

Title 46
PROFESSIONAL AND
OCCUPATIONAL STANDARDS
Part XLV. Medical Professions
Subpart 1. General
Subchapter I. Respiratory
Therapists

§193. Scope of Subchapter

A. The rules of this Subchapter prescribe the fees and costs applicable to the licensing of respiratory therapists.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3351-3361, 37:1270 and 37:1281.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:908 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 30:239 (February 2004), LR 38:52 (January 2012).

§195. Licenses

A. For processing an application for licensing a respiratory therapist, a fee of \$125 shall be payable to the board.

B. For processing a temporary license or a temporary work permit, a fee of \$50 shall be payable to the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3351-3361, 37:1270, 37:1281.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:908 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 30:240 (February 2004), LR 38:52 (January 2012).

§197. Annual Renewal

A. For processing an application for annual renewal of a respiratory therapist's license, a fee of \$85 shall be payable to the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3351-3361, 37:1270 and 37:1281.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 30:240 (February 2004), amended LR 38:52 (January 2012). Title 46

Title 46
PROFESSIONAL AND
OCCUPATIONAL STANDARDS
Part XLV. Medical Professions
Subpart 2. Licensure and
Certification
Chapter 25. Respiratory
Therapists
Subchapter A. General
Provisions

§2501. Scope of Chapter

A. The rules of this Chapter govern the licensing of respiratory therapists in Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2212 (November 1999), LR 38:52 (January 2012).

§2503. Definitions

A. As used in this Chapter, unless the context clearly states otherwise, the following terms and phrases shall have the meanings specified.

Advisory Committee or Committee—the Respiratory Therapy Advisory Committee, as established, appointed and organized pursuant to R.S. 37:3356 of the Act.

American Association for Respiratory Care or AARC—a professional society associated with the respiratory care profession or its successor.

Applicant—a person who has applied to the board for a license or permit to practice respiratory therapy in this state.

Board—the Louisiana State Board of Medical Examiners.

Certified Respiratory Therapist—also known as a Certified Respiratory Therapy Technician prior to July 1, 1999, means one who is in good standing with, and has successfully completed the entry level credentialing examination or its successor administered by the National Board for Respiratory Care.

Chest Pulmonary Therapy (CPT)—chest percussion, postural drainage, chest clapping, chest vibrations, bronchopulmonary hygiene and cupping, positive expiratory therapy (PEP), deep breathing/cough exercise, and inspiratory muscle training.

CoARC—the Commission on Accreditation for Respiratory Care, or its successor or predecessor organizations.

Good Moral Character—as applied to an applicant, means that an applicant has not, prior to or during the pendency of an application to the board, been guilty of any act, omission, condition or circumstance which would provide legal cause under R.S. 37:3358 for the denial, suspension or revocation of respiratory care licensure; the applicant has not, prior to or in connection with his application, made any representation to the board, knowingly or unknowingly, which is in fact false or misleading as to material fact or omits to state any fact or matter that is material to the application; and the applicant has not made any representation or failed to make a representation or engaged in any act or omission which is false, deceptive, fraudulent or misleading in achieving or obtaining any of the qualifications for a license required by this Chapter.

License—the lawful authority to engage in the practice of respiratory therapy in the state of Louisiana, as evidenced by a certificate duly issued by and under the official seal of the board.

Licensed Respiratory Therapist or LRT—a person who is licensed by the board to practice respiratory therapy in Louisiana under the qualified medical direction and supervision of a licensed physician. The term *licensed respiratory therapist* shall be used to signify either a certified or registered respiratory therapist, or a person who was licensed by the board to practice respiratory care prior to 1991.

Medical Gases—gases commonly used in a respiratory care department in the calibration of respiratory care equipment and in the diagnostic evaluation and therapeutic management of diseases, including but not restricted to carbon monoxide, carbon dioxide, compressed air, helium, nitric oxide, nitrogen, and oxygen.

National Board for Respiratory Care or NBRC—the official national credentialing board of the profession, or its successor.

Nontraditional Respiratory Care Education Program—a program of studies primarily through correspondence with tutorial assistance and with a

clinical component comparable to a traditional program.

Physician—a person who is currently licensed by the board to practice medicine in the state of Louisiana.

Registered Respiratory Therapist—one who is currently in good standing with, and has successfully completed the advanced practitioner registry credentialing examination or its successor administered by the National Board for Respiratory Care.

Respiratory Care—is synonymous with the term *respiratory therapy* as defined in this Chapter.

Respiratory Care Education Program—a program of respiratory therapy studies accredited by the Commission on the Accreditation for Respiratory Care (CoARC), or its predecessor or successor organizations, including programs formerly accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) in collaboration with CoARC.

