

Steven Sepe

From: Thomas Morin <tmorinnicola@gmail.com>
Sent: Sunday, April 12, 2026 2:35 PM
To: House Health and Human Services Committee
Subject: Opposition to HB-7740

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Dear RI legislature,

I am a Physician Assistant practicing at Rhode Island Medical Imaging, and I am writing to respectfully urge you, the House Committee on Health and Human Services to oppose HB-7740.

This legislation includes restrictive language stating that, unless you are a CRNA or CRNA student, you “shall not administer agents that are primarily used and classified as general anesthetics for minimal, moderate, deep sedation, or general anesthesia.” This phrasing would inadvertently prohibit Physician Assistants and registered nurses from administering medications commonly used for minimal and moderate (“conscious”) sedation — a practice that has been safely conducted in Rhode Island and nationwide for decades.

- PAs, working collaboratively with RNs and physicians, routinely provide moderate sedation for procedures such as endoscopy, interventional radiology, and pediatric imaging.
- The proposed restriction would affect procedural areas, emergency departments, ICUs, and other inpatient settings.
- Limiting sedating agents to CRNAs and anesthesiologists would significantly reduce access to care, delay procedures, and increase patient length of stay.
- There are clear cost implications, as hospitals would now be required to rely on a more limited and higher-cost workforce for procedures that have traditionally been safe and efficient under current practice standards.
- It would further restrict nursing scope of practice by forbidding RNs from administering or titrating sedating medications in critical care settings.

In my practice, these limitations would directly affect our ability to perform timely procedures and would cause unnecessary transfers and delays for our patients.

I appreciate your time and your commitment to supporting safe, evidence-based practice in Rhode Island. Please oppose HB-7740 to preserve patient access and continuity of care.

Sincerely,

Thomas Morin

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