



CARL T.C. GUTIERREZ
GOVERNOR OF GUAM

JAN 22 2001

The Honorable Joanne M. S. Brown
Legislative Secretary
I Mina'Bente Singko na Liheslaturan Guåhan
Twenty-Fifth Guam Legislature
Suite 200
130 Aspinal Street
Hagåtña, Guam 96910

OFFICE OF THE LEGISLATIVE SECRETARY	
ACKNOWLEDGMENT RECEIPT	
Received By	
Time	10:38 a.m.
Date	22 Jan 2001

Dear Legislative Secretary Brown:

Enclosed please find Bill No. 511 (COR), "AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF THE RESPIRATORY THERAPY PROFESSION," which I have signed into law as **Public Law No. 25-190**.

In January 1999, the National Board for Respiratory Care, Inc. informed the members of this association that the Certified Respiratory Therapy Technician credential will formally change to "Certified Respiratory Therapist". The change in nomenclature reflects the two levels of respiratory therapy care being practiced, and denotes the examination needed to enter the profession at the entry levels of practice.

The attached legislation updates Guam statutes to be consistent with the licensing standards in the profession.

Very truly yours,

Carl T. C. Gutierrez
I Maga'Lahen Guåhan
Governor of Guam

Attachment: copy attached for signed bill or overridden bill
original attached for vetoed bill

cc: The Honorable Antonio R. Unpingco
Speaker

0059

MINA'BENTE SINGKO NA LIHESLATURAN GUAHAN
2000 (SECOND) Regular Session

CERTIFICATION OF PASSAGE OF AN ACT TO I MAGA'LAHEN GUAHAN

This is to certify that Bill No. 511 (COR), "AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF THE RESPIRATORY THERAPY PROFESSION," was on the 20th day of December 2000, duly and regularly passed.



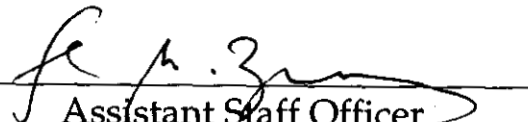
ANTONIO R. UNPINGCO
Speaker

Attested:




JOANNE M.S. BROWN
Senator and Legislative Secretary

This Act was received by *I Maga'lahaen Guahan* this 27th day of December, 2000,
at 8:40 o'clock A.M.



Assistant Staff Officer
Maga'lahi's Office

APPROVED:



CARL T. C. GUTIERREZ
I Maga'lahaen Guahan

Date: 1-22-01

Public Law No. 25-180

MINA'BENTE SINGKO NA LIHESLATURAN GUÅHAN
2000 (SECOND) Regular Session

Bill No. 511 (COR)

As amended by the Committee on
Health, Human Services and
Chamorro Heritage and amended.

Introduced by:

S. A. Sanchez, II
F. B. Aguon, Jr.
E. C. Bermudes
A. C. Blaz
J. M.S. Brown
E. B. Calvo
M. G. Camacho
Mark Forbes
L. F. Kasperbauer
A. C. Lamorena, V
C. A. Leon Guerrero
K. S. Moylan
V. C. Pangelinan
J. C. Salas
A. R. Unpingco

**AN ACT TO AMEND §§122001, 122002, 122004 AND
122005 OF TITLE 10 OF THE GUAM CODE
ANNOTATED, RELATIVE TO THE REGULATION OF
THE RESPIRATORY THERAPY PROFESSION.**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1. Legislative Findings and Intent.** The purpose of this Act is
3 to more clearly define, regulate and control the practice of respiratory therapy

1 (a) providing and monitoring therapeutic
2 administration of medical gases, aerosolized
3 humidification and pharmacological agents related to
4 respiratory care procedures, but *not* including
5 administration of anesthesia;

6 (b) carrying out therapeutic application and
7 monitoring of mechanical ventilator support;

8 (c) providing cardiopulmonary resuscitation
9 and maintenance of natural airways and insertion, and
10 maintenance of artificial airways;