Respiratory Therapy—the allied health specialty practiced under the direction and supervision of a physician involving the assessment, treatment, testing, monitoring, and care of persons with deficiencies and abnormalities of the cardiopulmonary system. Such therapy includes, but is not limited to, the following activities conducted upon the prescription or other order of a physician, advanced practice registered nurse, or physician assistant howsoever communicated and duly recorded:

- a. application and monitoring of oxygen therapy, invasive and non-invasive ventilatory therapy, mechanical ventilation, bronchial hygiene therapy and cardiopulmonary rehabilitation and resuscitation;
- b. insertion and care of natural and artificial airways;
- c. institution of any type of physiologic monitoring applicable to respiratory care, including but not limited to cardiopulmonary and neurological processes related to such diseases;
- d. insertion and care of peripheral arterial lines;
- e. administration of non-controlled drugs and medications commonly used in respiratory care that have been dispensed by a pharmacist and prescribed by a physician, advanced practice registered nurse, or physician assistant to be administered by a licensed respiratory therapist as

defined in this Chapter. Nothing in this Chapter shall be construed to authorize the administration of sedatives, hypnotics, anesthetics or paralytic agents, or intravenous administration of medications, with the exception of the administration of medications necessary during cardiopulmonary arrest by a licensed respiratory therapist certified in advanced cardiac life support (ACLS), pediatric advanced life support (PALS), or in a neonatal resuscitation program (NRP);

f. pulmonary assessment, testing techniques, and therapy modification required for the implementation of physician-approved respiratory care protocols;

g. administration of medical gases and environmental control systems and their apparatus, including hyperbaric oxygen therapy;

h. administration of humidity and aerosol therapy;

i. application of chest pulmonary therapy and associated broncho-pulmonary hygiene techniques;

j. institution of physician-approved, patient-driven respiratory therapy protocols in emergency situations in the absence of a physician;

k. supervision of students;

l. performance of specific procedures and diagnostic testing relative to respiratory therapy that are ordered by a physician, advanced practice registered nurse, or physician assistant to assist in diagnosis, monitoring, treatment, and research, including:

i. drawing of arterial, venous, and capillary blood samples and other body fluids for analysis to determine laboratory values to be performed on blood gas instrumentation;

ii. collection of sputum and other body fluids for analysis;

iii. procedures involved in patient preparation and assisting a physician who is in attendance with invasive procedures related to respiratory therapy, including but not limited to bronchoscopy, chest tube insertion, and tracheotomy;

iv. measurement of expired gases in the performance of cardiopulmonary function tests common to respiratory therapy; and

v. starting of intravenous lines for the purpose of administering fluids pertinent to the practice of respiratory therapy in a special procedure

area under the order of a physician, advanced practice registered nurse, or a physician assistant;

m. transcription and implementation of physician, advanced practice registered nurse, or physician assistant orders pertinent to the practice of respiratory therapy to be provided by a licensed respiratory therapist; and

n. instruction of patient, family, and caregivers in the prevention, management, and therapeutic modalities related to respiratory therapy for patients in any setting.

Respiratory Therapy Practice Act or the Act—R.S. 37:3351-3361, as amended.

United States Government—any department, agency or bureau of the United States Armed Forces or Veterans Administration.

B. Masculine terms wherever used in this Chapter shall also be deemed to include the feminine.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:744 (June 1993), LR 25:2212 (November 1999), LR 38:52 (January 2012).

Subchapter B. Requirements and Qualifications for Licensure

§2505. Scope of Subchapter

A. The rules of this Subchapter govern and prescribe the requirements, qualifications and conditions requisite to eligibility for licensure as a licensed respiratory therapist in the state of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2213 (November 1999), LR 38:54 (January 2012).

§2507. Requirements for Licensure of Respiratory Therapists

A. To be eligible and qualified to obtain a respiratory therapist license, an applicant shall:

1. be at least 18 years of age;
2. be of good moral character;

3. be a high school graduate or have the equivalent of a high school diploma;

4. be a graduate of a respiratory care education program, or have successfully completed all program requirements established by the NBRC for entry level respiratory therapy credentialing;

5. possess current credentials as a certified or registered respiratory therapist granted by the National Board of Respiratory Care or its predecessor or successor organization;

6. be a citizen of the United States or possess valid and current legal authority to reside and work in the United States duly issued by the United States Citizenship and Immigration Services of the United States, Department of Homeland Security, under and pursuant to the Immigration and Nationality Act (66 Stat. 163) and the regulations thereunder (8 C.F.R.);

7. satisfy the applicable fees as prescribed by Chapter 1 of these rules;

8. satisfy the procedures and requirements for application provided by Subchapter C of this Chapter; and

9. not be otherwise disqualified for licensure by virtue of the existence of any grounds for denial of licensure as provided by the law or in these rules.

B. An applicant previously licensed to practice respiratory therapy in any other state, who has not held such a license or been engaged in the practice of respiratory therapy for more than four years immediately prior to the date of the application shall, within such four year period, have been re-credentialed with the NBRC by the successful passage of the entry level credentialing examination.

C. The burden of satisfying the board as to the qualifications and eligibility of the applicant for licensure shall be upon the applicant. An applicant shall not be deemed to possess such qualifications unless the applicant demonstrates and evidences such qualification in the manner prescribed by and to the satisfaction of the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended LR 14:87 (February 1988), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 15:271 (April 1989), LR 17:479 (May 1991), LR 25:2213 (November 1999), LR 38:54 (January 2012).

§2510. Recognition of Respiratory Care Education Programs

A. Graduation from a respiratory care education program, or the successful completion of all program requirements established by the NBRC for entry level respiratory therapy credentialing, is among the required qualifications for respiratory therapy licensure. This qualification shall be deemed to be satisfied if, as of the date of the applicant's graduation, or successful completion of all program requirements established by the NBRC for entry level respiratory therapy credentialing, the respiratory therapy care education program is accredited by CoARC, including programs formerly accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) in collaboration with CoARC.

