

## Steven Sepe

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**From:** suchit Aggarwal <saggarwal465@gmail.com>  
**Sent:** Monday, April 13, 2026 12:55 PM  
**To:** House Health and Human Services Committee  
**Subject:** Testimony for H 7740 - Dr Suchit Aggarwal - Oppose

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Dear Members of the Rhode Island House,

My name is Suchit Aggarwal MD. I am a board-certified anesthesiologist and USAP practice partner. I have been in clinical practice for over 2 decades and have overseen procedural sedation practices throughout the State of Rhode Island. I am writing in strong opposition to House Bill 7740.

This bill addresses a problem that current evidence does not support. Large clinical datasets consistently demonstrate that nurse-administered, physician-directed propofol sedation—when performed under standardized protocols—is safe. For example, a multicenter study of over 150,000 endoscopic cases (Rex et al.) found extremely low rates of adverse events, with no significant complications attributable to this care model. Similarly, an analysis of more than 9,000 procedures (Heuss et al.) reported very low rates of respiratory complications and no need for endotracheal intubation. Across studies, serious adverse event rates are reported as low as 0.01%, with no demonstrated improvement in outcomes when anesthesia providers are mandated for low-risk procedures.

HB 7740 would impose a one-size-fits-all anesthesia model that introduces clear and immediate risks to Rhode Island patients. It will reduce access to essential preventive care—particularly screening colonoscopies—by creating avoidable procedural bottlenecks. It will increase healthcare costs without improving safety. It will strain already limited anesthesia staffing resources, diverting them away from higher-acuity cases where their expertise is most needed.

Equally concerning, the bill's narrow and ambiguous emergency provisions risk delaying care in time-sensitive settings such as emergency departments and intensive care units, where rapid, protocol-driven sedation decisions are critical.

Rhode Island hospitals already operate under rigorous, nationally aligned standards for sedation safety, including credentialing, monitoring, and rescue training. These systems are effective, evidence-based, and accountable. Replacing them with rigid statutory restrictions undermines clinical judgment and makes Rhode Island an outlier without justification.

HB 7740 is not a patient safety measure—it is a policy that will limit access, increase costs, and disrupt safe, high-functioning care delivery systems.

I urge you to oppose this legislation and support evidence-based, team-based care that preserves both safety and access for Rhode Island patients.

Sincerely,

Suchit Aggarwal MD  
Executive Board Member of RISA

