LSBME RESPIRATORY CARE ADVISORY COMMITTEE MINUTES

Date: September 10, 2018 Time 9:00 am Location: LSBME Office Recorder: Diana Merendino

Present: Sheila Guidry, Elizabeth Hamilton, Diana Merendino, Michael Nolan, Raymond Pisani, Brett Stafford, Dr. Vincent A Culotta, Jr., Elaine

Barberot, Lynne Hull

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS / ACTIONS
Call to order / establish quorum	Call to order 9:11 am; quorum established	
Approval of Minutes from 06-18-18 (pgs. 1-4)	Minutes reviewed;	Motion made by Mike Nolan to accept minutes; seconded by Sheila Guidry. No discussion. All in attendance voted yes.
Old Business:		
F/U Letter to be disseminated to RTs in state regarding appropriate CEU sponsors (pg. 5-11)	Ken Alexander was to draft a letter regarding acceptable CEU providers and processes. Ken unable to make meeting today due to last minute conflict. Dr. Culotta stated that CEU Broker is coming soon. We will be able to set up approved courses thru the system and all renewals will be audited by the program.	
F/U Ethics Course Requirement for License renewal	Raymond received information from the AARC that currently there are 9 states that require Ethics as part of the CEU requirements for license renewal (AZ, CA, DC, NV, NJ, OH, PA, TN, TX). The AARC has 2 CEU courses available. Dr. Culotta stated that the LSBME is having an outside entity develop an Ethics course for the Board. He stated this might be another avenue in the future for a LSBME free ethics course for RTs. Discussion was had regarding the need to make a change regarding the addition of an Ethics course within the law or within the rules and regulations. Dr. Culotta stated that a change within Rules and	

Regulations would be an easy fix versus opening the law. Dr. Culotta stated that the LSBME is going to institute a 5 year review of Rules and Regulations for all programs. He would like the Respiratory Therapy Rules be among the first to be reviewed. He also stated that if this change needed to be a law change, he would need wording by October to develop into a Bill to be presented in the 2019 Session next Spring.

The RCAC inquired if there were any recommendations to the LSBME from the legislative audit process. Dr. Culotta anticipates the audit will continue for an additional 18-24 months and there have been no formal recommendations, but the LSBME realizes there are some things that can be improved on, i.e. the review process for the Rules and Regulations.

F/U Oxygen transport / non-licensed personnel (pgs. 8-10)

Ken Alexander forwarded Raymond a statement from Joint Commission (JC) on this matter. Ken reported that JC does not have a standard that addresses the transportation of patient with oxygen, but he also notes that JC doesn't review oxygen as a medicine. Raymond received a follow-up correspondence from Mitch Brock stating his organization had met and concluded that non-licensed personnel would not be allowed to assist with the set-up of oxygen for patient transport.

Motion was made by Diana Merendino to draft a statement to the respiratory therapist in the state that oxygen delivery (set-up and maintenance) in the transportation of a patient should be completed by licensed personnel. The motion was seconded by Mike Nolan. No discussion; all in attendance voted yes.

F/U Recommendations (pg 11 / 11a - f)

Raymond Pisani received a late correspondence from Lesley Rye in Investigations: the committee was asked to review a statement and article regarding Recruitment Maneuvers and PEEP Titration. Ms. Rye asked for further comments or recommendations. The RCAC noted in the statement that the physician stated he did not want to proceed with vent changes, but stated to do what you can to keep the patient alive. Merendino stated that she viewed that second statement as permission to deliver breathing treatments, suction or use other therapeutic modalities without changing ventilator settings.

Shelia Guidry made a motion to have the LSBME Investigations Department follow up with (1) contacting the physician for his statement regarding this situation and (2) contacting the RT department to see if Recruitment Maneuvers and PEEP titration is part of the departmental ventilator protocol. The Motion was seconded by Elizabeth Hamilton. There was no further discussion and all in attendance voted yes. A copy of this request from the RCAC should be sent to Lesley Rye and Dr. Culotta.

New Business:

Dr. Culotta Letter; House Concurrent Resolution (HCR) 70. Pg. 12 - 37

Raymond Pisani sent emails to the three respiratory care agencies asking them about the recognition of military training being utilized for credentialing. Currently there is no acceptance of military training in the absence of CoARC accredited school training for eligibility for NBRC Credentialing which is the basis for state licensure. CoARC pointed out there are two accredited programs (#200585 and #200543), the Interservice Respiratory Therapy Programs that are jointly offered by the U.S. Arm and U.S. Navy that when completed would allow a military individual to set for the exams for credentialing. Dr. Culotta requested a 1 page summary stating there is no mechanism to accept standalone military training for entry into the profession. The RCAC stated that it would be happy to waive the initial application fee for military licensees.

Raymond Pisani and Mike Nolan to put together letter for Dr. Culotta

Dr. Culotta email: Physicians Continuing Professional Development Across the World (pg 38-39) Dr. Culotta forwarded to the RCAC a link to an article entitled, "A Glossary in Support of Physicians Continuing Professional Development Across the World", regarding the development of a common language for Continuing Medical Education. He thought he may be of importance to also think about the respiratory community.

Scope of Practice Question – Use of lidocaine (pg 40)

According to Chapter 49, Section 3353 Definitions, 5 (I), the RCAC believes it to be within the Scope of Practice to utilize lidocaine jelly in patient nares, 4% nebulized, 4% atomizer spray and 1-2% drawn up for use in bronchoscopy when procedure has been ordered by a physician, advanced nurse practitioner or physician assistant. If Susan Bailey would like a formal opinion by the LSBEM Board, she may write Dr. Vince Culotta for formal published opinion.