B. A respiratory care education program that is not accredited, or whose accreditation has been revoked or suspended by CoARC, shall be deemed unacceptable to qualify applicants for licensure in this state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:746 (June 1993), amended LR 25:2214 (November 1999), LR 38:54 (January 2012).

§2511. License by Reciprocity

A. A person who possesses a current, unrestricted license to practice respiratory therapy issued by the medical licensing authority of another state, the District of Columbia, or a territory of the United States, shall only be eligible for licensure in this state if the applicant meets all of the qualifications for licensure specified in §2507 of this Subchapter, and satisfies the procedural and other requirements specified in Subchapters C and D of this Chapter, including but not limited to the restriction and limitation on examination set forth in §2536 of this Chapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2214 (November 1999), LR 38:55 (January 2012).

Subchapter C. Application

§2515. Purpose and Scope

A. The rules of this Subchapter govern the procedures and requirements applicable to

application to the board for licensure of a licensed respiratory therapist in the state of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended, Department of Health and Hospitals, Board of Medical Examiners, LR 25:2215 (November 1999), LR 38:55 (January 2012).

§2517. Application Procedure

A. Application for licensure shall be made in a format approved by the board.

B. Applications and instructions may be obtained from the board's web page or by personal or written request to the board.

C. An application for licensure under this Chapter shall include:

1. proof, documented in a form satisfactory to the board, that the applicant possesses the qualifications for licensure set forth in this Chapter;

2. one recent photograph of the applicant;

3. certification of the truthfulness and authenticity of all information, representations and documents contained in or submitted with the completed application;

4. criminal history record information;

5. payment of the applicable fee as provided in Chapter 1 of these rules; and

6. such other information and documentation as is referred to or specified in this Chapter or as the board may require to evidence qualification for licensure.

D. All documents required to be submitted to the board must be the original thereof. For good cause shown, the board may waive or modify this requirement.

E. The board may reject or refuse to consider any application which is not complete in every detail, including submission of every document or item required by the application. The board may, at its discretion, require a more detailed or complete response to any request for information set forth in the application as a condition to consideration of an application.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37: 1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the

Department of Health and Hospitals, Board of Medical Examiners, LR 25:2215 (November 1999), LR 38:55 (January 2012).

§2519. Effect of Application

A. The submission of an application for licensure to the board shall constitute and operate as an authorization by the applicant to each educational institution at which the applicant has matriculated, each governmental agency to which the applicant has applied for any license, permit, certificate or registration, each person, firm, corporation, organization or association by whom or with whom the applicant has been employed as a respiratory therapist, each physician whom the applicant has consulted or seen for diagnosis or treatment, and each professional or trade organization to which the applicant has applied for membership, to disclose and release to the board any and all information and documentation concerning the applicant which the board deems material to consideration of the application. With respect to any such information or documentation, the submission of an application for licensure to the board shall equally constitute and operate as a consent by the applicant to the disclosure and release of such information and documentation as a waiver by the applicant of any privileges or right of confidentiality which the applicant would otherwise possess with respect thereto.

B. By submission of an application for licensure to the board, an applicant shall be deemed to have given his consent to submit to physical or mental examinations if, when, and in the manner so directed by the board if the board has reasonable grounds to believe that the applicant's capacity to act as a respiratory therapist with reasonable skill or safety may be compromised by physical or mental condition, disease or infirmity, and the applicant shall be deemed to have waived all objections as to the admissibility or disclosure of findings, reports or recommendations pertaining thereto on the grounds of privileges provided by law.

C. The submission of an application for licensure to the board shall constitute and operate as an authorization and consent by the applicant to the board to disclose any information or documentation set forth in or submitted with the applicant's application or obtained by the board from other persons, firms, corporations, associations or governmental entities pursuant to this Section, to any person, firm, corporation, association or governmental entity having a lawful, legitimate and reasonable need therefor, including, without limitation, the respiratory care licensing authority of any state, the National Board for Respiratory Care,

the Louisiana Department of Health and Hospitals, state, county or parish and municipal health and law enforcement agencies and the armed services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2215 (November 1999), LR 38:55 (January 2012).

Subchapter D. Examination

§2521. Purpose and Scope

A. The rules of this Subchapter govern the procedures and requirements applicable to the examination for the licensure of respiratory therapists.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2216 (November 1999), LR 38:56 (January 2012).

§2523. Designation of Examination

A. The examinations accepted by the board pursuant to R.S. 37:3354 are the National Board for Respiratory Care entry level credentialing examination and the advanced practitioner registry credentialing examination or their successor(s).

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2216 (November 1999), LR 38:56 (January 2012).

§2536. Restriction, Limitation on Examination

A. An applicant who failed to obtain a passing score upon taking the entry level credentialing examination offered by the NBRC four times shall be ineligible for licensure under this Chapter.

B. An applicant who is ineligible for licensure pursuant to Subsection A of this Section, shall regain licensure eligibility upon the successful completion of the advanced practitioner registry credentialing examination offered by the NBRC; provided, however, that an applicant who fails to achieve a passing score upon four attempts of either part of such examination shall not thereafter be considered eligible for licensing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended LR 14:87 (February 1988), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 17:479 (May 1991), LR 25:2217 (November 1999), LR 38:56 (January 2012).

