



 Outlook

[External] CRNA Proposed Rulemaking

From Adrienne Chakot <domanicoa2010@gmail.com>
Date Sat 7/26/2025 1:19 PM
To ST, RegulatoryCounsel <RA-STRegulatoryCounsel@pa.gov>

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To Whom It May Concern:

I am writing in response to the State Board of Nursing's proposed rulemaking, 16A-5145 (CRNA).

I have been a nurse for over 15 years and a CRNA for 8 of those years. I have provided care across the state of Pennsylvania, from Pittsburgh to Philadelphia. My knowledge, skills, and expertise is abundant in specialties like pediatrics, trauma, obstetrics and much, much more. I primarily work at a Level 1 trauma center in central PA, but I also work part-time as an independent anesthesia provider at a rural eye center under the supervision of an ophthalmologist.

Throughout my years of training for my CRNA degree, I have provided care across the state of Pennsylvania. Some of these experiences were in rural areas, and it was a privilege to be able to provide care and utilize my skills so the local population could have access to top notch care.

I am writing to urge your support for finalizing the rulemaking that licenses and recognizes Certified Registered Nurse Anesthetists (CRNAs) in accordance with Act 60 of 2021, and to go a step further by advocating for full independent practice for CRNAs in Pennsylvania.

This rulemaking finally acknowledges CRNAs as advanced practice providers by setting licensing standards, fees, and certification requirements — and by defining our scope to administer anesthesia in cooperation with physicians, dentists, and podiatrists. Pennsylvania must take the next step to allow CRNAs to practice independently, as 24 other states have already done.

CRNAs are among the most highly trained nursing professionals in the health-care system. Our education and clinical training are rigorous and patient-focused. Personally, I completed additional specialty training at pediatric hospitals and now serve as the lead pediatric CRNA at a hospital that previously had limited pediatric-specific anesthesia providers. My training enabled a partnership with an academic hospital that has helped grow pediatric surgical services at our facility — directly improving access and outcomes for young patients and their families.

Multiple peer-reviewed studies and national health-care policy reviews have shown that there is no statistical difference in patient outcomes when anesthesia care is delivered by a CRNA versus a physician anesthesiologist. In fact, CRNAs are known for delivering high-quality, safe, and efficient anesthesia — even for rare and complex cases.

This is especially critical in rural and medically underserved areas, where CRNAs are often the sole providers of anesthesia care. Without CRNAs, many rural hospitals would not be able to offer surgical, obstetric, trauma, or pain management services — forcing patients to travel hours away for care, or go without.

Pennsylvania is fortunate to be a national leader in CRNA education, with 15 top-rated nurse anesthetist programs. This rulemaking helps retain top talent in our state — but we must build on that by removing outdated barriers to independent practice and supporting the full potential of our profession.

In today's evolving health-care landscape, patients want care that is personal, cost-effective, and safe. CRNAs are trained to provide exactly that. We remain with our patients before, during, and after procedures — ensuring their physical, mental, and emotional needs are met throughout their experience.

I respectfully ask you to continue championing patient access and health-care equity by supporting policies that empower CRNAs to practice to the full extent of their training — independently — in Pennsylvania.

Thank you for your time, leadership, and commitment to improving health care for all Pennsylvanians.

Sincerely,

Adrienne Chakot MS, CRNA