May 23, 2003

To Whom It May Concern

I am the administrator of Socorro General Hospital, which employs two nurse anesthetists. I have worked in 3 small, rural hospitals in New Mexico over the past 23 years and in all cases patients were well served by nurse anesthetists.

Most of the smaller facilities in our state depend heavily upon the independent judgement and practice of nurse anesthetists. Since the Governor approved the opt-out in New Mexico in November 2002, we've solidified the role of these valued professionals. The opt-out has worked well in New Mexico and it has provided clarity and consistency between state and federal law.

Surgeons and nurse anesthetists continue to work cooperatively. Surgeons are still fully involved in the medical care of their patients, while nurse anesthetists continue to provide high quality anesthesia care. The arrangement is a win-win approach for all concerned – most importantly the patient.

State and federal law in New Mexico now reflect actual practice – surgeons and nurse anesthetists cooperate, with each provider delivering care within their respective expertise. Surgeons rely upon nurse anesthetists to provide anesthesia care, while the surgeons deliver surgical and medical care.

Surgeons, nurse anesthetists, and hospital administrators no longer have to unnecessarily worry about what constitutes “supervision” and how to comply with a confusing supervision requirement that did not improve patient care.

Nurse anesthetist coverage is a core service at our facility. Our nurse anesthetists provide critical service to surgical, obstetrical and emergency patients. I'm glad New Mexico has recognized their value by acknowledging their independent practice. It's essential in preserving this service, especially in communities like ours where healthcare services are very limited. Any state would do well to preserve and retain their nurse anesthetists by enacting an opt-out from needless supervision.

Sincerely,

Jeff Dye
Administrator