TESTIMONY AGAINST..... DO NOT SUPPORT

- 1. The expansion of Controlled (FDA Scheduled) substances should not be allowed to Anesthesia Nurses (CRNA) in Oregon for patients in settings not already defined.
- 2. Currently Anesthesia Nurses and Anesthesiologists can provide anesthesia service without a DEA. The practice setting and hospital/ASC practice sites provide such.
- 3. A patient in an Independent Setting who does not have a defined primary responsible/licensed practitioner by the OMB should not be provided service where there is not defined record keeping, patient follow up, knowledge of appropriate prescribing, drug interactions and knowledge of acute and chronic pain management.
- 4. Training in pharmacology and clinical training (pain management) requires more than courses defined by the Board of Nursing and Pharmacy. Currently abuse of narcotic for "Pain Management" is a serious issue within Oregon and other states. The prescribing of these and other like drugs must be in the control of practitioner who are currently licensed by the state.
- 5. Recently an example in the state of Washington provided documentation of the potential abuse and misuse of an access site for those seeking "PAIN RELIEF". Oregon must not allow this to happen legislatively. Individuals who do want to care for such patients, MUST earn this privilege by Educational demonstration and NOT by Legislative rules.
- 6. Oregon is currently listed as one in which the highest percentage of pain medication prescription is provided. The CDC information notes 19-28 pounds per 10,000 people.
- 7. PLEASE DO NOT SUPPORT SB 136 for the SAFETY of Oregonians.

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Joanne Jene, MD TESTIMONY AGAINST SB 136 2221 SW lst Ave., 1921 ANESTHESIA NURSE (CRNA) PRESCRIPTIVE WRITING Portland, OR 97201

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WHO: BA Willamette University, Salem, OR 1957 Oregonian, MD'60 from OHSU, Residency: Anesthesiology Currently retired

WHAT-WHEN-WHERE-WHEN

Clinical practice at Legacy Emanuel Hospital (4+decades), Instructor UCSF, Dept of Anesthesiology OHSU volunteer faculty...Clinical appointment Volunteer Project HOPE, international health education and healing (8X) Active in organized medicine: OMA, OSA, ASA, Medical Staff Emanuel Hosp.

Oregon Medical Board....2 terms appointed 1986 Delegate to OMA, American Society of Anesthesiologist (ASA), District Dir. ASA offices: Assistant Secretary and Secretary

Active in health care issues...OREGON CCO evolution Ronald McDonald House Charities of OR & SW WA...board and advisory bd.

WHY: Deeply concerned about issues of PATIENT SAFETY as the ACA and Oregon

Coordinated Care Organizations (CCO) evolve. The triple aim must to successfully implemented.

HOW: Participation and education of legislative leaders, community and citizens