limits on CRNA practice

The bill eliminates the following current law limits on a CRNA's practice:

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<sup>7</sup> R.C. 4723.433 and 4723.434, repealed.

- That a CRNA's scope of practice, when supervised by a podiatrist, is limited to the anesthesia procedures that the podiatrist is authorized to perform;
- That a CRNA may not administer general anesthesia under the supervision of a podiatrist in a podiatrist's office;
- That a CRNA's scope of practice, when supervised by a dentist, is limited to the anesthesia procedures that the dentist is authorized to perform.<sup>8</sup>

The bill also revises an existing law provision prohibiting a CRNA from engaging in certain activities if the supervising physician, podiatrist, or dentist or the health care facility where the nurse practices determines that it is not in a patient's best interest for the nurse to perform the one or more activities. Under current law, this prohibition applies only to certain tasks and only when performed during the period beginning on a patient's admission to a facility for a surgery or procedure and ending with the patient's discharge from recovery.<sup>9</sup> But, under the bill, the foregoing prohibition applies to any CRNA activity and at any time.<sup>10</sup> Note also that the bill refers to a consulting provider rather than a supervising physician, podiatrist, or dentist.

## **Board rules governing dentists and podiatrists**

Under the bill, the State Dental Board, when adopting rules and administering and enforcing the law governing dentists, must not prohibit a dentist from consulting with a CRNA, including a dentist who is not authorized to employ or use conscious sedation or general anesthesia.<sup>11</sup> Under existing law unchanged by the bill, a dentist must hold a conscious sedation permit or general anesthesia permit issued by the Dental Board in order to be eligible to employ or use conscious sedation or general anesthesia.<sup>12</sup>

Similarly, the bill prohibits the State Medical Board, when adopting rules and administering and enforcing the law governing podiatrists, from prohibiting a podiatrist from consulting with a CRNA, including a podiatrist who practices in a setting other than a hospital or college of podiatric medicine and surgery.<sup>13</sup> Under existing law unchanged by the bill, a podiatrist may use general anesthetics only in those settings.<sup>14</sup>

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<sup>8</sup> R.C. 4723.43(B). See also R.C. 4731.51 and Chapter 4715.

<sup>9</sup> R.C. 4723.434.

<sup>10</sup> R.C. 4723.433.

<sup>11</sup> R.C. 4715.03(H).

<sup>12</sup> R.C. 4715.03.

<sup>13</sup> R.C. 4731.513.

<sup>14</sup> R.C. 4731.51.

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## HISTORY

Action	Date
Introduced	12-12-23

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