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Testimony of Melynda Crispi in strong support of Senate Bill 3184 Substitute A

To the members of the Senate HHS Committee,

My name is Melynda Crispi, and I am the mother of a young child, Roman. When Roman was just **3½ months old**, he was undergoing evaluation for a possible brain lesion and required blood work and diagnostic testing. As any parent can imagine, this was an incredibly frightening and vulnerable time for our family.

On **April 1, 2022**, Roman underwent sedation by the Hasbro Pediatric Sedation Team. Throughout this entire process, I was under the clear impression that my son would be receiving **anesthesia care** provided by trained and licensed anesthesia professionals. I expected that I would meet either an anesthesiologist or a Certified Registered Nurse Anesthetist (CRNA)—the individuals I trusted to safely care for my infant during such a critical procedure. That never happened.

I was told by a nurse practitioner on the pediatric sedation team, very specifically, that my son needed **anesthesia** so that he would not move during the procedure. **At no point was this described to me as “moderate sedation.”** The term used was anesthesia, and as a mother, I relied on that representation to make an informed decision for my child. I found it odd that I was never talked to by an anesthesia provider nor had an anesthesia provider consented me for anesthesia. **None-the-less, I was under the impression that Roman would be under the direct care of an anesthesia provider because I was told Roman needed anesthesia and needed to stay still for his MRI as he would not be cooperative.**

Following the procedure, Roman experienced complications that no parent should have to witness. His face became noticeably swollen, raising concerns about a possible adverse reaction to the medications he received. Even more alarming were the **neurologic symptoms** he developed—symptoms significant enough to delay his discharge by multiple hours. What was supposed to be a few hours, turned into an all-day ordeal. As a mother, watching my baby go through that was terrifying. Those neurologic effects did not resolve immediately and **persisted for several days after the procedure**, leaving me deeply concerned about what had happened to him. One major concern was had Romans oxygen level been compromised as a result of the anesthesia being provided by a non-anesthesia provider and did he suffer permanent damage. The worst outcomes and scenarios raced through my head.

As a mother, I cannot adequately describe the feeling of helplessness and betrayal that followed. I believed my child was in the most appropriate and qualified hands. Instead, I am left feeling as though my son was placed into a situation that I did not fully understand or consent to—one that put his safety at risk. It is difficult not to feel deceived, and even harder not to question whether my child was subjected to a practice outside the appropriate scope of those providing his care. At times, it has felt as though my son was part of something I never agreed to—an experience that no parent should ever have to question.

We go to hospitals like Hasbro Children's Hospital and other Rhode Island institutions with the expectation that our children will be treated by providers who specialize in the care they are receiving. To learn that this may not have been the case has shaken my trust in the system. It has even led me to question whether I should seek care elsewhere, such as Boston Children's Hospital, where anesthesia teams are consistently involved in pediatric sedation and anesthesia care.

The overall care I received at Hasbro was very good. The providers listened to my concerns and were attentive. They treated Roman well and I am thankful for their care. Unfortunately, I am now terrified to return because I now know that Roman will be under the care of a non-anesthesia provider and his outcome this time could be much worse.

It was only recently heard that the Rhode Island Association of Nurse Anesthetists have been trying to put a stop to this potentially dangerous practice for a few years now. Had this been addressed earlier, maybe Roman would not have had experienced those complications. No parent should have to experience this level of fear, uncertainty, and doubt when making medical decisions for their child. This needs to change. My hope in sharing our story is that no other mother has to go through what I did—questioning whether her child was truly safe, or whether she was given the full truth needed to make an informed decision.

This is not a theoretical issue. It is not a matter of *if* something serious could happen—it is a matter of *when*. Meaningful change through this legislation has the potential to prevent unnecessary harm—and may very well save the life of a child.

Our legislators have an opportunity to intervene to assure no parent or patient have to be put in a preventable situation or placed at an unnecessary risk.

Thank you for your time from a very concerned mother,
Melynda Crispi