

Reprinted 3/29/85

SENATE FILE 433

BY COMMITTEE ON STATE GOVERNMENT

FORMERLY SSB 21 *Approved 3/12/85 (p. 744)*

Passed Senate, Date 3-27-85 (p. 1068) Passed House, Date 4-15-85 (p. 1577)

Vote: Ayes 37 Nays 7 Vote: Ayes 91 Nays 5

Approved May 20, 1985

### A BILL FOR

1 An Act relating to the certification and regulation of respira-  
2 tory care practitioners and providing a penalty and an  
3 effective date.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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*SSB 433*

1 Section 1. NEW SECTION. 135F.1 DEFINITIONS.

2 As used in this chapter, unless otherwise defined or the  
3 context otherwise requires:

4 1. "Respiratory care practitioner" or "practitioner" means  
5 a person who is certified under this chapter to practice  
6 respiratory care in Iowa.

7 2. "Respiratory care" includes "respiratory therapy" or  
8 "inhalation therapy".

9 3. "Respiratory therapist" means a respiratory care prac-  
10 titioner who has successfully completed a respiratory therapy  
11 training program and has passed the registry examination for  
12 respiratory therapists administered by the national board for  
13 respiratory care.

14 4. "Respiratory therapy technician" means a respiratory  
15 care practitioner who has successfully completed a respiratory  
16 therapy training program and has passed the certification  
17 examination for respiratory therapy technicians administered  
18 by the national board for respiratory care.

19 5. "Medical director" means a licensed physician or  
20 surgeon who is a member of a hospital's or health care  
21 facility's active medical staff and who should be certified or  
22 eligible for certification by the American board of internal  
23 medicine or the American board of anesthesiology.

24 6. "Respiratory therapy training program" means a program  
25 accredited by the American medical association's committee on  
26 allied health education and accreditation in cooperation with  
27 the joint review committee for respiratory therapy education  
28 and approved by the committee.

29 7. "Organized health care systems" includes, but is not  
30 limited to, health care facilities as defined in section  
31 135C.1, subsection 4, clinic home health agencies, hospitals  
32 as defined in section 135B.1, subsection 1, licensed  
33 physicians' offices, and public or community health services.

34 8. "Department" means the state department of health.

35 9. "Committee" means the respiratory care committee.

1 10. "Commissioner" means the commissioner of public  
2 health.

3 11. "Academic studies" means courses offered by insti-  
4 tutions of higher education which are comparable to courses  
5 approved by the committee.

6 12. "Continuing education" means educational activities  
7 primarily designed to inform respiratory care practitioners of  
8 developments in the respiratory care field or areas of  
9 practice engaged in by the practitioners. "Continuing  
10 education" may include academic studies undertaken by a  
11 respiratory care practitioner after completion of required  
12 courses of instruction for certification.

13 13. "Course" means a systematic learning experience  
14 designed for acquisition of knowledge, skills, and information  
15 in the practice of respiratory care.

16 14. "Home study course" means a continuing education  
17 course designed by a provider to be undertaken at a certified  
18 practitioner's residence.

19 15. "Hour" means at least fifty minutes of practice in an  
20 organized learning experience.

21 16. "In-service education" means continuing education  
22 courses provided by employers in the employment setting.

23 17. "Provider" means a person or organization offering  
24 continuing education courses approved by the committee.

25 18. "Short-term learning activity" means continuing  
26 education conferences, institutes, lectures, seminars, and  
27 workshops.

28 Sec. 2. NEW SECTION. 135F.2 RESPIRATORY CARE AS A  
29 PRACTICE DEFINED.

30 "Respiratory care as a practice" means a health care  
31 profession, under medical direction, employed in the therapy,  
32 management, rehabilitation, diagnostic evaluation, and care of  
33 patients with deficiencies and abnormalities which affect the  
34 pulmonary system and associated aspects of cardiopulmonary and  
35 other systems' functions, and includes all of the following:

1 1. Direct and indirect pulmonary care services that are  
2 safe and of comfort, aseptic, preventative, and restorative to  
3 the patient.

4 2. Direct and indirect respiratory care services,  
5 including but not limited to, the administration of  
6 pharmacological and diagnostic and therapeutic agents related  
7 to respiratory care procedures necessary to implement a  
8 treatment, disease prevention, pulmonary rehabilitative, or  
9 diagnostic regimen prescribed by a licensed physician or  
10 surgeon.

11 3. Observation and monitoring of signs and symptoms,  
12 general behavior, reactions, general physical response to  
13 respiratory care treatment and diagnostic testing.

14 4. Determination of whether the signs, symptoms, behavior,  
15 reactions, or general response exhibit abnormal  
16 characteristics.

17 5. Implementation based on observed abnormalities, of  
18 appropriate reporting, referral, or respiratory care protocols  
19 or changes in treatment regimen.

20 "Respiratory care protocols" as used in this section means  
21 policies and procedures developed by an organized health care  
22 system through consultation, when appropriate, with  
23 administrators, licensed physicians and surgeons, certified  
24 registered nurses, licensed physical therapists, licensed  
25 respiratory care practitioners, and other licensed health care  
26 practitioners.

27 Sec. 3. NEW SECTION. 135F.3 PERFORMANCE OF RESPIRATORY  
28 CARE.

29 The performance of respiratory care shall be in accordance  
30 with the prescription of a licensed physician or surgeon and  
31 includes, but is not limited to, the diagnostic and  
32 therapeutic use of the following:

33 1. Administration of medical gases, aerosols, and  
34 humidification, not including general anesthesia.

35 2. Environmental control mechanisms and paramedical

1 therapy.

2 3. Pharmacologic agents relating to respiratory care  
3 procedures.

4 4. Mechanical or physiological ventilatory support.

5 5. Bronchopulmonary hygiene.

6 6. Cardiopulmonary resuscitation.

7 7. Maintenance of the natural airways.

8 8. Insertion without cutting tissues and maintenance of  
9 artificial airways.

10 9. Specific diagnostic and testing techniques employed in  
11 the medical management of patients to assist in diagnosis,  
12 monitoring, treatment, and research of pulmonary  
13 abnormalities, including measurement of ventilatory volumes,  
14 pressures, and flows, collection of specimens of blood, and  
15 collection of specimens from the respiratory tract.

16 10. Analysis of blood gases and respiratory secretions.

17 11. Pulmonary function testing.

18 12. Hemodynamic and physiologic measurement and monitoring  
19 of cardiac function as it relates to cardiopulmonary  
20 pathophysiology.

21 13. Invasive procedures that relate to respiratory care.

22 A respiratory care practitioner may transcribe and  
23 implement a written or verbal order from a licensed physician  
24 or surgeon pertaining to the practice of respiratory care.

25 This chapter does not authorize a respiratory care  
26 practitioner to practice medicine, surgery, or other medical  
27 practices except as provided in this section.

28 Sec. 4. NEW SECTION. 135F.4 LOCATION OF RESPIRATORY  
29 CARE.

30 The practice of respiratory care may be performed in a  
31 hospital as defined in section 135B.1, subsection 1, and other  
32 settings where respiratory care is to be provided in  
33 accordance with a prescription of a licensed physician or  
34 surgeon. Respiratory care may be provided during  
35 transportation of a patient and under circumstances where an

1 emergency necessitates respiratory care.

2 Sec. 5. NEW SECTION. 135F.5 RESPIRATORY CARE STUDENTS.

3 Respiratory care services may be rendered by a student  
4 enrolled in a respiratory therapy training program when these  
5 services are incidental to the student's course of study.

6 A student enrolled in a respiratory therapy training  
7 program who is employed in an organized health care system may  
8 render services defined in sections 135F.2 and 135F.3 under  
9 the direct and immediate supervision of a respiratory care  
10 practitioner for a limited period of time as determined by  
11 rule of the committee. The student shall be identified as a  
12 "student respiratory care practitioner".

13 A graduate of an approved respiratory care training program  
14 employed in an organized health care system may render  
15 services as defined in sections 135F.2 and 135F.3 under the  
16 direct and immediate supervision of a respiratory care  
17 practitioner for one year. The graduate shall be identified  
18 as a respiratory care practitioner-certification applicant.

19 Sec. 6. NEW SECTION. 135F.6 RESPIRATORY CARE ADVISORY  
20 COMMITTEE.

21 A respiratory care advisory committee is created within the  
22 department of health. The committee shall consist of seven  
23 members appointed by the governor, subject to confirmation by  
24 the senate.

25 The members shall include two licensed physicians, four  
26 certified respiratory care practitioners, each with at least  
27 five years of practice in respiratory care, and one public  
28 member.

29 The term of a member is three years and a member shall not  
30 serve more than two consecutive terms. A vacancy shall be  
31 filled by the governor for the balance of the unexpired term  
32 from the appropriate class of persons. A member shall serve  
33 until the member's successor is appointed and qualified. The  
34 governor may remove a member from office for neglect of a duty  
35 required by law or for incompetency or unprofessional or

1 dishonorable conduct.

2 The committee shall annually elect a member as chairperson.

3 The members shall receive forty dollars per diem and  
4 reimbursement for actual and necessary expenses incurred in  
5 their duties as members of the committee.

6 Sec. 7. NEW SECTION. 135F.7 RESPIRATORY CARE ADVISORY  
7 COMMITTEE MEMBER QUALIFICATIONS.

8 The members of the respiratory care advisory committee  
9 shall be citizens of the United States and residents of the  
10 state of Iowa. Not more than two members of the committee  
11 shall be full-time faculty of universities, colleges, or other  
12 educational institutions.

13 1. The public member shall not:

14 a. Be an officer or faculty member of a college, school,  
15 or institution engaged in respiratory therapy education.

16 b. Be certified by the department or a board within the  
17 department.

18 c. Have a pecuniary interest in the provision of health  
19 care.

20 2. The respiratory care practitioner members shall:

21 a. Be certified or registered by the national board for  
22 respiratory care.

23 b. Each have at least five years experience in respiratory  
24 care or respiratory therapy education, and have been actively  
25 engaged in practice for at least three years immediately pre-  
26 ceding appointment.

27 c. Be certified as a respiratory care practitioner in this  
28 state.

29 Not more than one respiratory care practitioner member  
30 shall be a technical director of a respiratory care department  
31 and not more than one respiratory care practitioner member  
32 shall be an officer or faculty member of a college, school, or  
33 institution engaged in respiratory therapy education.