§2537. Passing Score

A. An applicant will be deemed to have successfully passed a credentialing examination if he attains a score equivalent to that required by the National Board for Respiratory Care as a passing score.

B. Applicants for licensure shall be required to authorize the National Board for Respiratory Care to release their test scores to the board each time the applicant-examinee attempts the examination according to the procedures for such notification established by the National Board for Respiratory Care.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2217 (November 1999), LR 38:56 (January 2012).

Subchapter E. Licensure Issuance, Termination, Renewal, and Reinstatement

§2540. Issuance of License

A. If the qualifications, requirements and procedures prescribed or incorporated in Subchapter B this Chapter are met to the satisfaction of the board, the board shall issue a license to the applicant to practice respiratory therapy in this state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2218 (November 1999), LR 38:57 (January 2012).

§2541. Expiration of License

A. Every license issued by the board under this Chapter shall expire, and thereby become null, void and to no effect each year on the last day of the month in which the licensee was born.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1218 (December 1996), LR 24:1502 (August 1998), LR 25:2218 (November 1999), LR 38:57 (January 2012).

§2543. Renewal of License

A. Every license issued by the board under this Subchapter shall be renewed annually on or before the last day of the month in which the licensee was born by submitting to the board:

1. a renewal application in a format prescribed by the board;
2. the renewal fee prescribed in Chapter 1 of these rules; and
3. documentation of not less than ten contact hours of approved continuing professional education within the past twelve months as prescribed by Subchapter G of these rules.

B. Renewal applications and instructions may be obtained from the board's web page or upon personal or written request to the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1218 (December 1996), LR 24:1502 (August 1998), LR 25:2218 (November 1999), LR 38:57 (January 2012).

§2545. Reinstatement of License

A. A license which has expired may be reinstated by the board subject to the conditions and procedures hereinafter provided.

B. An application for reinstatement shall be submitted in a format approved by the board and be accompanied by:

1. a statistical affidavit in a form provided by the board;
2. a recent photograph;
3. proof of ten hours of approved continuing professional education for each year that the license lapsed, up to a total of thirty hours, as set forth in Subchapter G of this Chapter;
4. such other information and documentation as is referred to or specified in this Chapter or as the board may require to evidence qualification for licensure; and

5. the renewal fee set forth in Chapter 1 of these rules, plus a penalty computed as follows:

a. if the application for reinstatement is made less than two years from the date of license expiration, the penalty shall be equal to the renewal fee;

b. if the application for reinstatement is made more than two years from the date of license expiration, the penalty shall be equal to twice the renewal fee.

C. An applicant who has not been licensed to practice respiratory therapy or engaged in the practice of respiratory therapy in any state for more than four years immediately prior to the date of the application shall, within such four year period, have been re-credentialed with the NBRC by the successful passage of the entry level credentialing examination. Such an applicant shall not be required to furnish evidence of continuing professional education as otherwise required by §2545.B.3.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1218 (December 1996), LR 25:2218 (November 1999), LR 38:57 (January 2012).

§2547. Temporary License

A. The board may issue a 6-month temporary license, also known and designated as an "examination permit," to an individual who has made application to the board for a license as a respiratory therapist under the following terms and conditions.

1. To be eligible for a 6-month examination permit an applicant shall:

a. be qualified for respiratory therapy licensure under §2507.A, except for having taken and passed the required NBRC credentialing examination;

b. have taken, or made application to take, the required NBRC credentialing examination and be awaiting the administration and/or reporting of scores thereon; and

c. have applied within one year of the applicant's date of graduation from a respiratory care education program or the successful completion of all program requirements established by the NBRC for entry level respiratory therapy credentialing. Exceptions may be made at the discretion of the board.

2. An examination permit shall be effective for 6 months and shall expire and become null and void on the earlier of:

- a. six months from the date of issuance;
- b. the date on which the board takes action on the application following notice of:
 - i. the applicant's successful completion of the NBRC credentialing examination; or
 - ii. the applicant's fourth unsuccessful attempt to pass the NBRC entry level credentialing examination.

3. An examination permit shall not be renewed but may be extended only once for a maximum period of 3 months based on an appeal identifying extenuating circumstances. Such an appeal shall be submitted to the board in writing at least thirty days prior to the expiration of the examination permit. Requests for an extension may be referred to the advisory committee for review and recommendation to the board. The advisory committee or the board may require additional documents from the licensee including, but not limited to:

- a. licensing examination results for all attempts;
- b. evidence of having attended entry level examination review courses; and/or
- c. proof of extenuating circumstances preventing the licensee from attempting the licensing examination.

4. An examination permit that is extended under this Subsection shall be effective for not more than 3 months and shall, in any event, expire and become null and void on the earlier of:

- a. three months from the date of issuance;
- b. the date on which the board takes action on the application following notice of:
 - i. the applicant's successful completion of the NBRC credentialing examination; or
 - ii. the applicant's fourth unsuccessful attempt to pass the NBRC entry level credentialing examination.

B. The maximum term of an examination permit shall be reduced by any amount of time that an applicant held a temporary work permit issued under this Subchapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 15:271 (April 1989), LR 17:480 (May 1991), LR 19:746 (June 1993), LR 25:2218 (November 1999), LR 38:57 (January 2012).

