

HOUSE BILL REPORT

SHB 1536

As Passed House

March 18, 1997

Title: An act relating to respiratory care.

Brief Description: Modifying regulation of respiratory care practitioners.

Sponsors: By House Committee on Health Care (originally sponsored by Representatives Backlund, Cody and Dyer).

Brief History:

Committee Activity:

Health Care: 2/27/97, 3/3/97 [DPS].

Floor Activity:

Passed House: 3/18/97, 97-1.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Dyer, Chairman; Backlund, Vice Chairman; Skinner, Vice Chairman; Cody, Ranking Minority Member; Murray, Assistant Ranking Minority Member; Anderson; Conway; Parlette; Wood and Zellinsky.

Minority Report: Do not pass. Signed by 1 member: Representative Sherstad.

Staff: John Welsh (786-7133).

Background: Currently, respiratory care practitioners are certified by the Department of Health for practice. The secretary acts as the disciplinary authority. An ad hoc advisory committee advises the secretary on the implementation and operation of the regulatory program.

Respiratory care practitioners work under the direct order and supervision of physicians, and are employed in the treatment, management, diagnostic testing, rehabilitation, and care of patients with deficiencies and abnormalities affecting the cardiopulmonary system.

Summary of Bill: A licensure program for practicing respiratory care is established to be administered by the secretary of health, and only licensed respiratory care practitioners may practice in this state unless exempted by law.

The respiratory care scope of practice is modified to include the insertion of devices for drawing and analyzing venous blood, and the diagnostic monitoring of and therapeutic interventions for aiding the physician in diagnosis.

Exemptions from licensure are provided to other licensed practitioners, employees of the federal government, students and trainees in respiratory care, registered nurses employing the title, and for family members.

Applicants for licensure must have completed an approved school program with a two-year curriculum.

The secretary is authorized by rule to establish requirements for continuing education.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: The bill contains an emergency clause and takes effect on July 1, 1997.

Testimony For: The practice of respiratory care is complex and extensive and should be licensed to protect the public. There is no expansion of scope of practice in the bill, but terminology is updated.

Testimony Against: The Sunrise review recommendation by the Department of Health and Board of Health requested by the Legislature did not recommend licensure, but certification as a level of regulation. Licensure will not bring any more protection to the public safety, while restricting the number of practitioners.

Testified: Ron Weaver, Department of Health (con); Jerry Luedke and Jeff Larson, Respiratory Care Society (pro); and Carl Nelson, Washington State Medical Association (con).