34 3. The licensed physician members shall:

35 a. Be licensed practicing physicians or surgeons in the

1 state.

2 b. Have recognized qualifications by training and  
3 experience in the management of cardiopulmonary diseases and  
4 respiratory care procedures.

5 Sec. 8. NEW SECTION. 135F.8 DUTIES OF COMMITTEE.

6 The respiratory care advisory committee shall:

7 1. Examine applicants for certification using the entry  
8 level written examination prepared by the national board for  
9 respiratory care.

10 2. Approve courses in approved respiratory care programs.

11 3. Establish standards for continuing education.

12 4. Meet within sixty days after the appointment of its  
13 members and at least annually thereafter. Special meetings  
14 may be called by the chairperson or upon the written request  
15 of two members of the committee. The members of the committee  
16 shall designate the time and place of the regular meetings. A  
17 notice of each meeting shall be sent by the department to the  
18 committee members at least fifteen days prior to the meeting.

19 5. Keep a record of proceedings of the committee.

20 6. Keep a current register of all respiratory care  
21 practitioners, including the last known residence of each  
22 practitioner, and the date and number of the certificate of  
23 each practitioner.

24 7. Compile a list from the register in May of each even-  
25 numbered year. The committee may furnish copies of the list  
26 at cost to interested persons.

27 Sec. 9. NEW SECTION. 135F.9 DEPARTMENT DUTIES.

28 The department shall administer and implement this chapter.  
29 The commissioner shall employ or cause to be employed the  
30 necessary persons to discharge the duties imposed on the  
31 department by this chapter.

32 The department shall:

33 1. Adopt rules in accordance with chapter 17A, with the  
34 advice and approval of the committee.

35 2. Conduct the examination for the committee.

1 3. Notify each respiratory care practitioner before the  
2 first of each year of the date of expiration of the  
3 certification and the amount of renewal fee set by the  
4 department by rule.

5 4. Notify an applicant for certification of the receipt of  
6 the application.

7 Sec. 10. NEW SECTION. 135F.10 INSPECTION -- RECORDS.

8 A member of the committee or a respiratory care  
9 practitioner appointed by the department may inspect or  
10 require pertinent reports from an organized health care system  
11 providing respiratory care and from the respiratory care staff  
12 and may inspect respiratory care patient records relating to  
13 the respiratory care provided. The department shall not  
14 authorize a person who is neither a respiratory care  
15 practitioner nor a member of the committee to make an  
16 inspection or obtain records under this section.

17 Sec. 11. NEW SECTION. 135F.11 CERTIFICATION -- APPLI-  
18 CATION.

19 A person shall not practice as or represent that the person  
20 is a respiratory care practitioner in this state without a  
21 certificate from the department. The application shall be  
22 accompanied by the application fee determined by the de-  
23 partment, be signed by the applicant, and contain a statement  
24 under oath of the facts entitling the applicant to receive a  
25 certificate without examination pursuant to section 135F.15 or  
26 to take an examination for certification pursuant to section  
27 135F.13.

28 The committee shall investigate each applicant before the  
29 department issues a certificate to determine if the applicant  
30 has met the requirements for a respiratory care practitioner  
31 pursuant to section 135F.13.

32 The department, upon recommendation by the committee, shall  
33 issue a certificate to the applicant for a respiratory care  
34 practitioner. The certificate, unless sooner suspended or  
35 revoked, shall expire one year after the date of issuance and

1 shall be renewed annually upon an application by the  
2 respiratory care practitioner. Application for renewal shall  
3 be made in writing to the department, accompanied by the  
4 required fee determined by the department and evidence of  
5 continuing education pursuant to section 135F.17. A  
6 respiratory care practitioner who allows the certification to  
7 lapse through failure to make timely application for renewal  
8 may apply for reinstatement within five years of the  
9 certification expiration by submitting evidence satisfactory  
10 to the committee that during the preceding two-year period,  
11 the applicant completed thirty hours of approved continuing  
12 education. In lieu of the continuing education, the applicant  
13 for recertification may successfully complete the examination  
14 pursuant to section 135F.8. The committee may permit an  
15 applicant for recertification after the five-year period to be  
16 recertified by successfully completing the examination.

17 The fees shall be deposited into the general fund of the  
18 state.

19 Sec. 12. NEW SECTION. 135F.12 REPRESENTATION.

20 A person holding a certificate issued by the department  
21 designating the person as a respiratory care practitioner may  
22 use the title "respiratory care practitioner" or the letters  
23 "R.C.P." after the person's name or other words, letters, or  
24 figures which indicate that the person is a certified  
25 respiratory care practitioner.

26 In addition, a respiratory care practitioner may use an  
27 initial, prefix, or suffix indicating possession of a specific  
28 academic degree earned pursuant to section 147.74, and an  
29 initial indicating possession of a specific credential issued  
30 by the national board for respiratory care, or the national  
31 commission for health certifying agencies.

32 Sec. 13. NEW SECTION. 135F.13 APPLICANT QUALIFICATIONS.

33 An applicant for certification as a respiratory care  
34 practitioner shall:

35 1. Be at least eighteen years of age.

- 1 2. Have a high school diploma or equivalent education.
- 2 3. Not be addicted to the intemperate use of alcohol or a
- 3 narcotic drug.
- 4 4. Have successfully completed a respiratory therapy
- 5 training program.
- 6 5. Not have committed crimes constituting grounds for
- 7 denial of certification as determined by the committee.
- 8 6. Have successfully passed the written examination
- 9 pursuant to section 135F.8.

10 Sec. 14. NEW SECTION. 135F.14 EXCEPTION TO CERTIFICA-  
11 TION.

12 1. An applicant who makes an application for certification  
13 based on successful completion of a training program of a  
14 foreign respiratory therapy school shall furnish documentary  
15 evidence satisfactory to the committee that the applicant has  
16 completed such training program or instruction which is  
17 equivalent to the respiratory therapy training program  
18 required in section 135F.13.

19 2. An applicant pursuant to subsection 1 who provides ser-  
20 vices under this chapter shall do so under the direct and  
21 immediate supervision of a respiratory care practitioner in a  
22 prescribed department in a hospital approved by the committee  
23 until the applicant is issued a certificate pursuant to  
24 section 135F.11. Previous to the issuance of the certificate,  
25 the applicant may be identified as a "respiratory care  
26 practitioner-certification applicant." A certificate shall  
27 not be issued and the applicant shall not provide services  
28 pursuant to this section if the applicant does not  
29 successfully pass the examination pursuant to section 135F.8  
30 within one year of the application. The requirement of the  
31 examination shall be eliminated if the applicant has passed an  
32 equivalent examination for certification satisfactory to the  
33 committee in another state, district, or territory of the  
34 United States.

35 3. Notwithstanding subsections 1 and 2, the committee may

1 disapprove a foreign respiratory therapy school or deny  
2 certification of an applicant from such a school if the  
3 instruction or courses are not equivalent to the courses  
4 approved by the committee.

5 Sec. 15. NEW SECTION. 135F.15 IN LIEU OF EXAMINATION.

6 The department may issue a certificate to an applicant  
7 without successful completion of the examination if the  
8 applicant meets all of the following:

9 1. The applicant is a certified respiratory care  
10 practitioner at the time of application in a state, district,  
11 or territory of the United States which has requirements for  
12 certification at least equivalent to those of Iowa in the  
13 opinion of the committee, and has satisfactorily passed an  
14 examination at least equivalent to the examination pursuant to  
15 section 135F.8 or the applicant is certified or registered by  
16 the national board for respiratory care.

17 2. The applicant has filed an application pursuant to  
18 section 135F.11, has passed the examination pursuant to  
19 section 135F.8 or the registry examination of the national  
20 board for respiratory care, and has met the qualifications  
21 pursuant to section 135F.13.

22 An applicant who files an application pursuant to section  
23 135F.11 and who meets the requirements of subsections 1 and 2  
24 of this section may perform as a respiratory care practitioner  
25 under the direct and immediate supervision of a respiratory  
26 care practitioner certified in this state between the date of  
27 receipt of notice from the department that the application is  
28 on file with the department and the date of the applicant's  
29 receipt of a certificate pursuant to section 135F.11. The  
30 applicant shall be identified as a "respiratory care  
31 practitioner-certification applicant".

32 Sec. 16. NEW SECTION. 135F.16 SUSPENSION, REVOCATION,  
33 AND REINSTATEMENT OF CERTIFICATES.

34 1. The department, after appropriate proceedings by the  
35 committee, may suspend for not more than twelve months or

1 revoke or impose probationary conditions upon a certificate or  
2 issue a certificate subject to terms and conditions for any of  
3 the following:

- 4 a. Fraud in the procurement of the certificate.
  - 5 b. Conviction of a crime which substantially relates to  
6 the qualifications, functions, or duties of a respiratory care  
7 practitioner. The record of conviction or a certified copy of  
8 the record is conclusive evidence of the conviction.
  - 9 c. Permitting a person to impersonate or act as a proxy  
10 for the applicant in an examination given under this chapter.
  - 11 d. Habitual intemperance.
  - 12 e. Addiction to the use of any habit-forming drug or  
13 controlled substance.
  - 14 f. Gross negligence in practice as a respiratory care  
15 practitioner.
  - 16 g. Conviction of a violation, violating or attempting to  
17 violate directly or indirectly, assisting in or abetting the  
18 violation of, or conspiring to violate this chapter or the  
19 medical practice act.
  - 20 h. The aiding or abetting of a person to violate this  
21 chapter.
  - 22 i. The aiding or abetting of a person to engage in the  
23 unlawful practice of respiratory care.
  - 24 j. The commission of a fraudulent, dishonest, or corrupt  
25 act substantially related to the qualifications, functions, or  
26 duties of a respiratory care practitioner.
- 27 2. A person may apply to the committee or department after  
28 the time set in subsection 1 for reinstatement, restoration,  
29 or modification of the action. The committee may accept or  
30 reject the application and may require an examination for  
31 reinstatement, restoration, or modification of a certificate.
- 32 3. A plea or verdict of guilty or a conviction following a  
33 no contest plea made to a felony charge or to an offense which  
34 substantially relates to the qualifications, functions, or  
35 duties of a respiratory care practitioner is a conviction

1 pursuant to subsection 1, paragraph g. The department, upon  
2 the recommendation of the committee, may suspend, revoke, or  
3 decline to issue a certificate after the time for appeal has  
4 elapsed, the judgment of conviction has been affirmed on  
5 appeal, or when an order granting probation is made suspending  
6 the imposition of sentence, irrespective of a subsequent order  
7 under the Iowa criminal code, permitting a person to withdraw  
8 a plea of guilty and to enter a plea of not guilty, or setting  
9 aside the verdict of guilty or dismissing the accusation,  
10 information, or indictment.

