

**152B.1 Definitions.**

As used in [this chapter](#), unless otherwise defined or the context otherwise requires:

1. “Board” means the board of respiratory care and polysomnography created under [chapter 147](#).

2. “Department” means the Iowa department of public health.

3. “Formal training” means a supervised, structured educational activity that includes preclinical didactic and laboratory activities and clinical activities approved by an accrediting agency recognized by the board, and including an evaluation of competence through a standardized testing mechanism that is determined by the board to be both valid and reliable.

4. “Qualified health care professional prescriber” means a physician assistant operating under the prescribing authority granted in [section 147.107](#) or an advanced registered nurse practitioner operating under the prescribing authority granted in [section 147.107](#).

5. “Qualified 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 has special interest and knowledge in the diagnosis and treatment of respiratory problems, is qualified by special training or experience in the management of acute and chronic respiratory disorders, is responsible for the quality, safety, and appropriateness of the respiratory care services provided, and is readily accessible to the respiratory care practitioners to assure their competency.

6. “Respiratory care” includes “respiratory therapy” or “inhalation therapy”.

7. “Respiratory care education program” means a course of study leading to eligibility for registration or certification in respiratory care which is recognized or approved by the board.

8. “Respiratory care practitioner” or “practitioner” means a person who meets all of the following:

a. Is qualified in the practice of cardiorespiratory care and has the knowledge and skill necessary to administer respiratory care as defined in [section 152B.3](#).

b. Is capable of serving as a resource to the physician or surgeon in relation to the technical aspects of cardiorespiratory care and to safe and effective methods for administering respiratory care modalities.

c. Is able to function in situations of unsupervised patient contact requiring individual judgment.

d. Is capable of supervising, directing, or teaching less skilled personnel in the provision of respiratory care services.

9. “Respiratory therapist” means a person who has successfully completed a respiratory care education program for training respiratory therapists and has passed the registry examination for respiratory therapists administered by the national board for respiratory care or a respiratory therapy licensure examination approved by the board.

10. “Respiratory therapy technician” means a person who has successfully completed a respiratory care education program for training therapists and has passed the certification examination for respiratory therapy technicians administered by the national board for respiratory care or a respiratory therapist technicians’ licensure examination approved by the board.

[85 Acts, ch 151, §1](#)

[CS85, §135F.1](#)

[90 Acts, ch 1193, §1](#)

[C93, §152B.1](#)

[96 Acts, ch 1036, §31](#); [2007 Acts, ch 10, §128](#); [2012 Acts, ch 1041, §1](#); [2013 Acts, ch 90, §30](#); [2015 Acts, ch 70, §15](#)