§2548. Temporary Work Permit

A. The board may grant a temporary work permit to practice, effective for a period of 60 days, to an applicant who has made application to the board for a license as a respiratory therapist, who:

1. is currently credentialed in respiratory therapy by the NBRC, and who is not otherwise demonstrably ineligible for licensure under §2507.A of these rules; or

2. satisfies the criteria for a temporary license (examination permit) specified by §2547 of these rules.

B. A work permit issued under this Subsection may not be extended or renewed beyond its initial term.

C. An applicant who is granted a 6-month temporary license (examination permit) under this Subchapter shall be ineligible for subsequent consideration for a temporary work permit.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 38:58 (January 2012).

Subchapter F. Advisory Committee on Respiratory Care

§2549. Organization; Authority

A. The Advisory Committee on Respiratory Care (the "committee"), as established, appointed and organized pursuant to R.S. 37:3356 of the Act is hereby recognized by the board.

B. The committee shall:

1. have such authority as is accorded to it by the Act;

2. function and meet as prescribed by the Act;

3. monitor respiratory care education and training programs conducted in the state of Louisiana;

4. advise the board on issues affecting the licensing of respiratory therapists and regulation of respiratory care in the state of Louisiana;

5. provide advice and recommendations to the board respecting the modification, amendment and supplementation of rules and regulations, standards, policies and procedures respecting respiratory care licensure and practice;

6. serve as liaison between and among the board, licensed respiratory therapists, and professional organizations;

7. have authority to review and advise the board on requests for extension of temporary licenses (examination permits) and applications for license reinstatement;

8. conduct audits on applications to ensure satisfactory completion of continuing education and competency as specified by the board's rules;

9. perform such other functions and provide such additional advice and recommendations as may be requested by the board; and

10. receive reimbursement in the amount of fifty dollars per day for attendance at meetings of the advisory committee and other activities and expenses specifically authorized by the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:747 (June 1993), amended LR 25:2219 (November 1999), LR 38:58 (January 2012).

§2551. Delegation of Authority

A. Authority is hereby delegated to the Advisory Committee on Respiratory Care to:

1. monitor all respiratory care education programs located in this state for the purpose of reporting and making recommendations to the board. To facilitate its responsibility committee may, among other items:

a. survey, by site visit or otherwise, programs and their affiliated hospitals, other institutions and associated clinical training sites;

b. request and obtain information from students, instructors, administrators or others associated with any hospital or clinical affiliate involved in such programs;

c. track enrollment, attrition, and retention statistics;

d. trend NBRC examination passage rates and scores; and

e. request information regarding examination passage and scores from the NBRC.

2. assist the board in the review of applicants' satisfaction of continuing professional education requirements for renewal of licensure under this Chapter.

B. To carry out its duties of §2551.A.2, the Advisory Committee is authorized to advise and assist the board in the review and approval of continuing professional education programs and licensee satisfaction of continuing professional education requirements for renewal of licensure, as prescribed by Subchapter G of this Chapter, including the authority and responsibility to:

1. evaluate organizations and entities providing continuing professional education programs for all licensed respiratory therapists and provide recommendations to the board on approval of such organizations and entities as sponsors of qualifying continuing professional education programs and activities pursuant to §2559 of these rules;

2. request and obtain from continuing professional education sponsoring organizations any information necessary to properly evaluate and make informed recommendations to the board relative to the appropriateness of the educational program;

3. review renewal applications selected for audit of continuing professional education or referred by the board to verify the accuracy of documentation and make recommendations to the board with respect to whether programs and activities evidenced by applicants for renewal of licensure comply with and satisfy the standards prescribed by these rules; and

4. request and obtain from applicants for renewal of licensure, as well as those referred by the board, such additional information as the advisory committee may deem necessary or appropriate to enable it to make the evaluations and provide the recommendations for which the committee is responsible.

C. In discharging the functions authorized under this Section the advisory committee and the individual members thereof shall, when acting within the scope of such authority, be deemed agents of the board. All information obtained by the advisory committee members pursuant to this Subchapter shall be considered confidential. Advisory committee members are prohibited from communicating, disclosing or in any way releasing to anyone, other than the board, any information or documents obtained when acting as agents of the board without first obtaining written authorization from the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3351-3361, 37:1270(B)(6) and 37:3357.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:747 (June 1993), amended LR 22:1219 (December 1996), LR 25:2219 (November 1999), LR 38:58 (January 2012).

Subchapter G. Continuing Professional Education

§2553. Scope of Subchapter

A. The rules of this Subchapter provide standards for the continuing professional education requisite to the annual renewal of licensure as a licensed respiratory therapist, as required by §2543 and §2555 of these rules, and prescribe the procedures applicable to satisfaction and documentation of continuing professional education in connection with application for renewal of licensure.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1219 (December 1996), amended LR 25:2220 (November 1999), LR 38:59 (January 2012).

§2555. Continuing Professional Educational Requirement

A. Subject to the exceptions specified in §2569 of this Subchapter, to be eligible for renewal of licensure a respiratory therapists shall, within each year during which he holds a license, evidence and document, upon forms or in another format acceptable to the board, the successful completion of not less than 10 contact hours of continuing professional education sanctioned by the American Association of Respiratory Care, the organizations identified in §2559 of these rules, or their successors, or the advisory committee.