11 Sec. 17. NEW SECTION. 135F.17 CONTINUING EDUCATION.

12 1. After July 1, 1988, a certified practitioner shall  
13 submit evidence satisfactory to the committee that during the  
14 year of certification the certified practitioner has completed  
15 fifteen hours of continuing education approved by the  
16 committee. In lieu of the continuing education, a person may  
17 successfully complete the most current version of the  
18 certification examination, pursuant to section 135F.8,  
19 subsection 2.

20 2. The committee shall designate approved courses that a  
21 certified practitioner may use to satisfy the requirement for  
22 continuing education. The courses may be in areas other than  
23 those areas directly related to the practice of respiratory  
24 care if, in the opinion of the committee, the courses bear a  
25 reasonable relationship to developments in the respiratory  
26 care field or in a specialty area of practice engaged in by a  
27 respiratory care practitioner. The committee shall consider  
28 continuing education courses which include any of the  
29 following:

- 30 a. Academic studies.
- 31 b. In-service education.
- 32 c. Short-term learning activities.
- 33 d. Extension studies.
- 34 e. Home study courses.

35 3. The committee shall accept hours of approved continuing

1 education on the following basis:

2 a. Each hour of theory is equal to one hour of continuing  
3 education.

4 b. Three hours of course-related clinical practice are  
5 equal to one hour of continuing education.

6 c. Credit shall not be given for more than six hours of  
7 home study courses in one year.

8 d. Comparable continuing education options approved by  
9 certifying agencies of other states may be accepted by the  
10 committee.

11 4. A respiratory care practitioner shall submit evidence  
12 to the committee of successful completion of the required  
13 number of approved continuing education hours by means of a  
14 certificate, transcript, or similar document. The evidence  
15 shall be submitted with the application for certificate  
16 renewal.

17 5. A provider shall:

18 a. Issue a certificate to practitioners who have  
19 successfully completed continuing education courses.

20 b. Apply on forms provided by the department for approval  
21 to offer continuing education courses.

22 c. Include a course in clinical practice no less than  
23 three hours in length if such a course is taught.

24 d. Obtain committee approval of instructors to teach  
25 approved continuing education courses. Instructors shall be  
26 knowledgeable, current, and skillful in the subject matter and  
27 shall have at least two of the following qualifications:

28 (1) Completion of specialized training in the subject  
29 matter taught.

30 (2) Experience in teaching similar subject matter content  
31 within a two-year period preceding the date of application for  
32 approval of the continuing education course.

33 (3) Six months of experience working in the subject area  
34 within a three-year period preceding the date of application  
35 for approval of the continuing education course.

1     Sec. 18. NEW SECTION. 135F.18 PENALTY.

2     A person who violates a provision of this chapter is guilty  
3 of a simple misdemeanor.

4     Sec. 19. NEW SECTION. 135F.19 INJUNCTION.

5     The department or ten or more respiratory care  
6 practitioners may apply to a court for the issuance of an  
7 injunction or other appropriate restraining order against a  
8 person who is engaging in a violation of this chapter.

9     Sec. 20. NEW SECTION. 135F.20 PERMISSIVE ACTS.

10    This chapter does not prohibit:

11    1. Self care by a patient or gratuitous care by a friend  
12 or relative of the patient who is not a respiratory care  
13 practitioner.

14    2. Performance of respiratory care procedures by health  
15 care professionals who are trained in the procedures and are  
16 licensed in the appropriate profession.

17    3. Respiratory care services in an emergency, including  
18 but not limited to an epidemic or public disaster.

19    4. Cardiopulmonary research.

20    Sec. 21. NEW SECTION. 135F.21 LIABILITY.

21    A respiratory care practitioner who in good faith renders  
22 emergency care at the scene of an emergency is not liable for  
23 civil damages as a result of acts or omissions by the person  
24 rendering the emergency care. This section does not grant  
25 immunity from liability for civil damages when the respiratory  
26 care practitioner is grossly negligent.

27    Sec. 22. This Act takes effect July 1, 1987. A person  
28 performing as a respiratory care practitioner for at least two  
29 years before the effective date of this Act shall provide  
30 acceptable documentation of experience and qualifications to  
31 the committee and successfully complete the examination  
32 pursuant to section 135F.8.

33    Notwithstanding the terms in section 135F.6 the governor  
34 shall initially appoint two members of the respiratory care  
35 committee to a one-year term, two members to a two-year term.

1 and three members to a three-year term.

2

EXPLANATION

3 This bill requires a person who practices respiratory care  
4 to be certified by the department of health. The bill permits  
5 students of respiratory care to practice under supervision of  
6 a certified respiratory care practitioner.

7 The bill creates a seven-member respiratory care advisory  
8 committee to regulate the practice of respiratory care,  
9 specifies the duties of the committee, and the qualifications  
10 of the members of the committee.

11 The bill includes sections relating to the inspection of  
12 records of a facility providing respiratory care, immunity  
13 from civil liability when a respiratory care practitioner acts  
14 in good faith in an emergency situation, and a penalty of a  
15 simple misdemeanor for a violation.

16 The bill provides for application, certification,  
17 examination, suspension and revocation, injunction, and  
18 continuing education procedures and requirements.

19 The bill takes effect July 1, 1987, and creates a new  
20 chapter 135F. Sections in the new chapter are referred to  
21 throughout the bill.

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- 1 Amend Senate File 433 as follows:  
2 1. Page 1, by striking lines 5 and 6 and  
3 inserting the following: "a person who has qualified  
4 as a respiratory therapist or respiratory therapy  
5 technician."  
6 2. Page 1, by striking lines 29 through 33.  
7 3. By striking page 1, line 35 through page 2,  
8 line 27.  
9 4. By striking page 5, line 19 through page 14,  
10 line 35 and inserting the following:  
11 "Sec. 6. NEW SECTION. 135F.6 DEPARTMENT DUTIES.  
12 The department shall administer and implement this  
13 chapter. The department's duties in these areas shall  
14 include, but are not limited to the following:  
15 1. The adoption, publication and amendment of  
16 rules, in accordance with chapter 17A, necessary for  
17 the administration and enforcement of this chapter.  
18 2. The establishment and collection of fees for  
19 the registration of respiratory care practitioners.  
20 The fees charged shall be sufficient to defray the  
21 costs of administration of this chapter and all fees  
22 collected shall be deposited with the treasurer of  
23 state who shall deposit them in the general fund of  
24 the state.  
25 Sec. 7. NEW SECTION. 135F.7 REPRESENTATION.  
26 A person who is qualified as a respiratory care  
27 practitioner and is registered with the department may  
28 use the title "respiratory care practitioner" or the  
29 letters R.C.P. after the person's name to indicate  
30 that the person is a qualified respiratory care  
31 practitioner registered with the department. No other  
32 person is entitled to use the title or letters or any  
33 other title or letters that indicate or imply that the  
34 person is a respiratory care practitioner, nor may a  
35 person make any representation, orally or in writing,  
36 expressly or by implication, that the person is a  
37 registered respiratory care practitioner."  
38 5. Page 15, by striking lines 5 and 6 and  
39 inserting the following:  
40 "The department may apply to a court for the  
41 issuance of an".  
42 6. Page 15, by striking lines 9 through 19.  
43 7. By striking page 15, line 27 through page 16,  
44 line 1.  
45 8. By renumbering and correcting internal  
46 references as necessary."

State Government: Blanshan, Chair: Cochran, Hanson, Renken and Teaford.

SENATE FILE 433

BY COMMITTEE ON STATE GOVERNMENT

(AS AMENDED AND PASSED BY THE SENATE MARCH 27, 1985)

*Re* Passed Senate, Date 4-23-85 (J. 1577) Passed House, Date 4-15-85 (J. 1577)  
Vote: Ayes 40 Nays 7 Vote: Ayes 91 Nays 5  
Approved May 20, 1985

### A BILL FOR

1 An Act relating to the certification and regulation of  
2 respiratory care practitioners and providing a penalty and an  
3 effective date.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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\_\_\_\_\_ = New Language  
by the Senate

\* = Language Stricken  
by the Senate

1 Section 1. NEW SECTION. 135F.1 DEFINITIONS.

2 As used in this chapter, unless otherwise defined or the  
3 context otherwise requires:

4 1. "Respiratory care practitioner" or "practitioner" means  
5 a person who has qualified as a respiratory therapist or  
6 respiratory therapy technician.

7 2. "Respiratory care" includes "respiratory therapy" or  
8 "inhalation therapy".

9 3. "Respiratory therapist" means a respiratory care prac-  
10 titioner who has successfully completed a respiratory therapy  
11 training program and has passed the registry examination for  
12 respiratory therapists administered by the national board for  
13 respiratory care.

14 4. "Respiratory therapy technician" means a respiratory  
15 care practitioner who has successfully completed a respiratory  
16 therapy training program and has passed the certification  
17 examination for respiratory therapy technicians administered  
18 by the national board for respiratory care.

19 5. "Medical director" means a licensed physician or  
20 surgeon who is a member of a hospital's or health care  
21 facility's active medical staff and who should be certified or  
22 eligible for certification by the American board of internal  
23 medicine or the American board of anesthesiology.

24 6. "Respiratory therapy training program" means a program  
25 accredited by the American medical association's committee on  
26 allied health education and accreditation in cooperation with  
27 the joint review committee for respiratory therapy education  
28 and approved by the committee.

\* 29 7. "Department" means the state department of health.

\* 30 Sec. 2. NEW SECTION. 135F.2 RESPIRATORY CARE AS A  
31 PRACTICE DEFINED.

32 "Respiratory care as a practice" means a health care  
33 profession, under medical direction, employed in the therapy,  
34 management, rehabilitation, diagnostic evaluation, and care of  
35 patients with deficiencies and abnormalities which affect the

1 pulmonary system and associated aspects of cardiopulmonary and  
2 other systems' functions, and includes all of the following:

3 1. Direct and indirect pulmonary care services that are  
4 safe and of comfort, aseptic, preventative, and restorative to  
5 the patient.

