

**Maryland General Assembly  
Department of Legislative Services**

**Proposed Regulations  
Department of Health and Mental Hygiene  
(DLS Control No. 15-295)**

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**Overview and Legal and Fiscal Impact**

The regulations authorize a certified registered nurse anesthetist (CRNA) to collaborate with a licensed podiatrist to deliver anesthesia care; repeal the requirement that a CRNA notify the State Board of Nursing of the name and license number of a collaborating physician or dentist; clarify that a student CRNA who has failed a national exam may still practice as a registered nurse; and require a CRNA to provide the board with a record of a current national certification at renewal.

The regulations present no legal issues of concern.

There is no impact on State or local agencies.

**Regulations of COMAR Affected**

**Department of Health and Mental Hygiene:**

Board of Nursing: Practice of Nurse Anesthetist: COMAR 10.27.06.01-.04 and .06-.08

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**Legal Analysis**

**Summary of Regulations**

**Definitions**

The regulations alter the definition of “collaboration” to mean the delivery of anesthesia care in coordination with an anesthesiologist, physician, podiatrist, or dentist in a manner that allows each licensed healthcare professional to fully utilize the health care professional’s expertise and perform any act authorized under the Health – General Article and the Health Occupations Article. The regulations add a licensed podiatrist to the current definition of “licensed physician or dentist” and alter the definition to mean “a Maryland-licensed physician, podiatrist, or dentist who has knowledge and experience in resuscitation, anesthetic drugs, and their reactions.” The regulations alter the definition of “practice of nurse anesthesia” to include a licensed podiatrist in the list of practitioners a nurse anesthetist may collaborate with to deliver anesthesia care.

## **Certification**

The regulations repeal the requirement that a CRNA notify the board of the name and license number of a collaborating physician or dentist and instead prohibit a CRNA from practicing in the State until the board has certified that the CRNA has met all the requirements specified in the regulations. The regulations alter from one year to two years the length of the term of a certification renewal and require a CRNA to provide the board with a record of a current national certification at the time of renewal of the certification.

## **Practice Before Certification**

The regulations alter the circumstances when a CRNA may practice before certification under the supervision of an anesthesiologist or CRNA by deleting the requirement for the supervising CRNA to have a collaborative agreement with an anesthesiologist. In addition, the regulations clarify that a student CRNA who has failed the national exam may still practice as a registered nurse.

## **Standards of Practice**

The regulations alter the standards of practice for a CRNA to collaborate with an anesthesiologist, a licensed physician, podiatrist or dentist so as to require these individuals to be on site and immediately available to the CRNA for consultation at all times during the administration of and recovery from anesthesia.

## **Legal Issues**

The regulations present no legal issues of concern.

## **Statutory Authority and Legislative Intent**

The Department of Health and Mental Hygiene cites §§ 8-205(a) (1), (2), (4), and (5) and 8-302(b)(2)(ii) of the Health Occupations Article as statutory authority for the regulations. Section 8-205(a)(1), (2), (4), and (5) authorize the board to:

- adopt regulations to carry out specified provisions of law;
- set standards for the practice of registered nursing, licensed practical nursing, certified nursing assistants, and certified medication technicians;
- adopt regulations for the performance of additional nursing acts that may be performed under any condition authorized by the board, including emergencies and require education and clinical experience; and

- adopt regulations for registered nurses to perform independent nursing functions that require formal education and clinical experience and may be performed under any condition authorized by the board, including emergencies.

Under § 8-302(b)(2)(ii), an individual who is certified as a nurse anesthetist, nurse midwife, nurse psychotherapist, or clinical nurse specialist who is certified by the board and in good standing prior to October 1, 2012, is deemed to have met specified educational requirements.

This authority is correct and complete. The regulations comply with the legislative intent of the law.

## **Fiscal Analysis**

There is no impact on State or local agencies.

### **Agency Estimate of Projected Fiscal Impact**

The regulations make various amendments relating to certified registered nurse anesthetists (CRNAs). The board advises that the regulations have no fiscal impact as the changes conform to current practice. The Department of Legislative Services concurs.

### **Impact on Budget**

There is no impact on the State operating or capital budget.

### **Agency Estimate of Projected Small Business Impact**

The board advises that the regulations have minimal or no economic impact on small businesses in the State. The Department of Legislative Services concurs.

## **Contact Information**

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