11 (d) assessing and monitoring signs, symptoms
12 and general behavior relating to, respiratory care
13 treatment or evaluation for treatment and diagnostic
14 testing, including determination of whether the signs,
15 symptoms, reactions, behavior or general response
16 exhibit abnormal characteristics;

17 (e) obtaining physiological specimens and
18 interpreting physiological data including:

19 (1) analyzing arterial and venous blood
20 gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes,
23 pressures, and flows;

24 (4) testing pulmonary function;

1 (5) testing and studying the
2 cardiopulmonary system;

3 (6) diagnostic testing of breathing
4 patterns related to sleeping disorders;

5 (7) assisting hemodynamic monitoring
6 and support of the cardiopulmonary system;

7 (8) assessing and making suggestions for
8 modifications in the treatment regimen based on
9 abnormalities, protocols or changes in patient
10 response to respiratory care treatment;

11 (9) providing cardiopulmonary
12 rehabilitation, including respiratory care-related
13 educational components, postural drainage,
14 chest physiotherapy, breathing exercises,
15 aerosolized administration of medications, and
16 equipment use and maintenance;

17 (10) instructing patients and their families
18 in techniques for the prevention, alleviation and
19 rehabilitation of deficiencies, abnormalities and
20 diseases of the cardiopulmonary system;

21 (11) assisting with management of the
22 cardiopulmonary system and medical
23 equipment during off-Guam transports;

24 (12) transcribing and implementing
25 physician orders for respiratory care services;

1 (f) services within the training and experience
2 of the practitioner; *and*

3 (g) services within the parameters of the laws,
4 rules and standards of the facilities in which the
5 respiratory care practitioner practices.

6 (4) Respiratory care services provided by a licensed
7 Registered Respiratory Therapist, whether delivered in a
8 health care facility or the patient's residence, must *not* be
9 provided, *except* upon referral from a physician.

10 **(b) Licensed Certified Respiratory Therapists.**

11 (1) A licensed Certified Respiratory Therapist is *not*
12 an independent practitioner, and works under the indirect
13 supervision of the licensed Registered Respiratory Therapist.

14 (2) A licensed Certified Respiratory Therapist will
15 follow the treatment program set by the licensed Registered
16 Respiratory Therapist.

17 (3) The practice of respiratory care by a licensed
18 Certified Respiratory Therapist includes, but is *not* limited
19 to, the following services:

20 (a) providing and monitoring therapeutic
21 administration of medical gases, aerosolized
22 humidification, and pharmacological agents related to
23 respiratory care procedures, but *not* including
24 administration of anesthesia;

6

I MINA' BENTE SINGKO NA LIHESLATURAN GUAHAN

2000 (SECOND) Regular Session

Date: 12/20/00

VOTING SHEET

SBill No. 511 (COR)

Resolution No. _____

Question: _____

NAME	YEAS	NAYS	NOT VOTING/ ABSTAINED	OUT DURING ROLL CALL	ABSENT
AGUON, Frank B., Jr.	✓				
BERMUDES, Eulogio C.	✓				
BLAZ, Anthony C.	✓				
BROWN, Joanne M.S.	✓				
CALVO, Eduardo B.	✓				
CAMACHO, Marcel G.	✓				
FORBES, Mark	✓				
KASPERBAUER, Lawrence F.	✓				
LAMORENA, Alberto C., V	✓				
LEON GUERRERO, Carlotta A.					✓
MOYLAN, Kaleo Scott	✓				
PANGELINAN, Vicente C.	✓				
SALAS, John C.	✓				
SANCHEZ, Simon A., II	✓				
UNPINGCO, Antonio R.	✓				

TOTAL 14 0 0 0 1

CERTIFIED TRUE AND CORRECT:

Clerk of the Legislature

* 3 Passes = No vote
EA = Excused Absence

I MINA' BENTE SINGKO NA LIHESLATURA, GUÅHAN
Committee on Health, Human Services and Chamorro Heritage
Kumiten Salut, Setbision Tinaotao yan Irensian Chamoru
Sinadot Simon A. Sanchez II, Ge'Hilo'

December 12, 2000

Speaker Antonio R. Unpingco
I Mina' Bente Singko Na Liheslaturan Guåhan
155 Hesler Street
Hagåtña, Guåhan 96910

Dear Mr. Speaker:

I Kumiten Salut, Setbision Tinaotao yan Irensian Chamoru has completed its evaluation of Bill No. 511 and hereby issues the enclosed Committee Report.