6 2. Direct and indirect respiratory care services,  
7 including but not limited to, the administration of  
8 pharmacological and diagnostic and therapeutic agents related  
9 to respiratory care procedures necessary to implement a  
10 treatment, disease prevention, pulmonary rehabilitative, or  
11 diagnostic regimen prescribed by a licensed physician or  
12 surgeon.

13 3. Observation and monitoring of signs and symptoms,  
14 general behavior, reactions, general physical response to  
15 respiratory care treatment and diagnostic testing.

16 4. Determination of whether the signs, symptoms, behavior,  
17 reactions, or general response exhibit abnormal  
18 characteristics.

19 5. Implementation based on observed abnormalities, of  
20 appropriate reporting, referral, or respiratory care protocols  
21 or changes in treatment regimen.

22 "Respiratory care protocols" as used in this section means  
23 policies and procedures developed by an organized health care  
24 system through consultation, when appropriate, with  
25 administrators, licensed physicians and surgeons, certified  
26 registered nurses, licensed physical therapists, licensed  
27 respiratory care practitioners, and other licensed health care  
28 practitioners.

29 Sec. 3. NEW SECTION. 135F.3 PERFORMANCE OF RESPIRATORY  
30 CARE.

31 The performance of respiratory care shall be in accordance  
32 with the prescription of a licensed physician or surgeon and  
33 includes, but is not limited to, the diagnostic and  
34 therapeutic use of the following:

35 1. Administration of medical gases, aerosols, and

- 1 humidification, not including general anesthesia.
- 2 2. Environmental control mechanisms and paramedical
- 3 therapy.
- 4 3. Pharmacologic agents relating to respiratory care
- 5 procedures.
- 6 4. Mechanical or physiological ventilatory support.
- 7 5. Bronchopulmonary hygiene.
- 8 6. Cardiopulmonary resuscitation.
- 9 7. Maintenance of the natural airways.
- 10 8. Insertion without cutting tissues and maintenance of
- 11 artificial airways.
- 12 9. Specific diagnostic and testing techniques employed in
- 13 the medical management of patients to assist in diagnosis,
- 14 monitoring, treatment, and research of pulmonary
- 15 abnormalities, including measurement of ventilatory volumes,
- 16 pressures, and flows, collection of specimens of blood, and
- 17 collection of specimens from the respiratory tract.
- 18 10. Analysis of blood gases and respiratory secretions.
- 19 11. Pulmonary function testing.
- 20 12. Hemodynamic and physiologic measurement and monitoring
- 21 of cardiac function as it relates to cardiopulmonary
- 22 pathophysiology.
- 23 13. Invasive procedures that relate to respiratory care.
- 24 A respiratory care practitioner may transcribe and
- 25 implement a written or verbal order from a licensed physician
- 26 or surgeon pertaining to the practice of respiratory care.
- 27 This chapter does not authorize a respiratory care
- 28 practitioner to practice medicine, surgery, or other medical
- 29 practices except as provided in this section.
- 30 Sec. 4. NEW SECTION. 135F.4 LOCATION OF RESPIRATORY
- 31 CARE.
- 32 The practice of respiratory care may be performed in a
- 33 hospital as defined in section 135B.1, subsection 1, and other
- 34 settings where respiratory care is to be provided in
- 35 accordance with a prescription of a licensed physician or

1 surgeon. Respiratory care may be provided during  
2 transportation of a patient and under circumstances where an  
3 emergency necessitates respiratory care.

4 Sec. 5. NEW SECTION. 135F.5 RESPIRATORY CARE STUDENTS.

5 Respiratory care services may be rendered by a student  
6 enrolled in a respiratory therapy training program when these  
7 services are incidental to the student's course of study.

8 A student enrolled in a respiratory therapy training  
9 program who is employed in an organized health care system may  
10 render services defined in sections 135F.2 and 135F.3 under  
11 the direct and immediate supervision of a respiratory care  
12 practitioner for a limited period of time as determined by  
13 rule of the committee. The student shall be identified as a  
14 "student respiratory care practitioner".

15 A graduate of an approved respiratory care training program  
16 employed in an organized health care system may render  
17 services as defined in sections 135F.2 and 135F.3 under the  
18 direct and immediate supervision of a respiratory care  
19 practitioner for one year. The graduate shall be identified  
20 as a respiratory care practitioner-certification applicant.

21 Sec. 6. NEW SECTION. 135F.6 DEPARTMENT DUTIES.

22 The department shall administer and implement this chapter.  
23 The department's duties in these areas shall include, but are  
24 not limited to the following:

25 1. The adoption, publication and amendment of rules, in  
26 accordance with chapter 17A, necessary for the administration  
27 and enforcement of this chapter.

28 2. The establishment and collection of fees for the  
29 registration of respiratory care practitioners. The fees  
30 charged shall be sufficient to defray the costs of  
31 administration of this chapter and all fees collected shall be  
32 deposited with the treasurer of state who shall deposit them  
33 in the general fund of the state.

34 Sec. 7. NEW SECTION. 135F.7 REPRESENTATION.

35 A person who is qualified as a respiratory care

1 practitioner and is registered with the department may use the  
2 title "respiratory care practitioner" or the letters R.C.P.  
3 after the person's name to indicate that the person is a  
4 qualified respiratory care practitioner registered with the  
5 department. No other person is entitled to use the title or  
6 letters or any other title or letters that indicate or imply  
7 that the person is a respiratory care practitioner, nor may a  
8 person make any representation, orally or in writing,  
9 expressly or by implication, that the person is a registered  
10 respiratory care practitioner.

11 Sec. 8. NEW SECTION. 135F.18 PENALTY.

12 A person who violates a provision of this chapter is guilty  
13 of a simple misdemeanor.

14 Sec. 9. NEW SECTION. 135F.19 INJUNCTION.

15 The department may apply to a court for the issuance of an  
16 injunction or other appropriate restraining order against a  
17 person who is engaging in a violation of this chapter.

\* 18 Sec. 10. NEW SECTION. 135F.20 LIABILITY.

19 A respiratory care practitioner who in good faith renders  
20 emergency care at the scene of an emergency is not liable for  
21 civil damages as a result of acts or omissions by the person  
22 rendering the emergency care. This section does not grant  
23 immunity from liability for civil damages when the respiratory  
24 care practitioner is grossly negligent.

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## SENATE FILE 433

H-3723

1 Amend Senate File 433 as follows:

2 1. Page 1, line 11, by striking the words  
3 "program and has" and inserting the following:  
4 "program,".

5 2. Page 1, line 13, by striking the word "care"  
6 and inserting the following: "care and passed a  
7 respiratory therapy certification examination approved  
8 by the state department of health".

9 3. Page 1, line 16, by striking the words  
10 "program and has" and inserting the following:  
11 "program,".

12 4. Page 1, line 18, by striking the word "care"  
13 and inserting the following: "care and passed a  
14 respiratory therapy technicians' certification  
15 examination approved by the state department of  
16 health".

17 5. Page 4, by inserting after line 33 the  
18 following:

19 "3. The designation of certification examinations  
20 for respiratory care practitioners."

21 6. Page 5, by inserting after line 24 the  
22 following:

23 "Sec. 11. NEW SECTION. 135F.11 CONTINUING  
24 EDUCATION.

25 After July 1, 1988, a practitioner shall submit  
26 evidence satisfactory to the department that during  
27 the year of certification the practitioner has  
28 completed continuing education courses as prescribed  
29 by the department. In lieu of the continuing  
30 education, a person may successfully complete the most  
31 current version of the certification examination.

32 Sec. 12. NEW SECTION. 135F.12 SUSPENSION AND  
33 REVOCATION OF CERTIFICATES.

34 The department may suspend, revoke or impose  
35 probationary conditions upon a certificate issued  
36 pursuant to rules adopted in accordance with section  
37 135F.6.

38 Sec. 13. NEW SECTION. 135F.13 ADVISORY  
39 COMMITTEE.

40 A respiratory care advisory committee is  
41 established to provide advice to the department  
42 regarding approval of continuing education programs  
43 and drafting of rules pursuant to section 135F.6.

44 The members of the advisory committee shall include  
45 two licensed physicians with recognized training and  
46 experience in respiratory care, two respiratory care  
47 practitioners, and one public member. Members shall  
48 be appointed by the governor, subject to confirmation  
49 by the senate, and shall serve three year terms  
50 beginning and ending in accordance with section 69.19.

H-3723

Page Two

1 Members shall also be compensated for their actual and  
2 necessary expenses incurred in the performance of  
3 their duties. All per diem and expense moneys paid to  
4 the members shall be paid from funds appropriated to  
5 the department.

6 Sec. 14. Notwithstanding the provisions of section  
7 135F.13, of the initial appointees to the advisory  
8 committee, two members shall be appointed for one year  
9 terms, two members shall be appointed for two year  
10 terms and one member shall be appointed for a three  
11 year term. The initial appointees' successors shall  
12 be appointed to terms of three years each except that  
13 a person chosen to fill a vacancy shall be appointed  
14 only for the unexpired term of the committee member  
15 replaced."

H-3723 FILED APRIL 10, 1985 BY COMMITTEE ON STATE GOVERNMENT

*Adopted as amended by 3767, 3781, 3784  
4/15/85 (J. 1577)*

## SENATE FILE 433

H-3767

1 Amend amendment H-3723 to Senate File 433 as  
2 amended, passed and reprinted by the Senate as follows:  
3 1. Page 1, by striking line 47, and inserting the  
4 following: "practitioners, and one public member.  
5 Not more than a simple majority of the advisory  
6 committee shall be of one gender. Members shall".

H-3767 FILED APRIL 12, 1985 BY HAMMOND of Story

*Adopted 4/15 (J. 1577)*

H-3781

1 Amend the amendment H-3723 to Senate File 433, as  
2 amended, passed and reprinted by the Senate as  
3 follows:

4 1. Page 1, line 8, by inserting after the word  
5 "health." the following: "Two years of supervised  
6 clinical experience in an acceptable location for the  
7 practice of respiratory care, as described in section  
8 135F.4, may be substituted for the completion of a  
9 respiratory therapy training program."

10 2. Page 1, line 16, by inserting after the word  
11 "health." the following: "Two years of supervised  
12 clinical experience in an acceptable location for the  
13 practice of respiratory care, as described in section  
14 135F.4, may be substituted for the completion of a  
15 respiratory therapy training program."

16 3. Page 1, by inserting after line 16 the  
17 following:

18 "\_\_\_\_\_. Page 4, line 13, by striking the words "of  
19 the committee".