B. For purposes of this Section, one contact hour of continuing professional education credit is equivalent to 50 minutes of qualifying lecture, laboratory practice, on-line course or workshop instruction on topics pertaining to the respiratory care profession.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1219 (December 1996), amended LR 25:2220 (November 1999), LR 38:59 (January 2012).

§2557. Qualifying Continuing Professional Education Programs

A. To be acceptable as qualifying continuing professional education under these rules, a program shall:

1. have significant and substantial intellectual or practical content dealing principally with matters germane and relevant to the practice of respiratory care;

2. have pre-established written goals and objectives, with its primary objective being to maintain or increase the participant's competence in the practice of respiratory care;

3. be presented by persons whose knowledge and/or professional experience is appropriate and sufficient to the subject matter of the presentation and is up to date;

4. provide a system or method for verification of attendance or course completion;

5. be a minimum of 50 continuous minutes in length for each contact hour of credit; and

6. allow participants an opportunity to ask questions on the content presented.

B. Other approved continuing professional education activities include:

1. earning a grade of "C" or better in a college or university science course required to earn a degree in cardiopulmonary science or respiratory care, or a grade of "pass" in a pass/fail course. One credited semester hour will be deemed to equal 15 contact hours;

2. programs on advanced cardiac life support (ACLS), pediatric advanced life support (PALS) or neonatal advanced resuscitation program (NRP), or their successors, each of which will equal 5 contact hours;

3. any initial instructor course taken in preparation for teaching ACLS, PALS, NRP, or asthma educator (AE-C) or any other future instructor course sanctioned by the AARC, each of which will equal to 5 contact hours;

4. initial credentialing with the NBRC as a certified or registered respiratory therapist or another specialty examination administered by the NBRC, with each credential equal to 10 contact hours;

5. initial credentialing as a certified or registered cardiovascular technologist, asthma educator or other specialty credential granted by the NBRC, with each credential equal to 10 contact hours;

6. successful completion of any NBRC re-credentialing examination, with each such examination equal to 10 contact hours;

7. respiratory care-related lecture, seminar, workshop, home study, on-line, or correspondence courses approved by either the AARC or the advisory committee, pursuant to the criteria set forth in §2561 of these rules.

C. None of the following programs, seminars or activities shall be deemed to qualify as acceptable continuing professional education programs under these rules:

1. any program not meeting the standards prescribed by this Section;

2. any independent/home study correspondence, on-line, lecture, workshop, program or seminar that is not approved or sponsored by the AARC or the advisory committee pursuant to the criteria set forth in §2561 of these rules;

3. in-service education provided by a sales representative unless approved by AARC;

4. teaching, training or supervisory activities not specifically included in §2557.B;

5. holding office in professional or governmental organizations, agencies or committees;

6. participation in case conferences, informal presentations, or in service activities;

7. giving or authoring verbal or written presentations, seminars or articles or grant applications;

8. passing basic life support (BCLS); and

9. any program, presentation, seminar, or course not providing the participant an opportunity to ask questions or seek clarification of matters pertaining to the content presented.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1220 (December 1996), amended LR 25:2221 (November 1999), LR 38:59 (January 2012).

§2559. Approval of Program Sponsors

A. Any program, course, seminar, workshop or other activity meeting the standards prescribed by §2557 shall be deemed approved for purposes of satisfying continuing education requirements under this Subchapter, if sponsored or offered by one of the following organizations: the American Association for Respiratory Care (AARC), the Louisiana Society for Respiratory Care (LSRC), the American Lung Association (ALA), the American Heart Association (AHA), the American Academy of Pediatrics (AAP), the American College of Chest Physicians (ACCP),

the American Thoracic Society (ATS), the Louisiana Department of Health and Hospitals (DHH), the Louisiana Hospital Association (LHA), or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) .

B. Upon the recommendation of the advisory committee, or on its own motion, the board may designate additional organizations and entities whose programs, courses, seminars, workshops, or other activities shall be deemed approved by the board for purposes of qualifying as an approved continuing professional education program under §2557 or §2559.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1220 (December 1996), amended LR 25:2221 (November 1999), LR 38:60 (January 2012).

§2561. Approval of Program

A. A continuing professional education program or activity sponsored by an organization or entity that is not approved by the board pursuant to §2557 or 2559 must be evaluated and approved by the advisory committee in order to be accepted for purposes of meeting the continuing professional education requirement for annual renewal of licensure. To be considered for approval the sponsoring organization or entity shall submit a written request to the board. For each continuing professional educational program presented for consideration the following shall be provided:

1. a list of course goals and objectives for each topic;

2. a course agenda displaying the lecture time for each topic;

3. a curriculum vitae for each speaker;

4. information on the location, date(s), and target audience;

5. a copy of the evaluation form used for the overall program topics and speakers; and

6. such other information as the advisory committee may request to establish the compliance of such program with the standards prescribed by §2557 or 2559.

B. A request for pre-approval of a continuing professional education program shall be submitted in a format approved by the board not less than 60 days in advance of the event. Any such request for pre-approval respecting a program which makes and

collects a charge for attendance shall be accompanied by a nonrefundable processing fee of \$30.