A public hearing was held on the measure on December 7, 2000.

Committee Members voted as follows:

To pass	7
Not to pass	—
Abstain	—
Inactive File	—

Consequently, the Committee submits its recommendation to "DO PASS" Bill No. 511, as amended by the Committee on Health, Human Services and Chamorro Heritage.

Your kind attention to this matter is immensely appreciated.

Saina Ma'åse' yan Magof Ha'ånen Yu'os,


SIMON A. SANCHEZ II

1 terminology which encompasses all persons who practice, and assist with,
2 respiratory services.

3 Section 2. §122001 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
4 of the Guam Code Annotated is hereby *amended* to read as follows:

5 "ARTICLE 20.

6 RESPIRATORY THERAPY.

7 §122001. **Definitions.** For purposes of this Article, the following
8 words and phrases ~~have been~~ are defined to mean:

9 (a) ~~'Licensed respiratory therapist' ('Therapist')~~ 'Licensed
10 Registered Respiratory Therapist (RRT)' means a person who is
11 currently a 'Registered Respiratory Therapist' credentialed by the
12 National Board for Respiratory Care (NBRC), or the equivalent
13 thereof, and who is currently and validly licensed to practice
14 respiratory therapy on Guam.

15 (b) ~~'Respiratory technician'~~ 'Licensed Certified Respiratory
16 Therapist' means ~~an individual who assists in the treatment of~~
17 ~~patients under the indirect supervision of a licensed respiratory~~
18 ~~therapist~~ a person who is currently a 'Certified Respiratory
19 Therapist (CRT)' (formerly 'Certified Respiratory Therapy Technician
20 (CRRT)') credentialed by the National Board for Respiratory Care
21 (NBRC), or the equivalent thereof as accepted by the NBRC, and
22 who assists in the treatment of patients under the indirect
23 supervision of a licensed Registered Respiratory Therapist.

24 (c) *'Respiratory therapy'* means the management of pulmonary
25 diseases with medicines and machines.

1 (d) 'Consultation' means the communication regarding the
2 patient's evaluation and proposed treatment plan with an
3 authorized health care practitioner.

4 (e) 'Authorized health care practitioner' includes licensed
5 physicians, osteopathic physicians, chiropractors, podiatrists and
6 dentists; provided, however, that nothing herein shall be
7 construed as altering the scope of practice of such practitioners as
8 defined in their respective licensure regulations."

9 Section 3. §122002 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
10 of the Guam Code Annotated is hereby *amended* to read as follows:

11 "§122002. **Qualifications for licensure.** Applicants for a license to
12 practice ~~physical~~ respiratory therapy on Guam must complete and file
13 an application with the Board. Applicants must have *all* of the following
14 qualifications:

15 ~~(1) a bachelor's degree in respiratory therapy from an~~
16 ~~accredited school of respiratory therapy in the United States or~~
17 ~~one (!) year experience as a registered respiratory therapist and~~
18 ~~graduation from a respiratory therapist program approved by the~~
19 ~~American Medical Association ('AMA') with an associate degree~~
20 ~~in respiratory therapy;~~

21 ~~(2) transcripts from an approved school of respiratory~~
22 ~~therapy, evidencing the successful completion of a four (4) year~~
23 ~~degree program;~~

24 ~~(3) current certification as a Registered Respiratory Therapist~~
25 ~~by the National Board for Respiratory Care; and~~

1 ~~(4) the applicant must have passed an examination given by~~
2 ~~the Professional Examination Service in the U.S. or one (1) of its~~
3 ~~territories, and have been granted a license.~~

4 (1) Licensed Registered Respiratory Therapist (RRT):

5 (a) transcripts from an approved school of respiratory
6 therapy, evidencing the successful completion of a two (2)
7 year program, resulting in a minimum of an Associate's
8 Degree in Respiratory Therapy; or

9 (b) current certification as a Registered Respiratory
10 Therapist by the National Board for Respiratory Care; or

11 (c) have obtained Registered Respiratory Therapist
12 status from the National Board for Respiratory Care prior to
13 January 1, 2004.