20 4. By renumbering as necessary.

BY HANSON of Delaware

BLACK of Jasper

H-3781 FILED APRIL 15, 1985

ADOPTED (p. 1577)

SENATE FILE 433

H-3784

1 Amend the amendment H-3723 to Senate File 433, as  
2 amended, passed and reprinted by the Senate as  
3 follows:

4 1. Page 1, by inserting before line 1 the  
5 following:

6 "\_\_\_\_\_. Page 1, line 6, by inserting after the word  
7 "technician." the following: "Neither term refers to  
8 a person currently working in the field of respiratory  
9 care who does not become certified under this  
10 chapter.""

11 2. Page 1, by inserting after line 20 the  
12 following:

13 "\_\_\_\_\_. Page 5, line 10, by inserting after the  
14 word "practitioner." the following: "A person working  
15 in the field of respiratory care on the effective date  
16 of this Act shall be permitted to continue to do so  
17 except that the person shall not be entitled to  
18 designate or refer to themselves as a "respiratory  
19 care practitioner" or use the letters R.C.P. after the  
20 person's name.""

H-3784 FILED APRIL 15, 1985 BY SWARTZ of Marshall

ADOPTED (p. 1576)

SENATE FILE 433

H-3791

1 Amend Senate File 433 as amended, passed and  
2 reprinted by the Senate as follows:

3 1. Title page, lines 2 and 3, by striking the  
4 words "and an effective date".

H-3791 FILED APRIL 15, 1985 BY HANSON of Delaware

ADOPTED BY UNANIMOUS CONSENT (p. 1577)

S-3784

SENATE FILE 433  
HOUSE AMENDMENT

1 Amend Senate File 433 as amended, passed and  
2 reprinted by the Senate as follows:

3 1. Page 1, line 6, by inserting after the word  
4 "technician." the following: "Neither term refers to  
5 a person currently working in the field of respiratory  
6 care who does not become certified under this  
7 chapter."

8 2. Page 1, line 11, by striking the words  
9 "program and has" and inserting the following:  
10 "program,".

11 3. Page 1, line 13, by striking the word "care"  
12 and inserting the following: "care and passed a  
13 respiratory therapy certification examination approved  
14 by the state department of health. Two years of  
15 supervised clinical experience in an acceptable  
16 location for the practice of respiratory care, as  
17 described in section 135F.4, may be substituted for  
18 the completion of a respiratory therapy training  
19 program."

20 4. Page 1, line 16, by striking the words  
21 "program and has" and inserting the following:  
22 "program,".

23 5. Page 1, line 18, by striking the word "care"  
24 and inserting the following: "care and passed a  
25 respiratory therapy technicians' certification  
26 examination approved by the state department of  
27 health. Two years of supervised clinical experience  
28 in an acceptable location for the practice of  
29 respiratory care, as described in section 135F.4, may  
30 be substituted for the completion of a respiratory  
31 therapy training program."

32 6. Page 4, line 13, by striking the words "of the  
33 committee".

34 7. Page 4, by inserting after line 33 the  
35 following:

36 "3. The designation of certification examinations  
37 for respiratory care practitioners."

38 8. Page 5, line 10, by inserting after the word  
39 "practitioner." the following: "A person working in  
40 the field of respiratory care on the effective date of  
41 this Act shall be permitted to continue to do so  
42 except that the person shall not be entitled to  
43 designate or refer to themselves as a "respiratory  
44 care practitioner" or use the letters R.C.P. after the  
45 person's name."

46 9. Page 5, by inserting after line 24 the  
47 following:

48 "Sec. 11. NEW SECTION. 135F.11 CONTINUING  
49 EDUCATION.

50 After July 1, 1988, a practitioner shall submit

S-3784 page 2

1 evidence satisfactory to the department that during  
2 the year of certification the practitioner has  
3 completed continuing education courses as prescribed  
4 by the department. In lieu of the continuing  
5 education, a person may successfully complete the most  
6 current version of the certification examination.

7 Sec. 12. NEW SECTION. 135F.12 SUSPENSION AND  
8 REVOCATION OF CERTIFICATES.

9 The department may suspend, revoke or impose  
10 probationary conditions upon a certificate issued  
11 pursuant to rules adopted in accordance with section  
12 135F.6.

13 Sec. 13. NEW SECTION. 135F.13 ADVISORY  
14 COMMITTEE.

15 A respiratory care advisory committee is  
16 established to provide advice to the department  
17 regarding approval of continuing education programs  
18 and drafting of rules pursuant to section 135F.6.

19 The members of the advisory committee shall include  
20 two licensed physicians with recognized training and  
21 experience in respiratory care, two respiratory care  
22 practitioners, and one public member. Not more than a  
23 simple majority of the advisory committee shall be of  
24 one gender. Members shall be appointed by the  
25 governor, subject to confirmation by the senate, and  
26 shall serve three year terms beginning and ending in  
27 accordance with section 69.19. Members shall also be  
28 compensated for their actual and necessary expenses  
29 incurred in the performance of their duties. All per  
30 diem and expense moneys paid to the members shall be  
31 paid from funds appropriated to the department.

32 Sec. 14. Notwithstanding the provisions of section  
33 135F.13, of the initial appointees to the advisory  
34 committee, two members shall be appointed for one year  
35 terms, two members shall be appointed for two year  
36 terms and one member shall be appointed for a three  
37 year term. The initial appointees' successors shall  
38 be appointed to terms of three years each except that  
39 a person chosen to fill a vacancy shall be appointed  
40 only for the unexpired term of the committee member  
41 replaced."

42 10. Title page, lines 2 and 3, by striking the  
43 words "and an effective date".

44 11. Renumber sections as necessary.

*New!*  
*SF 433*

*SSB 21*

*St. Govt.*

SENATE FILE 433

BY (PROPOSED COMMITTEE ON  
STATE GOVERNMENT BILL)

SSB 21

STATE GOVERNMENT: C. Miller, Chair; Dieleman, Carr, Corning and Rife.

Passed Senate, Date \_\_\_\_\_ Passed House, Date \_\_\_\_\_  
Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_ Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_  
Approved \_\_\_\_\_

### A BILL FOR

1 An Act relating to the certification and regulation of respira-  
2 tory care practitioners and providing a penalty and an effec-  
3 tive date.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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1 Section 1. NEW SECTION. 135P.1 DEFINITIONS.

2 As used in this chapter, unless otherwise defined or the  
3 context otherwise requires:

4 1. "Respiratory care practitioner" or "practitioner" means  
5 a person who is certified under this chapter to practice  
6 respiratory care in Iowa.

7 2. "Respiratory care" includes "respiratory therapy" or  
8 "inhalation therapy".

9 3. "Respiratory therapist" means a respiratory care prac-  
10 titioner who has successfully completed a respiratory therapy  
11 training program and has passed the registry examination for  
12 respiratory therapists administered by the national board for  
13 respiratory care.

14 4. "Respiratory therapy technician" means a respiratory  
15 care practitioner who has successfully completed a respiratory  
16 therapy training program and has passed the certification  
17 examination for respiratory therapy technicians administered  
18 by the national board for respiratory care.

19 5. "Medical director" means a licensed physician or  
20 surgeon who is a member of a hospital's or health care  
21 facility's active medical staff and who should be certified or  
22 eligible for certification by the American board of internal  
23 medicine or the American board of anesthesiology.

24 6. "Respiratory therapy training program" means a program  
25 accredited by the American medical association's committee on  
26 allied health education and accreditation in cooperation with  
27 the joint review committee for respiratory therapy education  
28 and approved by the committee.

29 7. "Organized health care systems" includes, but is not  
30 limited to, health care facilities as defined in section  
31 135C.1, subsection 4, clinic home health agencies, hospitals  
32 as defined in section 135B.1, subsection 1, licensed  
33 physicians' offices, and public or community health services.

34 8. "Department" means the state department of health.

35 9. "Committee" means the respiratory care committee.

1 10. "Commissioner" means the commissioner of public  
2 health.

3 11. "Academic studies" means courses offered by insti-  
4 tutions of higher education which are comparable to courses  
5 approved by the committee.

6 12. "Continuing education" means educational activities  
7 primarily designed to inform respiratory care practitioners of  
8 developments in the respiratory care field or areas of  
9 practice engaged in by the practitioners. "Continuing  
10 education" may include academic studies undertaken by a  
11 respiratory care practitioner after completion of required  
12 courses of instruction for certification.

13 13. "Course" means a systematic learning experience  
14 designed for acquisition of knowledge, skills, and information  
15 in the practice of respiratory care.

16 14. "Home study course" means a continuing education  
17 course designed by a provider to be undertaken at a certified  
18 practitioner's residence.

19 15. "Hour" means at least fifty minutes of practice in an  
20 organized learning experience.

21 16. "In-service education" means continuing education  
22 courses provided by employers in the employment setting.

23 17. "Provider" means a person or organization offering  
24 continuing education courses approved by the committee.

25 18. "Short-term learning activity" means continuing  
26 education conferences, institutes, lectures, seminars, and  
27 workshops.

28 **Sec. 2. NEW SECTION. 135F.2 RESPIRATORY CARE AS A**  
29 **PRACTICE DEFINED.**

30 "Respiratory care as a practice" means a health care  
31 profession, under medical direction, employed in the therapy,  
32 management, rehabilitation, diagnostic evaluation, and care of  
33 patients with deficiencies and abnormalities which affect the  
34 pulmonary system and associated aspects of cardiopulmonary and  
35 other systems' functions, and includes all of the following:

1 1. Direct and indirect pulmonary care services that are  
2 safe and of comfort, aseptic, preventative, and restorative to  
3 the patient.

4 2. Direct and indirect respiratory care services,  
5 including but not limited to, the administration of  
6 pharmacological and diagnostic and therapeutic agents related  
7 to respiratory care procedures necessary to implement a  
8 treatment, disease prevention, pulmonary rehabilitative, or  
9 diagnostic regimen prescribed by a licensed physician or  
10 surgeon.

11 3. Observation and monitoring of signs and symptoms,  
12 general behavior, reactions, general physical response to  
13 respiratory care treatment and diagnostic testing.

14 4. Determination of whether the signs, symptoms, behavior,  
15 reactions, or general response exhibit abnormal  
16 characteristics.

17 5. Implementation based on observed abnormalities, of  
18 appropriate reporting, referral, or respiratory care protocols  
19 or changes in treatment regimen.

