

2026 -- S 3184

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LC006266  
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2026

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A N A C T

RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

Introduced By: Senators Ciccone, Burke, Famiglietti, Raptakis, and Tikoian

Date Introduced: April 03, 2026

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1           SECTION 1. Chapter 5-34 of the General Laws entitled "Nurses" is hereby amended by  
2 adding thereto the following section:

3           **5-34-3.1. Safe administration of anesthesia.**

4           (a) Registered nurses (RNs) and advanced practice registered nurses (APRNs), other than  
5 licensed certified registered nurse anesthetists (CRNAs), as defined in this chapter, and RNs  
6 enrolled in a nurse anesthesiology training program approved by the Council on Accreditation of  
7 Nurse Anesthesia Educational programs (COA) or its predecessors or successors, shall not  
8 administer agents that are primarily used and classified as general anesthetics for minimal,  
9 moderate, deep sedation, or general anesthesia including, propofol, Etomidate, sodium thiopental,  
10 methohexital, or volatile gases (e.g. sevoflurane, isoflurane, desflurane), nor shall any RN or Non-  
11 CRNA APRN administer or manage deep sedation or general anesthesia for any diagnostic,  
12 therapeutic, or surgical procedures using any drug or medication.

13           (b) For critical life-saving situations requiring the immediate and emergent facilitation of  
14 airway management (rapid sequence intubation) or to maintain sedation for tracheally intubated  
15 and mechanically ventilated patients, an RN acting as the third hand of a licensed APRN or  
16 physician, or an APRN may initiate, titrate, and bolus intravenous/intraosseous (IV/IO) agents. An  
17 APRN, may initiate, titrate, and bolus intravenous/intraosseous (IV/IO) agents if the APRN is  
18 trained in airway management and acting within their scope of practice and approved by their  
19 governing body, as authorized in this section.

1           (c) For emergency situations where there is an imminent threat to life or limb, the APRN  
2 or RN can administer anesthetic medications to preserve patient life including, but not limited to,  
3 cardiac arrest, and respiratory failure, acting within their scope of practice and approved by their  
4 governing body.

5           (d) Nothing in this section shall prohibit the administration and/or titration of anesthetics  
6 for patients being sedated in a critical care setting (emergency room, intensive care unit) and are  
7 tracheally intubated, and mechanically ventilated by a RN or APRN acting within the scope of  
8 practice and approved by their governing body.

9           SECTION 2. Chapter 5-34.2 of the General Laws entitled "Nurse Anesthetists" is hereby  
10 amended by adding thereto the following section:

11           **5-34.2-2.1. Safe administration of anesthesia.**

12           (a) Registered nurses (RNs) and advanced practice registered nurses (APRNs), other than  
13 licensed certified registered nurse anesthetists (CRNAs), as defined in this chapter, and RNs  
14 enrolled in a nurse anesthesiology training program approved by the Council on Accreditation of  
15 Nurse Anesthesia Educational programs (COA) or its predecessors or successors, shall not  
16 administer agents that are primarily used and classified as general anesthetics for minimal,  
17 moderate, deep sedation, or general anesthesia including, propofol, Etomidate, sodium thiopental,  
18 methohexital, or volatile gases (e.g. sevoflurane, isoflurane, desflurane), nor shall any RN or Non-  
19 CRNA APRN administer or manage deep sedation or general anesthesia for any diagnostic,  
20 therapeutic, or surgical procedures using any drug or medication.

21           (b) For critical life-saving situations requiring the immediate and emergent facilitation of  
22 airway management (rapid sequence intubation) or to maintain sedation for tracheally intubated  
23 and mechanically ventilated patients, an RN acting as the third hand of a licensed APRN or  
24 physician, or an APRN may initiate, titrate, and bolus intravenous/intraosseous (IV/IO) agents. An  
25 APRN, may initiate, titrate, and bolus intravenous/intraosseous (IV/IO) agents if the APRN is  
26 trained in airway management and acting within their scope of practice and approved by their  
27 governing body, as authorized in this section.

28           (c) For emergency situations where there is an imminent threat to life or limb, the APRN  
29 or RN can administer anesthetic medications to preserve patient life including, but not limited to,  
30 cardiac arrest, and respiratory failure, acting within their scope of practice and approved by their  
31 governing body.

32           (d) Nothing in this section shall prohibit the administration and/or titration of anesthetics  
33 for patients being sedated in a critical care setting (emergency room, intensive care unit) and are  
34 tracheally intubated, and mechanically ventilated by a RN or APRN acting within the scope of

1 [practice and approved by their governing body.](#)

2 SECTION 3. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

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1           This act would establish that the elective and/or independent administration of propofol,  
2 Etomidate, sodium thiopental, methohexital, and volatile anesthetics for any surgery or procedure  
3 is not, generally, within the “scope of practice” of registered nurses and non-CRNA advance  
4 practice registered nurses as defined in chapter 34.3 of title 5 and would restrict the administration  
5 of these medications to licensed certified registered nurse anesthetists. It would also detail each of  
6 those limited emergency circumstances where a registered nurse and advanced practice registered  
7 nurses, may safely administer anesthesia, such as critical life-saving or emergency situations where  
8 there is an imminent threat to life or limb. This act would detail each of those limited emergency  
9 circumstances where registered nurses and advanced practice registered nurses, may safely  
10 administer anesthesia, such as critical life-saving or emergency situations where there is an  
11 imminent threat to life or limb.

12           This act would take effect upon passage.

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