14 (2) Licensed Certified Respiratory Therapist (CRT) or
15 Certified Respiratory Therapy Technician (CRRT):

16 (a) transcripts from an approved school of respiratory
17 therapy, evidencing the successful completion of a one (1)
18 year program; and

19 (b) current certification as a Certified Respiratory
20 Therapist by the National Board for Respiratory Care; or

21 (c) have obtained certification as a Certified
22 Respiratory Therapy Technician by the National Board of
23 Respiratory Care before July 1, 1999."

24 **Section 4.** §122004 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
25 of the Guam Code Annotated is hereby *amended* to read as follows:

1 "**§122004. Scope of Practice. (a) Registered Respiratory Therapists.** The
2 practice of respiratory care includes, but is not limited to, the services set forth
3 in the law. The licensed Registered Respiratory Therapist provides these
4 services for the assessment, treatment, management, evaluation, and care of
5 patients with deficiencies, abnormalities, and diseases of the cardiopulmonary
6 system with guidance from a qualified medical director and pursuant to a
7 referral from a physician who has medical responsibility for the patient.

8 (1) A person licensed under this Chapter as a Respiratory
9 Therapist may evaluate and treat human ailments by respiratory
10 therapy according to a physician's consultation. The evaluation shall be
11 the Therapist's assessment of a patient's problem and shall include a
12 respiratory therapy diagnosis. If a patient's problem is outside the scope
13 of Therapist, the therapist shall consult with a person licensed to
14 practice medicine. If a patient, at any time, requires further medical
15 evaluation or diagnostic testing, that patient shall be referred to an
16 authorized health care practitioner.

17 (2) Direct referral of a patient by an authorized health care
18 practitioner may be by telephone, letter or in person; provided,
19 however, if the instructions are oral, the Therapist may administer
20 treatment accordingly, but must make a record describing the nature of
21 the treatment, the date administered, the name of the person receiving
22 the treatment and the name of the referring authorized health care
23 practitioner.

1 (3) The practice of respiratory care by a licensed Registered
2 Respiratory Therapist includes, but is not limited to, the following
3 services:

4 (a) providing and monitoring therapeutic administration of
5 medical gases, aerosolized humidification, and pharmacological
6 agents related to respiratory care procedures, but not including
7 administration of anesthesia;

8 (b) carrying out therapeutic application and monitoring of
9 mechanical ventilator support;

10 (c) providing cardiopulmonary resuscitation and
11 maintenance of natural airways and insertion and maintenance of
12 artificial airways;

13 (d) assessing and monitoring signs, symptoms, and general
14 behavior relating to, respiratory care treatment or evaluation for
15 treatment and diagnostic testing, including determination of
16 whether the signs, symptoms, reactions, behavior, or general
17 response exhibit abnormal characteristics;

18 (e) obtaining physiological specimens and interpreting
19 physiological data including:

20 (1) analyzing arterial and venous blood gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes, pressures, and
23 flows;

24 (4) testing pulmonary function;

- 1 (5) testing and studying the cardiopulmonary system;
2 and
3 (6) diagnostic testing of breathing patterns related to
4 sleeping disorders;
5 (7) assisting hemodynamic monitoring and support of
6 the cardiopulmonary system;
7 (8) assessing and making suggestions for
8 modifications in the treatment regimen based on
9 abnormalities, protocols, or changes in patient response to
10 respiratory care treatment;
11 (9) providing cardiopulmonary rehabilitation
12 including respiratory care-related educational components,
13 postural drainage, chest physiotherapy, breathing exercises,
14 aerosolized administration of medications, and equipment
15 use and maintenance;
16 (10) instructing patients and their families in
17 techniques for the prevention, alleviation and rehabilitation
18 of deficiencies, abnormalities, and diseases of the
19 cardiopulmonary system;
20 (11) assisting with management of the
21 cardiopulmonary system and medical equipment during off-
22 island transports;
23 (12) transcribing and implementing physician orders
24 for respiratory care services;

1 (f) services within the training and experience of the
2 practitioner;

3 (g) services within the parameters of the laws, rules and
4 standards of the facilities in which the respiratory care practitioner
5 practices.