20 "Respiratory care protocols" as used in this section means  
21 policies and procedures developed by an organized health care  
22 system through consultation, when appropriate, with  
23 administrators, licensed physicians and surgeons, certified  
24 registered nurses, licensed physical therapists, licensed  
25 respiratory care practitioners, and other licensed health care  
26 practitioners.

27 Sec. 3. NEW SECTION. 135F.3 PERFORMANCE OF RESPIRATORY  
28 CARE.

29 The performance of respiratory care shall be in accordance  
30 with the prescription of a licensed physician or surgeon and  
31 includes, but is not limited to, the diagnostic and  
32 therapeutic use of the following:

33 1. Administration of medical gases, aerosols, and  
34 humidification, not including general anesthesia.

35 2. Environmental control mechanisms and paramedical

- 1 therapy.
- 2 3. Pharmacologic agents relating to respiratory care
- 3 procedures.
- 4 4. Mechanical or physiological ventilatory support.
- 5 5. Bronchopulmonary hygiene.
- 6 6. Cardiopulmonary resuscitation.
- 7 7. Maintenance of the natural airways.
- 8 8. Insertion without cutting tissues and maintenance of
- 9 artificial airways.
- 10 9. Specific diagnostic and testing techniques employed in
- 11 the medical management of patients to assist in diagnosis,
- 12 monitoring, treatment, and research of pulmonary
- 13 abnormalities, including measurement of ventilatory volumes,
- 14 pressures, and flows, collection of specimens of blood, and
- 15 collection of specimens from the respiratory tract.
- 16 10. Analysis of blood gases and respiratory secretions.
- 17 11. Pulmonary function testing.
- 18 12. Hemodynamic and physiologic measurement and monitoring
- 19 of cardiac function as it relates to cardiopulmonary
- 20 pathophysiology.
- 21 13. Invasive procedures that relate to respiratory care.
- 22 A respiratory care practitioner may transcribe and
- 23 implement a written or verbal order from a licensed physician
- 24 or surgeon pertaining to the practice of respiratory care.
- 25 This chapter does not authorize a respiratory care
- 26 practitioner to practice medicine, surgery, or other medical
- 27 practices except as provided in this section.
- 28 Sec. 4. NEW SECTION. 135F.4 LOCATION OF RESPIRATORY
- 29 CARE.
- 30 The practice of respiratory care may be performed in a
- 31 hospital as defined in section 135B.1, subsection 1, and other
- 32 settings where respiratory care is to be provided in
- 33 accordance with a prescription of a licensed physician or
- 34 surgeon. Respiratory care may be provided during
- 35 transportation of a patient and under circumstances where an

1 emergency necessitates respiratory care.

2 Sec. 5. NEW SECTION. 135F.5 RESPIRATORY CARE STUDENTS.

3 Respiratory care services may be rendered by a student  
4 enrolled in a respiratory therapy training program when these  
5 services are incidental to the student's course of study.

6 A student enrolled in a respiratory therapy training  
7 program who is employed in an organized health care system may  
8 render services defined in sections 135F.2 and 135F.3 under  
9 the direct and immediate supervision of a respiratory care  
10 practitioner for a limited period of time as determined by  
11 rule of the committee. The student shall be identified as a  
12 "student respiratory care practitioner".

13 A graduate of an approved respiratory care training program  
14 employed in an organized health care system may render  
15 services as defined in sections 135F.2 and 135F.3 under the  
16 direct and immediate supervision of a respiratory care  
17 practitioner for one year. The graduate shall be identified  
18 as a respiratory care practitioner-certification applicant.

19 Sec. 6. NEW SECTION. 135F.6 RESPIRATORY CARE ADVISORY  
20 COMMITTEE.

21 A respiratory care advisory committee is created within the  
22 department of health. The committee shall consist of seven  
23 members appointed by the governor, subject to confirmation by  
24 the senate.

25 The members shall include two licensed physicians, four  
26 certified respiratory care practitioners, each with at least  
27 five years of practice in respiratory care, and one public  
28 member.

29 The term of a member is three years and a member shall not  
30 serve more than two consecutive terms. A vacancy shall be  
31 filled by the governor for the balance of the unexpired term  
32 from the appropriate class of persons. A member shall serve  
33 until the member's successor is appointed and qualified. The  
34 governor may remove a member from office for neglect of a duty  
35 required by law or for incompetency or unprofessional or

1 dishonorable conduct.

2 The committee shall annually elect a member as chairperson.  
3 The members shall receive forty dollars per diem and  
4 reimbursement for actual and necessary expenses incurred in  
5 their duties as members of the committee.

6 Sec. 7. NEW SECTION. 135F.7 RESPIRATORY CARE ADVISORY  
7 COMMITTEE MEMBER QUALIFICATIONS.

8 The members of the respiratory care advisory committee  
9 shall be citizens of the United States and residents of the  
10 state of Iowa. Not more than two members of the committee  
11 shall be full-time faculty of universities, colleges, or other  
12 educational institutions.

13 1. The public member shall not:

14 a. Be an officer or faculty member of a college, school,  
15 or institution engaged in respiratory therapy education.

16 b. Be certified by the department or a board within the  
17 department.

18 c. Have a pecuniary interest in the provision of health  
19 care.

20 2. The respiratory care practitioner members shall:

21 a. Be certified or registered by the national board for  
22 respiratory care.

23 b. Each have at least five years experience in respiratory  
24 care or respiratory therapy education, and have been actively  
25 engaged in practice for at least three years immediately pre-  
26 ceding appointment.

27 c. Be certified as a respiratory care practitioner in this  
28 state.

29 Not more than one respiratory care practitioner member  
30 shall be a technical director of a respiratory care department  
31 and not more than one respiratory care practitioner member  
32 shall be an officer or faculty member of a college, school, or  
33 institution engaged in respiratory therapy education.

34 3. The licensed physician members shall:

35 a. Be licensed practicing physicians or surgeons in the

1 state.

2 b. Have recognized qualifications by training and  
3 experience in the management of cardiopulmonary diseases and  
4 respiratory care procedures.

5 Sec. 8. NEW SECTION. 135F.8 DUTIES OF COMMITTEE.

6 The respiratory care advisory committee shall:

7 1. Examine applicants for certification using the entry  
8 level written examination prepared by the national board for  
9 respiratory care.

10 2. Approve courses in approved respiratory care programs.

11 3. Establish standards for continuing education.

12 4. Meet within sixty days after the appointment of its  
13 members and at least annually thereafter. Special meetings  
14 may be called by the chairperson or upon the written request  
15 of two members of the committee. The members of the committee  
16 shall designate the time and place of the regular meetings. A  
17 notice of each meeting shall be sent by the department to the  
18 committee members at least fifteen days prior to the meeting.

19 5. Keep a record of proceedings of the committee.

20 6. Keep a current register of all respiratory care  
21 practitioners, including the last known residence of each  
22 practitioner, and the date and number of the certificate of  
23 each practitioner.

24 7. Compile a list from the register in May of each even-  
25 numbered year. The committee may furnish copies of the list  
26 at cost to interested persons.

27 Sec. 9. NEW SECTION. 135F.9 DEPARTMENT DUTIES.

28 The department shall administer and implement this chapter.  
29 The commissioner shall employ or cause to be employed the  
30 necessary persons to discharge the duties imposed on the  
31 department by this chapter.

32 The department shall:

33 1. Adopt rules in accordance with chapter 17A, with the  
34 advice and approval of the committee.

35 2. Conduct the examination for the committee.

1 3. Notify each respiratory care practitioner before the  
2 first of each year of the date of expiration of the  
3 certification and the amount of renewal fee set by the  
4 department by rule.

5 4. Notify an applicant for certification of the receipt of  
6 the application.

7 Sec. 10. NEW SECTION. 135F.10 INSPECTION--RECORDS.

8 A member of the committee or a respiratory care  
9 practitioner appointed by the department may inspect or  
10 require pertinent reports from an organized health care system  
11 providing respiratory care and from the respiratory care staff  
12 and may inspect respiratory care patient records relating to  
13 the respiratory care provided. The department shall not  
14 authorize a person who is neither a respiratory care  
15 practitioner nor a member of the committee to make an  
16 inspection or obtain records under this section.

17 Sec. 11. NEW SECTION. 135F.11 CERTIFICATION--  
18 APPLICATION.

19 A person shall not practice as or represent that the person  
20 is a respiratory care practitioner in this state without a  
21 certificate from the department. The application shall be  
22 accompanied by the application fee determined by the de-  
23 partment, be signed by the applicant, and contain a statement  
24 under oath of the facts entitling the applicant to receive a  
25 certificate without examination pursuant to section 135F.15 or  
26 to take an examination for certification pursuant to section  
27 135F.13.

28 The committee shall investigate each applicant before the  
29 department issues a certificate to determine if the applicant  
30 has met the requirements for a respiratory care practitioner  
31 pursuant to section 135F.13.

32 The department, upon recommendation by the committee, shall  
33 issue a certificate to the applicant for a respiratory care  
34 practitioner. The certificate, unless sooner suspended or  
35 revoked, shall expire one year after the date of issuance and

1 shall be renewed annually upon an application by the  
2 respiratory care practitioner. Application for renewal shall  
3 be made in writing to the department, accompanied by the  
4 required fee determined by the department and evidence of  
5 continuing education pursuant to section 135F.17. A  
6 respiratory care practitioner who allows the certification to  
7 lapse through failure to make timely application for renewal  
8 may apply for reinstatement within five years of the  
9 certification expiration by submitting evidence satisfactory  
10 to the committee that during the preceding two-year period,  
11 the applicant completed thirty hours of approved continuing  
12 education. In lieu of the continuing education, the applicant  
13 for recertification may successfully complete the examination  
14 pursuant to section 135F.8. The committee may permit an  
15 applicant for recertification after the five-year period to be  
16 recertified by successfully completing the examination.

17 The fees shall be deposited into the general fund of the  
18 state.

19 Sec. 12. NEW SECTION. 135F.12 REPRESENTATION.

20 A person holding a certificate issued by the department  
21 designating the person as a respiratory care practitioner may  
22 use the title "respiratory care practitioner" or the letters  
23 "R.C.P." after the person's name or other words, letters, or  
24 figures which indicate that the person is a certified  
25 respiratory care practitioner.

26 In addition, a respiratory care practitioner may use an  
27 initial, prefix, or suffix indicating possession of a specific  
28 academic degree earned pursuant to section 147.74, and an  
29 initial indicating possession of a specific credential issued  
30 by the national board for respiratory care, or the national  
31 commission for health certifying agencies.

