



Respiratory Care Advisory Council Minutes for July 10, 2018

The meeting was called to order at approximately 2:05 pm on Tuesday, July 10, 2018.

Council members present: Ronan Factora, MD; Amy Rodenhausen, RRT; Sanja Keller, RRT; Roy Neely, RRT; Margaret Traband.

Staff members present: Nathan Smith, Donald Davis, and Tessie Pollock.

Guests: Susan Ciarlariello, David Corey.

Approval of Minutes from the May 8, 2018 Council meeting

All council members present voted to approve the May meeting minutes as presented.

Standards for Continuing Education Programs for Licensure Renewal

Status of Recommendation Regarding What Constitutes “Relevant College Credit”

Mr. Smith informed the Advisory Council that their recommendation from the May 8, 2018 meeting clarifying what constitutes “relevant college credit” in Ohio Administrative Code 4761-9-05(A)(1) was approved by the Licensure Committee and the full Board at the June 13, 2018 Board meeting. A written response containing the recommendation and the Board’s approved response was sent out to the individual who submitted the inquiry.

Video Script for Ohio Respiratory Care Law and Professional Ethics Course Produced by Medical Board Communications Staff

Ms. Pollock presented the video script of the Ohio respiratory care law and professional ethics course. This script will be turned into an interactive video in which licensees will complete a quiz at the end of the video during their next renewal cycle. This course will be available on the Medical Board’s website and will replace the two online courses that were previously on the Respiratory Care Board’s website. Respiratory Care law and professional ethics courses offered by outside groups and approved by the Board will also still be an option for licensees to complete this specific continuing education requirement. The council members communicated a few minor changes to the course and quiz to Ms. Pollock. All council members present voted to recommend that the Board adopt the video script as the Respiratory Care Law and Professional Ethics continuing education course that will be offered by the Board on its website.

Scope of practice inquiries

Respiratory therapist triage of patients in the emergency room

The council continued its discussion of whether it is within the scope of practice for a respiratory therapist to triage patients in the emergency room from the May 8, 2018 council meeting. Mr. Smith provided additional historical information from the former Ohio Respiratory Care Board requested by the council as well as outside source information from the American Association for Respiratory Care. Council members discussed whether triage should extend beyond triage for cardiopulmonary impairment.

Several council members noted that the education provided to respiratory care students exceeds the R.C. 4761.01(A) definition of respiratory care and the practice of respiratory care. Consensus was reached on the following recommendation approved by all members: **Triage associated with the evaluation and treatment of conditions involving cardiopulmonary impairment is within the scope of practice of a respiratory therapist. Triage is a team approach and respiratory therapists would be an integral part of managing triage more broadly with a team addressing any patient that would be seen in any emergency context acute or subacute.**

Changing Tracheostomy Tube in an Acute Setting

An additional inquiry was submitted seeking written clarification on whether a Registered Respiratory Therapist can change a tracheostomy tube in an acute setting under their scope of practice. Council members discussed that changing a tracheostomy tube fits within the R.C. 4761.01(A)(2) definition of the practice of respiratory care, specifically “applying, maintaining, and instructing in the use of artificial airways . . . employed in the treatment of cardiopulmonary impairment”. Council members reached consensus and unanimously voted to recommend the following response: **Yes, it is within the scope of practice of a registered respiratory therapist to change a tracheostomy tube in an acute setting. Best practices would include training and annual competency in this area.**

Additional Topics

Mr. Smith provided an overview of the open meetings and public records laws to the advisory council as information for council members to be aware of as they operate as an advisory council.

Ms. Keller requested position statements from the previous Ohio Respiratory Care Board. Ms. Keller also inquired about communication to respiratory therapists generally about relevant news and specifically when the ethics course will be available. Ms. Pollock addressed this question and provided information regarding the types of communication available to inform respiratory care licensees including the Medical Board newsletter, targeted emails to licensees, and the Medical Board website.

The Respiratory Care Advisory Council meeting was adjourned at approximately 3:15pm on July 10, 2018