CHAPTER 223
PRACTICE OF PODIATRY
[Prior to 8/7/02, see rules 645—219.3(514F), 645—219.4(139A)]

645—223.1(149) Definitions. For the purposes of these rules, the following definitions shall apply:

“Ambulatory surgical center” or “ASC” means an ambulatory surgical center that has in effect an agreement with the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services, in accordance with 42 CFR Part 416.

“Conscious sedation” means a depressed level of consciousness produced by the administration of pharmacological substances that retains the patient’s ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command.

645—223.2(149) Requirements for administering conscious sedation. A licensed podiatrist who holds a permanent license in good standing may use conscious sedation for podiatric patients on an outpatient basis in a hospital or ASC after the podiatrist has submitted to the board office an attestation on a form approved by the board.

223.2(1) The attestation shall include:

a. Evidence of successful completion within the past five years of a formal anesthesiology rotation in a residency program approved by the Council on Podiatric Medical Education (CPME); or

b. For a podiatrist who does not meet the requirements of paragraph “a,” an attestation with evidence that the podiatrist is authorized by the governing body of a hospital or ASC to use conscious sedation. This attestation must be received by the board prior to January 1, 2005.

223.2(2) The podiatrist shall provide verification of current certification in Basic Cardiac Life Support (BCLS) or Advanced Cardiac Life Support (ACLS).

223.2(3) A podiatrist who has an attestation on file and continues to use conscious sedation shall meet the requirements of 645—Chapter 222 at the time of license renewal. A minimum of one hour of continuing education in the area of conscious sedation or related topics shall be required beginning with the renewal cycle of July 1, 2004, to June 30, 2006. Continuing education credit in the area of conscious sedation may be applied toward the 40 hours of continuing education required for renewal of the license. In addition, the podiatrist shall maintain current certification in BCLS or ACLS.

223.2(4) A podiatrist shall only utilize conscious sedation in a hospital or ASC when the podiatrist has been granted clinical privileges by the governing body of the hospital or ASC in accordance with approved policies and procedures of the hospital or ASC.

223.2(5) It is a violation of the standard of care for a podiatrist to use conscious sedation agents that result in a deep sedation or general anesthetic state.

223.2(6) Reporting of adverse occurrences related to conscious sedation. A licensed podiatrist who has an attestation on file with the board must submit a report to the board within 30 days of any mortality or other incident which results in temporary or permanent physical or mental injury requiring hospitalization of the patient during or as a result of conscious sedation. The report shall include the following:

a. Description of podiatric procedures;

b. Description of preoperative physical condition of patient;

c. List of drugs and dosage administered;

d. Description, in detail, of techniques utilized in administering the drugs;

e. Description of adverse occurrence, including:

(1) Symptoms of any complications including, but not limited to, onset and type of symptoms;

(2) Treatment instituted;

(3) Response of the patient to treatment;

f. Description of the patient’s condition on termination of any procedures undertaken;

g. If a patient is transferred, a statement providing where and to whom; and

h. Name of the registered nurse who is trained to administer conscious sedation and who assisted in the procedure.
223.2(7) Failure to report. Failure to comply with subrule 223.2(6) when the adverse occurrence is related to the use of conscious sedation may result in the podiatrist’s loss of authorization to administer conscious sedation or in other sanctions provided by law.

223.2(8) Record keeping. The patient’s chart must include:
   a. Preoperative and postoperative vital signs;
   b. Drugs administered;
   c. Dosage administered;
   d. Anesthesia time in minutes;
   e. Monitors used;
   f. Intermittent vital signs recorded during procedures and until the patient is fully alert and oriented with stable vital signs;
   g. Name of the person to whom the patient was discharged; and
   h. Name of the registered nurse who is trained to administer conscious sedation and who assisted in the procedure.

223.2(9) Failure to comply with these rules is grounds for discipline.

645—223.3(139A) Preventing HIV and HBV transmission. Any licensed podiatrist shall comply with the recommendations for preventing transmission of human immunodeficiency virus and hepatitis B virus to patients during exposure-prone invasive procedures, issued by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services, or with the recommendations of the expert review panel established pursuant to Iowa Code section 139A.22(3) and applicable hospital protocols established pursuant to Iowa Code section 139A.22(1). Failure to comply will be grounds for disciplinary action.

645—223.4(149) Unlicensed graduate of a podiatric college. An unlicensed graduate of a podiatric college may function in the licensed podiatrist’s office only as a podiatric assistant. The licensed podiatrist shall have full responsibility and liability for the unlicensed person.

223.4(1) Treatments, charting, and notations completed by the unlicensed graduate must be initialed by that person and countersigned by the licensed podiatrist.

223.4(2) An unlicensed graduate shall not:
   a. Be referred to as “doctor” during professional contact with patients.
   b. Treat patients in the office without a licensed podiatrist present.
   c. Perform surgical work without direct supervision of a licensed podiatrist.
   d. Diagnose or prescribe medicine.
   e. Take independent actions regarding diagnosis, treatment or prescriptions.
   f. Visit nursing homes or make home calls without the presence of the licensed podiatrist.
   g. Bill for any services.

645—223.5(149) Prescribing opioids. A podiatrist shall review a patient’s information contained in the prescription monitoring program database for each opioid prescription prior to prescribing, unless the patient is receiving inpatient hospice care or long-term residential facility care.

These rules are intended to implement Iowa Code chapters 139A, 149 and 514F.

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