**South Carolina General Assembly**

125th Session, 2023-2024

**H. 3785**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Collins, B. Newton, Carter, Willis, Anderson, McGinnis, White, Bustos and Harris

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Introduced in the House on January 24, 2023

Currently residing in the House

Summary: Certified Registered Nurse Anesthetists

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

1/24/2023 House Introduced and read first time ([House Journal‑page 31](h:\hj\20230124.docx))

1/24/2023 House Referred to Committee on **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 31](h:\hj\20230124.docx))

1/25/2023 House Member(s) request name added as sponsor: Carter

2/15/2023 House Member(s) request name added as sponsor: Willis

2/22/2023 House Member(s) request name added as sponsor:
Anderson, McGinnis, White

4/4/2023 House Member(s) request name added as sponsor: Bustos,
Harris

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**VERSIONS OF THIS BILL**

[01/24/2023](https://www.scstatehouse.gov/sess125_2023-2024/prever/3785_20230124.docx)

A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS BY AMENDING SECTION 40‑33‑20, RELATING TO DEFINITIONS IN THE NURSE PRACTICE ACT, SO AS TO PROVIDE ADVANCED PRACTICE REGISTERED NURSES MAY PERFORM CERTAIN MEDICAL ACTS PURSUANT TO APPROVED WRITTEN GUIDELINES, AND TO REMOVE THE SUPERVISION REQUIREMENT FROM THE DEFINITIONS OF “APPROVED WRITTEN GUIDELINES” AND “CERTIFIED REGISTERED NURSE ANESTHETIST”; BY AMENDING SECTION 40‑33‑34, RELATING TO ANESTHESIA CARE, SO AS TO MAKE CONFORMING CHANGES; AND BY REPEALING SECTION 40‑47‑197 RELATING TO SUPERVISION OF CERTIFIED REGISTERED NURSE ANESTHETISTS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Section 40‑33‑20(5), (9), and (19) of the S.C. Code is amended to read:

Section 40‑33‑20. In addition to the definitions provided in Section 40‑1‑20, for purposes of this chapter:

(5) “Advanced Practice Registered Nurse” or “APRN” means a registered nurse who is prepared for an advanced practice registered nursing role by virtue of additional knowledge and skills gained through an advanced formal education program of nursing in a specialty area that is approved by the board. The categories of APRN are nurse practitioner, certified nurse‑midwife, clinical nurse specialist, and certified registered nurse anesthetist. An advanced practice registered nurse shall hold a doctorate, a post‑nursing master's certificate, or a minimum of a master's degree that includes advanced education composed of didactic and supervised clinical practice in a specific area of advanced practice registered nursing. APRNs must achieve national certification within two years post‑graduation. An APRN may perform those activities considered to be the practice of registered nursing or advanced practice consisting of nonmedical acts, such as population health management; quality improvement or research projects within a health care system; and analysis of data and corresponding system recommendations, revisions, developments, or informatics. An APRN also may perform specified medical acts pursuant to a practice agreement as defined in item (45) and approved written guidelines as defined in item (9).

(9) “Approved written guidelines” means specific statements developed by a certified registered nurse anesthetist and a supervising licensed physician or dentist or by the medical staff within the facility where practice privileges have been granted a written agreement developed by a certified registered nurse anesthetist and a licensed physician or dentist or medical staff within the facility where practice privileges have been granted. The approved written guidelines must establish the care to be provided by the CRNA and a description of how the CRNA will communicate pertinent information with a licensed physician or dentist, as well as any other licensed health care providers involved in a case to optimize the overall care delivered to the patient and to ensure patient safety is maintained in accordance with state and federal laws, as well as all applicable Board of Nursing rules and regulations. The approved written guidelines must comply with Section 40‑33‑34.

(19) (a) “Certified Registered Nurse Anesthetist” or “CRNA” means an advanced practice registered nurse who:

(ai) has successfully completed an advanced, organized formal CRNA education program at a minimum of the master's level accredited by the national accrediting organization of this specialty area and that is recognized by the board;

(bii) is certified by a board‑approved national certifying organization; and

(ciii) demonstrates advanced knowledge and skill in the delivery of anesthesia services.

(b) A CRNA must practice in accordance with approved written guidelines developed under supervision of with a licensed physician or dentist or approved by the medical staff within the facility where practice privileges have been granted.

SECTION 2. Section 40‑33‑34(H) of the S.C. Code is amended to read:

(H)(1) Nothing in this section may be construed to require a CRNA to obtain prescriptive authority to deliver anesthesia care.

(2) A CRNA shall practice pursuant to approved written guidelines developed with the supervising licensed physician or dentist or by the medical staff within the facility where practice privileges have been granted and must include, but are not limited to:

(a) the following general information:

(i) name, address, and South Carolina license number of the certified registered nurse anesthetist;

(ii) name, address, and South Carolina license number of the supervising physician, dentist, or the physician director of anesthesia services or the medical director of the facility;

(iii) dates the guidelines were developed, and dates the guidelines were reviewed and amended;

(iv) physical address of the primary practice and any additional practice sites;

(b) these requirements for providing anesthesia services:

(i) documentation of clinical privileges in the institutions where anesthesia services are provided, if applicable;

(ii) copy of job description;

(iii) policies and procedures that outline the pre‑anesthesia evaluation, induction, intra‑operative maintenance, and emergence from anesthesia;

(iv) evidence of outcome evaluation for anesthesia services;

(v) description of how the CRNA will communicate pertinent information with a licensed physician or dentist, as well as any other licensed health care providers involved in a case, to optimize the overall care delivered to the patient.

(3) The original and any amendments to the approved written guidelines must be reviewed at least annually, dated and signed by the CRNA and licensed physician or dentist or by the medical staff within the facility where practice privileges occur, and must be made available to the board for review within seventy‑two hours of request. Failure to produce the guidelines is considered misconduct and subjects the licensee to disciplinary action. A random audit of approved written guidelines must be conducted by the board at least biennially.

(4) A person who changes whose primary practice settings or physician or dentist change shall notify the board of this change within fifteen business days and provide verification of approved written guidelines. A CRNA who discontinues his or her practice shall notify the board within fifteen business days.

(5) The physician or dentist responsible for the supervision of a CRNA must be identified on the anesthesia record before administration of anesthesia.

SECTION 3. Section 40‑47‑197 of the S.C. Code is repealed.

SECTION 4. This act takes effect upon approval by the Governor.

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