6 (4) Respiratory care services provided by a licensed Registered
7 Respiratory Therapist, whether delivered in a health care facility or the
8 patient's residence, must not be provided except upon referral from a
9 physician.

10 **(b) Licensed Certified Respiratory Technician Therapists.**

11 (1) A ~~respiratory therapy technician~~ licensed Certified Respiratory
12 Therapist is *not* an independent practitioner, and works under the
13 indirect supervision of the licensed ~~respiratory therapist~~ Registered
14 Respiratory Therapist.

15 (2) A licensed ~~respiratory technician~~ Certified Respiratory
16 Therapist will follow the treatment program set by the licensed
17 ~~respiratory therapist~~ Registered Respiratory Therapist.

18 (3) ~~A respiratory technician shall have the minimum qualification~~
19 ~~of a certificate, or document showing graduation from a Respiratory~~
20 ~~Therapy Technician Program approved by the American Medical~~
21 ~~Association.~~

22 (4) ~~Current certification as a Certified Respiratory Therapy~~
23 ~~Technician by the National Board of Respiratory Care.~~

1 (3) The practice of respiratory care by a licensed Certified
2 Respiratory Therapist includes, but is not limited to, the following
3 services:

4 (a) providing and monitoring therapeutic administration of
5 medical gases, aerosolized humidification, and pharmacological
6 agents related to respiratory care procedures, but not including
7 administration of anesthesia;

8 (b) carrying out therapeutic application and monitoring of
9 mechanical ventilator support;

10 (c) providing cardiopulmonary resuscitation and
11 maintenance of natural airways and insertion and maintenance of
12 artificial airways;

13 (d) assessing and monitoring signs, symptoms, and general
14 behavior relating to, respiratory care treatment or evaluation for
15 treatment and diagnostic testing, including determination of
16 whether the signs, symptoms, reactions, behavior, or general
17 response exhibit abnormal characteristics;

18 (e) obtaining physiological specimens and interpreting
19 physiological data including:

20 (1) analyzing arterial and venous blood gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes, pressures, and
23 flows;

24 (4) testing pulmonary function;

1 (5) assessing and making suggestions for
2 modifications in the treatment regimen based on
3 abnormalities, protocols, or changes in patient response to
4 respiratory care treatment;

5 (6) providing cardiopulmonary rehabilitation
6 including respiratory care-related educational components,
7 postural drainage, chest physiotherapy, breathing exercises,
8 aerosolized administration of medications, and equipment
9 use and maintenance;

10 (7) instructing patients and their families in techniques
11 for the prevention, alleviation and rehabilitation of
12 deficiencies, abnormalities, and diseases of the
13 cardiopulmonary system;

14 (8) transcribing and implementing physician orders for
15 respiratory care services;

16 (f) services within the training and experience of the
17 practitioner;

18 (g) services within the parameters of the laws, rules and
19 standards of the facilities in which the respiratory care practitioner
20 practices.

21 (4) Respiratory care services provided by a licensed Registered
22 Respiratory Therapist, whether delivered in a health care facility or the
23 patient's residence, must not be provided except upon referral from a
24 physician."