32 Sec. 13. NEW SECTION. 135F.13 APPLICANT QUALIFICATIONS.

33 An applicant for certification as a respiratory care  
34 practitioner shall:

35 1. Be at least eighteen years of age.

- 1     2. Have a high school diploma or equivalent education.
- 2     3. Not be addicted to the intemperate use of alcohol or a
- 3 narcotic drug.
- 4     4. Have successfully completed a respiratory therapy
- 5 training program.
- 6     5. Not have committed crimes constituting grounds for
- 7 denial of certification as determined by the committee.
- 8     6. Have successfully passed the written examination
- 9 pursuant to section 135F.8.

10     Sec. 14. NEW SECTION. 135F.14 EXCEPTION TO CERTIFICA-  
11 TION.

12     1. An applicant who makes an application for certification  
13 based on successful completion of a training program of a  
14 foreign respiratory therapy school shall furnish documentary  
15 evidence satisfactory to the committee that the applicant has  
16 completed such training program or instruction which is  
17 equivalent to the respiratory therapy training program  
18 required in section 135F.13.

19     2. An applicant pursuant to subsection 1 who provides ser-  
20 vices under this chapter shall do so under the direct and  
21 immediate supervision of a respiratory care practitioner in a  
22 prescribed department in a hospital approved by the committee  
23 until the applicant is issued a certificate pursuant to  
24 section 135F.11. Previous to the issuance of the certificate,  
25 the applicant may be identified as a "respiratory care  
26 practitioner-certification applicant." A certificate shall  
27 not be issued and the applicant shall not provide services  
28 pursuant to this section if the applicant does not  
29 successfully pass the examination pursuant to section 135F.8  
30 within one year of the application. The requirement of the  
31 examination shall be eliminated if the applicant has passed an  
32 equivalent examination for certification satisfactory to the  
33 committee in another state, district, or territory of the  
34 United States.

35     3. Notwithstanding subsections 1 and 2, the committee may

1 disapprove a foreign respiratory therapy school or deny  
2 certification of an applicant from such a school if the  
3 instruction or courses are not equivalent to the courses  
4 approved by the committee.

5 Sec. 15. NEW SECTION. 135F.15 IN LIEU OF EXAMINATION.

6 The department may issue a certificate to an applicant  
7 without successful completion of the examination if the  
8 applicant meets all of the following:

9 1. The applicant is a certified respiratory care  
10 practitioner at the time of application in a state, district,  
11 or territory of the United States which has requirements for  
12 certification at least equivalent to those of Iowa in the  
13 opinion of the committee, and has satisfactorily passed an  
14 examination at least equivalent to the examination pursuant to  
15 section 135F.8 or the applicant is certified or registered by  
16 the national board for respiratory care.

17 2. The applicant has filed an application pursuant to  
18 section 135F.11, has passed the examination pursuant to  
19 section 135F.8 or the registry examination of the national  
20 board for respiratory care, and has met the qualifications  
21 pursuant to section 135F.13.

22 An applicant who files an application pursuant to section  
23 135F.11 and who meets the requirements of subsections 1 and 2  
24 of this section may perform as a respiratory care practitioner  
25 under the direct and immediate supervision of a respiratory  
26 care practitioner certified in this state between the date of  
27 receipt of notice from the department that the application is  
28 on file with the department and the date of the applicant's  
29 receipt of a certificate pursuant to section 135F.11. The  
30 applicant shall be identified as a "respiratory care  
31 practitioner-certification applicant".

32 Sec. 16. NEW SECTION. 135F.16 SUSPENSION, REVOCATION,  
33 AND REINSTATEMENT OF CERTIFICATES.

34 1. The department, after appropriate proceedings by the  
35 committee, may suspend for not more than twelve months or

1 revoke or impose probationary conditions upon a certificate or  
2 issue a certificate subject to terms and conditions for any of  
3 the following:

4 a. Fraud in the procurement of the certificate.

5 b. Conviction of a crime which substantially relates to  
6 the qualifications, functions, or duties of a respiratory care  
7 practitioner. The record of conviction or a certified copy of  
8 the record is conclusive evidence of the conviction.

9 c. Permitting a person to impersonate or act as a proxy  
10 for the applicant in an examination given under this chapter.

11 d. Habitual intemperance.

12 e. Addiction to the use of any habit-forming drug or  
13 controlled substance.

14 f. Gross negligence in practice as a respiratory care  
15 practitioner.

16 g. Conviction of a violation, violating or attempting to  
17 violate directly or indirectly, assisting in or abetting the  
18 violation of, or conspiring to violate this chapter or the  
19 medical practice act.

20 h. The aiding or abetting of a person to violate this  
21 chapter.

22 i. The aiding or abetting of a person to engage in the  
23 unlawful practice of respiratory care.

24 j. The commission of a fraudulent, dishonest, or corrupt  
25 act substantially related to the qualifications, functions, or  
26 duties of a respiratory care practitioner.

27 2. A person may apply to the committee or department after  
28 the time set in subsection 1 for reinstatement, restoration,  
29 or modification of the action. The committee may accept or  
30 reject the application and may require an examination for  
31 reinstatement, restoration, or modification of a certificate.

32 3. A plea or verdict of guilty or a conviction following a  
33 no contest plea made to a felony charge or to an offense which  
34 substantially relates to the qualifications, functions, or  
35 duties of a respiratory care practitioner is a conviction

1 pursuant to subsection 1, paragraph g. The department, upon  
2 the recommendation of the committee, may suspend, revoke, or  
3 decline to issue a certificate after the time for appeal has  
4 elapsed, the judgment of conviction has been affirmed on  
5 appeal, or when an order granting probation is made suspending  
6 the imposition of sentence, irrespective of a subsequent order  
7 under the Iowa criminal code, permitting a person to withdraw  
8 a plea of guilty and to enter a plea of not guilty, or setting  
9 aside the verdict of guilty or dismissing the accusation,  
10 information, or indictment.

11 Sec. 17. NEW SECTION. 135F.17 CONTINUING EDUCATION.

12 1. After July 1, 1988, a certified practitioner shall  
13 submit evidence satisfactory to the committee that during the  
14 year of certification the certified practitioner has completed  
15 fifteen hours of continuing education approved by the  
16 committee. In lieu of the continuing education, a person may  
17 successfully complete the most current version of the  
18 certification examination, pursuant to section 135F.8,  
19 subsection 2.

20 2. The committee shall designate approved courses that a  
21 certified practitioner may use to satisfy the requirement for  
22 continuing education. The courses may be in areas other than  
23 those areas directly related to the practice of respiratory  
24 care if, in the opinion of the committee, the courses bear a  
25 reasonable relationship to developments in the respiratory  
26 care field or in a specialty area of practice engaged in by a  
27 respiratory care practitioner. The committee shall consider  
28 continuing education courses which include any of the  
29 following:

- 30 a. Academic studies.
- 31 b. In-service education.
- 32 c. Short-term learning activities.
- 33 d. Extension studies.
- 34 e. Home study courses.

35 3. The committee shall accept hours of approved continuing

1 education on the following basis:

2 a. Each hour of theory is equal to one hour of continuing  
3 education.

4 b. Three hours of course-related clinical practice are  
5 equal to one hour of continuing education.

6 c. Credit shall not be given for more than six hours of  
7 home study courses in one year.

8 d. Comparable continuing education options approved by  
9 certifying agencies of other states may be accepted by the  
10 committee.

11 4. A respiratory care practitioner shall submit evidence  
12 to the committee of successful completion of the required  
13 number of approved continuing education hours by means of a  
14 certificate, transcript, or similar document. The evidence  
15 shall be submitted with the application for certificate  
16 renewal.

17 5. A provider shall:

18 a. Issue a certificate to practitioners who have  
19 successfully completed continuing education courses.

20 b. Apply on forms provided by the department for approval  
21 to offer continuing education courses.

22 c. Include a course in clinical practice no less than  
23 three hours in length if such a course is taught.

24 d. Obtain committee approval of instructors to teach  
25 approved continuing education courses. Instructors shall be  
26 knowledgeable, current, and skillful in the subject matter and  
27 shall have at least two of the following qualifications:

28 (1) Completion of specialized training in the subject  
29 matter taught.

30 (2) Experience in teaching similar subject matter content  
31 within a two-year period preceding the date of application for  
32 approval of the continuing education course.

33 (3) Six months of experience working in the subject area  
34 within a three-year period preceding the date of application  
35 for approval of the continuing education course.

1     Sec. 18. NEW SECTION. 135F.18 PENALTY.

2     A person who violates a provision of this chapter is guilty  
3 of a simple misdemeanor.

4     Sec. 19. NEW SECTION. 135F.19 INJUNCTION.

5     The department or ten or more respiratory care  
6 practitioners may apply to a court for the issuance of an  
7 injunction or other appropriate restraining order against a  
8 person who is engaging in a violation of this chapter.

9     Sec. 20. NEW SECTION. 135F.20 PERMISSIVE ACTS.

10    This chapter does not prohibit:

11    1. Self care by a patient or gratuitous care by a friend  
12 or relative of the patient who is not a respiratory care  
13 practitioner.

14    2. Performance of respiratory care procedures by health  
15 care professionals who are trained in the procedures and are  
16 licensed in the appropriate profession.

17    3. Respiratory care services in an emergency, including  
18 but not limited to an epidemic or public disaster.

19    4. Cardiopulmonary research.

20    Sec. 21. NEW SECTION. 135F.21 LIABILITY.

21    A respiratory care practitioner who in good faith renders  
22 emergency care at the scene of an emergency is not liable for  
23 civil damages as a result of acts or omissions by the person  
24 rendering the emergency care. This section does not grant  
25 immunity from liability for civil damages when the respiratory  
26 care practitioner is grossly negligent.

27    Sec. 22. This Act takes effect July 1, 1987. A person  
28 performing as a respiratory care practitioner for at least two  
29 years before the effective date of this Act shall provide  
30 acceptable documentation of experience and qualifications to  
31 the committee and successfully complete the examination  
32 pursuant to section 135F.8.

33    Notwithstanding the terms in section 135F.6 the governor  
34 shall initially appoint two members of the respiratory care  
35 committee to a one-year term, two members to a two-year term,

1 and three members to a three-year term.