C. Any such written request shall be referred by the board to the advisory committee for evaluation and approval.

D. If the recommendation is against the approval, the board or the advisory committee shall give notice of such recommendation to the person or organization requesting approval. An appeal may be submitted to the board by written request, accompanied by all information required by Subsection A of this Section within 10 days of such notice. The board's decision with respect to approval of any such activity shall be final.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1221 (December 1996), amended LR 25:2221 (November 1999), LR 38:60 January 2012).

§2563. Documentation Procedure

A. Annual documentation and certification of satisfaction of the continuing professional education requirements prescribed by these rules shall accompany a licensed respiratory therapist's application for renewal of licensure pursuant to §2543 of these rules.

B. A licensed respiratory therapist shall maintain a record or certificate of attendance for at least four years from the date of completion of the continuing professional education program.

C. The board or advisory committee shall randomly select for audit no fewer than 3 percent of the licensees each year for an audit of continuing education activities. In addition, the board or advisory committee has the right to audit any questionable documentation of activities. Verification shall be submitted within 30 days of the notification of audit. A licensee's failure to notify the board of a change of mailing address will not absolve the licensee from the audit requirement.

D. Any certification of continuing professional education not presumptively approved in writing by the board, pursuant to §2557 or 2559 of these rules, or pre-approved by the advisory committee, pursuant to §2561, shall be referred to the advisory committee for its evaluation and recommendations prior to licensure denial or renewal.

E. If the advisory committee determines that a continuing professional education program or activity listed by an applicant for renewal does not qualify for recognition by the board or does not qualify for the

number of contact hours claimed by the applicant, the board shall give notice of such determination to the applicant. An applicant may appeal the advisory committee's recommendation to the board by written request delivered to the board within 10 days of such notice. The board's decision with respect to approval and recognition of such program or activity shall be final.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1221 (December 1996), amended LR 25:2222 (November 1999), LR 38:60 (January 2012).

§2565. Failure to Satisfy Continuing Professional Education Requirements

A. An applicant for renewal of licensure who fails to evidence satisfaction of the continuing professional education requirements prescribed by these rules shall be given written notice of such failure by the board. The license of the applicant shall remain in full force and effect for a period of 90 days following the mailing of such notice, following which it shall be deemed expired, unrenewed and subject to suspension or revocation without further notice, unless the applicant shall have, within such 90 days, furnished the board satisfactory evidence by affidavit that:

1. the applicant has satisfied the applicable continuing professional education requirements;

2. the applicant is exempt from such requirements pursuant to these rules; or

3. the applicant's failure to satisfy the continuing professional education requirements was occasioned by disability, illness or other good cause as may be determined by the board pursuant to §2567.

B. The license of a licensed respiratory therapist whose license has expired by nonrenewal or has been suspended or revoked for failure to satisfy the continuing professional education requirements of this Subchapter may be reinstated by the board upon application to the board pursuant to §2545 of this Chapter, accompanied by payment of a reinstatement fee, together with documentation and certification that the applicant has, for each calendar year since the date on which the applicant's license lapsed, expired, or was suspended or revoked, completed an aggregate of 10 contact hours of qualifying continuing professional education.

C. Any licensee who falsely certifies attendance and/or completion of the required continuing

education requirement will be subject to disciplinary action by the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1221 (December 1996), amended LR 24:1502 (August 1998), LR 25:2222 (November 1999), LR 38:61 (January 2012).

§2567. Waiver of Requirements

A. The board may, in its discretion upon the recommendation of the advisory committee, waive all or part of the continuing professional education required by these rules in favor of a respiratory therapist who makes a written request for such waiver to the board and evidences to its satisfaction a permanent physical disability, illness, financial hardship or other similar extenuating circumstances precluding the individual's satisfaction of the continuing professional education requirement. Any licensed respiratory therapist submitting a continuing professional education waiver request is required to do so on or before the date specified for the renewal of the licensee's license by §2543. Any request received by the board past the date for licensure renewal will not be considered for waiver but, rather, in accordance with the provisions of §2565.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1222 (December 1996), amended LR 25:2222 (November 1999), LR 38:61 (January 2012).

§2569. Exceptions to the Continuing Professional Education Requirements

A. The continuing professional education requirements prescribed by this Subchapter for renewal of licensure shall not be applicable to:

1. a respiratory therapist employed exclusively by, or at an institution operated by the United States Government; or
2. a respiratory therapist who has within the twelve months prior to the date of renewal, been credentialed or recredentialed by the NBRC on the basis of examination.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3357(D) and 37:1270(B)(6).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 22:1222 (December 1996), amended LR 25:2222 (November 1999), 38:61 (January 2012).

Subchapter H. Supervision of Students

§2571. Scope of Subchapter [Formerly §5511]

A. The rules of this Subchapter prescribe certain restrictions on and requirements for supervision of students enrolled in a respiratory care education program as that term is defined in these rules.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), repromulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2224 (November 1999), LR 38:61 (January 2012).

§2573. Student Participation in Clinical Training

A. A student or trainee providing respiratory care to patients as permitted by R.S. 37:3361(3) in the course of a student's clinical training shall:

1. be supervised in accordance with the provisions of §2575 of this Subchapter;
2. be identified to patients and licensed practitioners by title or otherwise which clearly designates the student's status as a student or trainee; and
3. not be compensated monetarily for services rendered during their education processes for cardiopulmonary clinical experiences.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 38:61 (January 2012).