1 Section 5. §122005 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
2 of the Guam Code Annotated is hereby *amended* to read as follows:

3 **"§122005. Supportive Personnel; Delineation of Responsibilities.**

4 A ~~licensed respiratory therapist~~ Registered Respiratory Therapist
5 is professionally and legally responsible for patient care given by
6 supportive personnel under the ~~respiratory therapist's~~ Registered
7 Respiratory Therapist's supervision. If a ~~licensed respiratory therapist~~
8 Registered Respiratory Therapist fails to adequately supervise patient
9 care given by supportive personnel, the Board may take disciplinary
10 action against the licensee. Supervision of supportive personnel requires
11 that the ~~licensed respiratory therapist~~ Registered Respiratory Therapist
12 perform or supervise the following activities:

13 (a) provide initial evaluation of the patient;

14 (b) develop a treatment plan and program, including
15 treatment goals;

16 (c) assess the competence of supportive personnel to
17 perform assigned tasks;

18 (d) select and delegate appropriate portions of the treatment
19 plan and program;

20 (e) direct and supervise supportive personnel in delegated
21 functions;

22 (f) re-evaluate the patient and adjust the treatment plan as
23 acceptable respiratory therapy practice requires, consistent with
24 the delegated health care task;

1 (g) document sufficient in-service training and periodic
2 evaluation of performance to assure safe performance of the tasks
3 assigned to supportive personnel; *and*
4 (h) provide discharge planning."

Clerk of the Legislature

MINA'BENTE SINGKO NA LIHESLATURAN GUAMAN
2000 (SECOND) Regular Session RECEIPT

Bill No. 511 (COR)

Received by: SP
Time: 4:30 P
Date: 11/17/00

Introduced by:

S. A. Sanchez, II SASII

AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF ARTICLE 20 OF CHAPTER 12, DIVISION 1, PART 1 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF RESPIRATORY THERAPY PROFESSION.

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. Legislative findings and intent. The purpose of this Act is
3 to more clearly define, regulate and control the practice of respiratory therapy
4 services on Guam to better serve the public interest. Because these services
5 play an important part in the attainment and maintenance of health, it is in
6 the public's best interest that persons who present themselves as providers of
7 services in these areas meet specific requirements and qualifications.

8 Licensure requirements for respiratory therapists were originally
9 enacted in Public Law 24-329. This proposed revision will clarify incomplete
10 and inaccurate information in the current law and use terminology which
11 encompasses all persons who practice, and assist with, respiratory services.

1 Section 2. §122001 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
2 of the Guam Code Annotated is hereby *amended* to read as follows:

3 "ARTICLE 20.

4 RESPIRATORY THERAPY.

5 §122001. Definitions. For purposes of this Article, the following
6 words and phrases have been are defined to mean:

7 (a) ~~'Licensed respiratory therapist' ('Therapist')~~ 'Licensed
8 Registered Respiratory Therapist (RRT)' means a person who is
9 currently a 'Registered Respiratory therapist' credentialed by the
10 National Board for Respiratory Care (NBRC), or the equivalent
11 thereof, and who is currently and validly licensed to practice
12 respiratory therapy on Guam.

13 (b) ~~'Respiratory technician'~~ 'Licensed Certified Respiratory
14 Therapist' means ~~an individual who assists in the treatment of~~
15 ~~patients under the indirect supervision of a licensed respiratory~~
16 ~~therapist~~ a person who is currently a 'Certified Respiratory
17 Therapist' credentialed by the National Board for Respiratory
18 Care (NBRC), or the equivalent thereof as accepted by the NBRC,
19 and who assists in the treatment of patients under the indirect
20 supervision of a licensed Registered Respiratory Therapist.

21 (c) ~~'Respiratory therapy'~~ means the management of pulmonary
22 diseases with medicines and machines.

23 (d) ~~'Consultation'~~ means the communication regarding the
24 patient's evaluation and proposed treatment plan with an
25 authorized health care practitioner.

1 (e) 'Authorized health care practitioner' includes licensed
2 physicians, osteopathic physicians, chiropractors, podiatrists and
3 dentists; provided, however, that nothing herein shall be
4 construed as altering the scope of practice of such practitioners as
5 defined in their respective licensure regulations."