Mike Nolan made a motion for Raymond to send Ms. Bailey the RCAC opinion that the use of lidocaine mentioned in her question is covered, but a formal opinion from the LSBME board can be made with her additional request from Dr. Culotta. Motion seconded by Brett Stafford. No further discussion. All in attendance voted yes.

Licensura Paguest for inclusion of		
Licensure Request for inclusion of NBRC Credential Expiration Dates on RT license (pg. 41 – 42)	Monica Villarrubia made a request to the LSBME regarding the addition of the NBRC Credentialing Expiration date to the current license. The LSBME does not have any jurisdiction over the Credentialing and Recredentialing processes. The RCAC does not believe it should become a function of the LSBME to monitor this process. Several hospitals utilize the HR department or the Respiratory Care Department to monitor Credential Expiration Dates.	Diana Merendino made a motion for the RCAC to send a response back to Ms. Villarrubia that the LSBME is not responsible for this monitoring process. Motion was seconded by Shelia Guidry. No further discussion. All in favor voted yes.
Licensure Request – Brandy Thompson (pgs. 43-52)	Ms. Brandy Thompson has request to waive the number of examinations attempts for intitial licensure. Ms. Thompson passed the exam on the 7 th attempt. After review of the documentation submitted the RCAC notes the program in which the student graduated and the timing of the attempts on the exam.	Shelia Guidry made the motion: The RCAC recommends Brandy Thompson be given an unrestricted license to practice respiratory therapy in the state of Louisiana. The RCAC recognizes that each facility provides a thorough orientation for the new employee for the protection and safety of the public." Diana Merendino seconded; no further discussion. All in attendance voted yes.
Licensure Request – Jason Breaux (pg 53-54).	Mr Breaux is an RN that practices in the ICU. Previously he also held an RT license that he let lapse 4 years ago. He is now requesting a RT license so he can practice respiratory therapy for extra monies. He would like to obtain this without having to take and pass the Therapist Multiple Choice Exam at the Entry Level	Diana Merendino made a motion to gather more information from Mr. Breaux before granting his request for a license without the TMC passing score at Entry Level. The information to be obtain: (1) Does he currently hold a valid / unrestricted RN license. (2) Does he have any past or current disciplinary actions pending. (3) A copy of his work history as a registered nurse. Mike Nolan seconded the motion. No further discussion. All present voted yes.
Scope of Practice - Electrolytes (pg. 55-56)	Pam Battista wanted to know if RTs can report results for Potassium, Ionized Calcium, Chloride, Lactate, Sodium, Glucose and Creatinine? Diana Merendino commented that the LSBME has already rendered a Board Ruling. Please refer to the Board Opinion from August 2012 that does allow RTs to report these values.	Raymond Pisani to send copy of Board Opinion from August 2012.

Licensure – D Guillot (pg 57-58)	Ms. Guillot had let her license lapse and is in need of getting an initial license from the LSBME which requires current credentials. Ms. Guillot has failed to maintain her credentials, so therefore does not qualify for a license. Her complaint is in regards to NBRC policy. The RCAC agrees it is not the jurisdiction of the LSBME to regulate the policy and procedures required by the NBRC. Ms. Guillot will need to fulfill NBRC requirements before continuing with the licensure process.	Diana Merendino made the motion for the Board to deny Ms. Guillot a RT license based on the application process of failure to provide a current credential. Seconded by Elizabeth Hamilton. No further discussion. All present voted yes.
Licensure – Shows	Raymond received a request for license approval for T Shows with a waiver for the number of attempts. Ms. Shows passed the exam on the 6 th attempt.	Diana Merendino made the motion: The RCAC recommends Tammy Shows be given an unrestricted license to practice respiratory therapy in the state of Louisiana. The RCAC recognizes that each facility provides a thorough orientation for the new employee for the protection and safety of the public." Elizabeth Hamilton seconded; no further discussion. All in attendance voted yes.
Scope of Practice – Jeff Doan	Jeff Doan asked if RTs were able to start IVs in the ED. Diana Merendino stated that Chapter 49 Section 3353 Definitions 5(I) (v) is the wording for starting of IVs.	Nolan made a motion that the RCAC send Mr. Doan the section with the wording allowing RTs to start IVs; Diana Merendino seconded. No further discussion. All present voted yes.
NBRC State Licensure Meeting	Raymond Pisani attended the meeting an gave a brief overview of the changes that were coming: (1) in regards to the initial letter the candidates receive post exam – a minimum score would not be stated. (2) Beginning 2020, there will be a 120 day wait period for retaking a failed exam (CRT, RRT), and a 180 day wait period for a specialty exam (3) NBRC is following facebook groups and will prosecute those violating the copyright laws and "your" signature stating you will not share	

	exam questions (4) 2020 the credentialing maintenance program will change with an addition of quarterly test questions that must be answered which would possible replace some of the CEU requirements.	
CEU Audits	CEU audits – LSBME is working on electronic service	
Other Business: Rules and Regulations Review	Raymond will be looking at dates for possible meeting of subcommittee for the review of RT Rules and regulations.	
2018 Meeting Dates	December 17, 2018	
Meeting Adjourned	Meeting adjourned at 11:20am	Diana Merendino made a motion to adjourn meeting; Mike Nolan seconded. All present voted yes.