§2575. Supervision of Student [Formerly §5515]

A. A person pursuing a course of study leading to certification or registry in respiratory care shall engage in the practice of respiratory care only under the supervision of a licensed respiratory therapist or a physician who actively practices respiratory care, as provided in this Section.

B. A licensed respiratory therapist or a physician who undertakes to supervise a student shall:

1. undertake to concurrently supervise not more than four students;
2. personally evaluate every patient prior to the provision of any respiratory care treatment or procedure by a student;
3. assign to a student only such respiratory care measures, treatments, procedures and functions as

such licensed respiratory therapist or physician has documented that the student by education and training is capable of performing safely and effectively;

4. provide continuous and immediate on-premises direction to and supervision of a student and be readily available at all times to provide advice, instruction, and assistance to the student and to the patient during respiratory care treatment given by a student;

5. not permit a student to perform any invasive procedure or any life-sustaining or critical respiratory care, including therapeutic, diagnostic or palliative procedures, except under the direct and immediate supervision, and in the physical presence of, the supervising therapist and/or physician; and

6. provide and perform periodic evaluation of every patient administered to by a student and make modifications and adjustments in the patient's respiratory care treatment plan, including those portions of the treatment plan assigned to the student.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:748 (June 1993), LR 25:2224 (November 1999), LR 38:62 (January 2012).

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XLV. Medical Professions

Subpart 3. Practice

Chapter 55. Respiratory Therapists

Subchapter A. General Provisions

§5501. Scope of Chapter

A. The rules of this Chapter govern the practice of respiratory care in the state of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical

Examiners, LR 25:2223 (November 1999), LR 38:62 (January 2012).

§5503. General Definitions

A. The definitions set forth in Chapter 25 of these rules shall equally apply to this Chapter, unless the context clearly states otherwise.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 19:747 (June 1993), LR 25:2223 (November 1999), LR 38:62 (January 2012).

Subchapter B. Unauthorized Practice, Exemptions, and Prohibitions

§5505. Unauthorized Practice

A. No person shall engage in the practice of respiratory care in the state of Louisiana unless he has in his possession a current license, a temporary license (examination permit), or a temporary work permit duly issued by the board under Subpart 2 of these rules.

B. No person shall hold himself out to the public, an individual patient, a physician, dentist or podiatrist, or to any insurer or indemnity company or association or governmental authority, nor shall he directly or indirectly identify or designate himself as a licensed respiratory therapist, nor use in connection with his name the letters "LRT" or any other words, letters, abbreviations, insignia, or signs tending to indicate or imply that the person is licensed to practice respiratory therapy in this state, or that the services provided by such person constitute respiratory care, unless such person possesses a current license, a temporary license (examination permit), or a temporary work permit duly issued by the board under Subpart 2 of these rules.

C. A licensed respiratory therapist who is currently certified or registered by and in good standing with the NBRC may identify such credentials with his name or title "Licensed Respiratory Therapist-Certified" or "Licensed Respiratory Therapist-Registered" or the letters "LRT-C" or "LRT-R," respectively.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical

Examiners, LR 25:2224 (November 1999), LR 38:62 (January 2012).

§5507. Exemptions

A. The prohibitions of §5505A of this Chapter shall not apply to a person:

1. employed exclusively by, or at an institution operated by the United States Government when acting within the course and scope of such employment;
2. acting under and within the scope of a license issued by another licensing agency of the state of Louisiana;
3. enrolled in a respiratory care education program and who is designated by a title which clearly indicates his status as a student; or
4. not licensed as a respiratory therapist in accordance with the provisions of these rules but who is employed in a pulmonary laboratory or physician's office to administer treatment confined to that laboratory or office under the direction and immediate supervision of a licensed physician.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended, by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2224 (November 1999), LR 38:62 (January 2012).

§5509. Prohibitions

A. A licensed respiratory therapist shall not:

1. undertake to perform or actually perform any activities described in §2503 of these rules, definition of "Respiratory therapy," except upon a prescription or other order of a physician, advanced registered nurse or physician assistant;
2. administer any drugs or medications except as dispensed by a pharmacist and prescribed by a physician, advanced practice registered nurse or physician assistant; or
3. perform any surgical incisions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 25:2224 (November 1999), LR 38:63 (January 2012).

Subchapter C. Grounds for Administrative Action

§5517. Causes for Administrative Action

A. The board may deny, refuse to issue, renew, or reinstate, or may suspend, revoke or impose probationary conditions and restrictions on the license, temporary license (examination permit), or temporary work permit of any respiratory therapist if the licensee or applicant for license has been guilty of unprofessional conduct which has endangered or is likely to endanger the health, welfare, or safety of the public.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 17:886 (September 1991), LR 25:2225 (November 1999), LR 38:63 (January 2012).

§5519. Causes for Action; Definitions; Unprofessional Conduct

A. As used herein, the term *unprofessional conduct* by a respiratory therapist or applicant shall mean any of the causes set forth in R.S. 37:3358 of the Act.

AUTHORITY NOTE: Promulgated in accordance with R.S.-37:1270(B)(6) and 37:3351-3361.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 12:767 (November 1986), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 17:886 (September 1991), LR 25:2225 (November 1999), LR 38:63 (January 2012)