2

EXPLANATION

3 This bill requires a person who practices respiratory care  
4 to be certified by the department of health. The bill permits  
5 students of respiratory care to practice under supervision of  
6 a certified respiratory care practitioner.

7 The bill creates a seven-member respiratory care advisory  
8 committee to regulate the practice of respiratory care,  
9 specifies the duties of the committee, and the qualifications  
10 of the members of the committee.

11 The bill includes sections relating to the inspection of  
12 records of a facility providing respiratory care, immunity  
13 from civil liability when a respiratory care practitioner acts  
14 in good faith in an emergency situation, and a penalty of a  
15 simple misdemeanor for a violation.

16 The bill provides for application, certification,  
17 examination, suspension and revocation, injunction, and  
18 continuing education procedures and requirements.

19 The bill takes effect July 1, 1987, and creates a new  
20 chapter 135F. Sections in the new chapter are referred to  
21 throughout the bill.

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SENATE FILE 433

AN ACT

RELATING TO THE CERTIFICATION AND REGULATION OF RESPIRATORY CARE PRACTITIONERS AND PROVIDING A PENALTY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. NEW SECTION. 135F.1 DEFINITIONS.

As used in this chapter, unless otherwise defined or the context otherwise requires:

1. "Respiratory care practitioner" or "practitioner" means a person who has qualified as a respiratory therapist or respiratory therapy technician. Neither term refers to a person currently working in the field of respiratory care who does not become certified under this chapter.

2. "Respiratory care" includes "respiratory therapy" or "inhalation therapy".

3. "Respiratory therapist" means a respiratory care practitioner who has successfully completed a respiratory therapy training program, passed the registry examination for respiratory therapists administered by the national board for respiratory care and passed a respiratory therapy certification examination approved by the state department of health. Two years of supervised clinical experience in an acceptable location for the practice of respiratory care, as described in section 135F.4, may be substituted for the completion of a respiratory therapy training program.

4. "Respiratory therapy technician" means a respiratory care practitioner who has successfully completed a respiratory therapy training program, passed the certification examination for respiratory therapy technicians administered by the national board for respiratory care and passed a respiratory therapy technicians' certification examination approved by the state department of health. Two years of supervised clinical experience in an acceptable location for the practice of respiratory care, as described in section 135F.4, may be

substituted for the completion of a respiratory therapy training program.

5. "Medical director" means a licensed physician or surgeon who is a member of a hospital's or health care facility's active medical staff and who should be certified or eligible for certification by the American board of internal medicine or the American board of anesthesiology.

6. "Respiratory therapy training program" means a program accredited by the American medical association's committee on allied health education and accreditation in cooperation with the joint review committee for respiratory therapy education and approved by the committee.

7. "Department" means the state department of health.

Sec. 2. NEW SECTION. 135F.2 RESPIRATORY CARE AS A PRACTICE DEFINED.

"Respiratory care as a practice" means a health care profession, under medical direction, employed in the therapy, management, rehabilitation, diagnostic evaluation, and care of patients with deficiencies and abnormalities which affect the pulmonary system and associated aspects of cardiopulmonary and other systems' functions, and includes all of the following:

1. Direct and indirect pulmonary care services that are safe and of comfort, aseptic, preventative, and restorative to the patient.

2. Direct and indirect respiratory care services, including but not limited to, the administration of pharmacological and diagnostic and therapeutic agents related to respiratory care procedures necessary to implement a treatment, disease prevention, pulmonary rehabilitative, or diagnostic regimen prescribed by a licensed physician or surgeon.

3. Observation and monitoring of signs and symptoms, general behavior, reactions, general physical response to respiratory care treatment and diagnostic testing.

4. Determination of whether the signs, symptoms, behavior, reactions, or general response exhibit abnormal characteristics.

5. Implementation based on observed abnormalities, of appropriate reporting, referral, or respiratory care protocols or changes in treatment regimen.

"Respiratory care protocols" as used in this section means policies and procedures developed by an organized health care system through consultation, when appropriate, with administrators, licensed physicians and surgeons, certified registered nurses, licensed physical therapists, licensed respiratory care practitioners, and other licensed health care practitioners.

Sec. 3. NEW SECTION. 135F.3 PERFORMANCE OF RESPIRATORY CARE.

The performance of respiratory care shall be in accordance with the prescription of a licensed physician or surgeon and includes, but is not limited to, the diagnostic and therapeutic use of the following:

1. Administration of medical gases, aerosols, and humidification, not including general anesthesia.
2. Environmental control mechanisms and paramedical therapy.
3. Pharmacologic agents relating to respiratory care procedures.
4. Mechanical or physiological ventilatory support.
5. Bronchopulmonary hygiene.
6. Cardiopulmonary resuscitation.
7. Maintenance of the natural airways.
8. Insertion without cutting tissues and maintenance of artificial airways.
9. Specific diagnostic and testing techniques employed in the medical management of patients to assist in diagnosis, monitoring, treatment, and research of pulmonary abnormalities, including measurement of ventilatory volumes, pressures, and flows, collection of specimens of blood, and collection of specimens from the respiratory tract.
10. Analysis of blood gases and respiratory secretions.
11. Pulmonary function testing.

12. Hemodynamic and physiologic measurement and monitoring of cardiac function as it relates to cardiopulmonary pathophysiology.

13. Invasive procedures that relate to respiratory care.

A respiratory care practitioner may transcribe and implement a written or verbal order from a licensed physician or surgeon pertaining to the practice of respiratory care.

This chapter does not authorize a respiratory care practitioner to practice medicine, surgery, or other medical practices except as provided in this section.

Sec. 4. NEW SECTION. 135F.4 LOCATION OF RESPIRATORY CARE.

The practice of respiratory care may be performed in a hospital as defined in section 135B.1, subsection 1, and other settings where respiratory care is to be provided in accordance with a prescription of a licensed physician or surgeon. Respiratory care may be provided during transportation of a patient and under circumstances where an emergency necessitates respiratory care.

Sec. 5. NEW SECTION. 135F.5 RESPIRATORY CARE STUDENTS.

Respiratory care services may be rendered by a student enrolled in a respiratory therapy training program when these services are incidental to the student's course of study.

A student enrolled in a respiratory therapy training program who is employed in an organized health care system may render services defined in sections 135F.2 and 135F.3 under the direct and immediate supervision of a respiratory care practitioner for a limited period of time as determined by rule. The student shall be identified as a "student respiratory care practitioner".

A graduate of an approved respiratory care training program employed in an organized health care system may render services as defined in sections 135F.2 and 135F.3 under the direct and immediate supervision of a respiratory care practitioner for one year. The graduate shall be identified as a "respiratory care practitioner-certification applicant".

Sec. 6. NEW SECTION. 135F.6 DEPARTMENT DUTIES.

The department shall administer and implement this chapter. The department's duties in these areas shall include, but are not limited to the following:

1. The adoption, publication and amendment of rules, in accordance with chapter 17A, necessary for the administration and enforcement of this chapter.
2. The establishment and collection of fees for the registration of respiratory care practitioners. The fees charged shall be sufficient to defray the costs of administration of this chapter and all fees collected shall be deposited with the treasurer of state who shall deposit them in the general fund of the state.
3. The designation of certification examinations for respiratory care practitioners.

Sec. 7. NEW SECTION. 135F.7 REPRESENTATION.

A person who is qualified as a respiratory care practitioner and is registered with the department may use the title "respiratory care practitioner" or the letters R.C.P. after the person's name to indicate that the person is a qualified respiratory care practitioner registered with the department. No other person is entitled to use the title or letters or any other title or letters that indicate or imply that the person is a respiratory care practitioner, nor may a person make any representation, orally or in writing, expressly or by implication, that the person is a registered respiratory care practitioner. A person working in the field of respiratory care on the effective date of this Act shall be permitted to continue to do so except that the person shall not be entitled to designate or refer to themselves as a "respiratory care practitioner" or use the letters R.C.P. after the person's name.

Sec. 8. NEW SECTION. 135F.8 PENALTY.

A person who violates a provision of this chapter is guilty of a simple misdemeanor.

Sec. 9. NEW SECTION. 135F.9 INJUNCTION.

The department may apply to a court for the issuance of an injunction or other appropriate restraining order against a person who is engaging in a violation of this chapter.

Sec. 10. NEW SECTION. 135F.10 LIABILITY.

A respiratory care practitioner who in good faith renders emergency care at the scene of an emergency is not liable for civil damages as a result of acts or omissions by the person rendering the emergency care. This section does not grant immunity from liability for civil damages when the respiratory care practitioner is grossly negligent.

Sec. 11. NEW SECTION. 135F.11 CONTINUING EDUCATION.

After July 1, 1988, a practitioner shall submit evidence satisfactory to the department that during the year of certification the practitioner has completed continuing education courses as prescribed by the department. In lieu of the continuing education, a person may successfully complete the most current version of the certification examination.

Sec. 12. NEW SECTION. 135F.12 SUSPENSION AND REVOCATION OF CERTIFICATES.

The department may suspend, revoke or impose probationary conditions upon a certificate issued pursuant to rules adopted in accordance with section 135F.6.

Sec. 13. NEW SECTION. 135F.13 ADVISORY COMMITTEE.

A respiratory care advisory committee is established to provide advice to the department regarding approval of continuing education programs and drafting of rules pursuant to section 135F.6.

The members of the advisory committee shall include two licensed physicians with recognized training and experience in respiratory care, two respiratory care practitioners, and one public member. Not more than a simple majority of the advisory committee shall be of one gender. Members shall be appointed by the governor, subject to confirmation by the senate, and shall serve three-year terms beginning and ending in accordance with section 69.19. Members shall also be compensated for their actual and necessary expenses incurred in the performance of their duties. All per diem and expense moneys paid to the members shall be paid from funds appropriated to the department.

Sec. 14. Notwithstanding the provisions of section 135F.13, of the initial appointees to the advisory committee, two members shall be appointed for one-year terms, two members shall be appointed for two-year terms and one member shall be appointed for a three-year term. The initial appointees' successors shall be appointed to terms of three years each except that a person chosen to fill a vacancy shall be appointed only for the unexpired term of the committee member replaced.

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ROBERT T. ANDERSON  
President of the Senate

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DONALD D. AVENSON  
Speaker of the House

I hereby certify that this bill originated in the Senate and is known as Senate File 433, Seventy-first General Assembly.

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K. MARIE THAYER  
Secretary of the Senate

Approved May 20, 1985

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TERRY E. BRANSTAD  
Governor