6 Section 3. §122002 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
7 of the Guam Code Annotated is hereby *amended* to read as follows:

8 "**§122002. Qualifications for licensure.** Applicants for a license to
9 practice ~~physical~~ respiratory therapy on Guam must complete and file
10 an application with the Board. Applicants must have *all* of the following
11 qualifications:

12 ~~(1) a bachelor's degree in respiratory therapy from an~~
13 ~~accredited school of respiratory therapy in the United States or~~
14 ~~one (!) year experience as a registered respiratory therapist and~~
15 ~~graduation from a respiratory therapist program approved by the~~
16 ~~American Medical Association ('AMA') with an associate degree~~
17 ~~in respiratory therapy;~~

18 ~~(2) transcripts from an approved school of respiratory~~
19 ~~therapy, evidencing the successful completion of a four (4) year~~
20 ~~degree program;~~

21 ~~(3) current certification as a Registered Respiratory Therapist~~
22 ~~by the National Board for Respiratory Care; and~~

23 ~~(4) the applicant must have passed an examination given by~~
24 ~~the Professional Examination Service in the U.S. or one (1) of its~~
25 ~~territories, and have been granted a license.~~

1 (1) Licensed Registered Respiratory Therapist (RRT):

2 (a) transcripts from an approved school of respiratory
3 therapy, evidencing the successful completion of a two (2)
4 year program, resulting in a minimum of an Associate's
5 Degree in Respiratory Therapy; or

6 (b) current certification as a Registered Respiratory
7 Therapist by the National Board for Respiratory Care; or

8 (c) have obtained Registered Respiratory Therapist
9 status from the National Board for Respiratory Care prior to
10 January 1, 2001.

11 (2) Licensed Certified Respiratory Therapist (CRT):

12 (a) transcripts from an approved school of respiratory
13 therapy, evidencing the successful completion of a one (1)
14 year program;; and

15 (b) current certification as a Certified Respiratory
16 Therapist by the National Board for Respiratory Care."

17 Section 4. §122004 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
18 of the Guam Code Annotated is hereby *amended* to read as follows:

19 "**§122004. Scope of Practice. (a) Registered Respiratory Therapists.** The
20 practice of respiratory care includes, but is not limited to, the services set forth
21 in the law. The licensed Registered Respiratory Therapist provides these
22 services for the assessment, treatment, management, evaluation, and care of
23 patients with deficiencies, abnormalities, and diseases of the cardiopulmonary
24 system with guidance from a qualified medical director and pursuant to a
25 referral from a physician who has medical responsibility for the patient.

1 (1) A person licensed under this Chapter as a Respiratory
2 Therapist may evaluate and treat human ailments by respiratory
3 therapy according to a physician's consultation. The evaluation shall be
4 the Therapist's assessment of a patient's problem and shall include a
5 respiratory therapy diagnosis. If a patient's problem is outside the scope
6 of Therapist, the therapist shall consult with a person licensed to
7 practice medicine. If a patient, at any time, requires further medical
8 evaluation or diagnostic testing, that patient shall be referred to an
9 authorized health care practitioner.

10 (2) Direct referral of a patient by an authorized health care
11 practitioner may be by telephone, letter or in person; provided,
12 however, if the instructions are oral, the Therapist may administer
13 treatment accordingly, but must make a record describing the nature of
14 the treatment, the date administered, the name of the person receiving
15 the treatment and the name of the referring authorized health care
16 practitioner.

17 (3) The practice of respiratory care by a licensed Registered
18 Respiratory Therapist includes, but is not limited to, the following
19 services:

20 (a) providing and monitoring therapeutic administration of
21 medical gases, aerosolized humidification, and pharmacological
22 agents related to respiratory care procedures, but not including
23 administration of anesthesia;

24 (b) carrying out therapeutic application and monitoring of
25 mechanical ventilator support;

1 (c) providing cardiopulmonary resuscitation and
2 maintenance of natural airways and insertion and maintenance of
3 artificial airways;

4 (d) assessing and monitoring signs, symptoms, and general
5 behavior relating to, respiratory care treatment or evaluation for
6 treatment and diagnostic testing, including determination of
7 whether the signs, symptoms, reactions, behavior, or general
8 response exhibit abnormal characteristics;

9 (e) obtaining physiological specimens and interpreting
10 physiological data including:

11 (1) analyzing arterial and venous blood gases;

12 (2) assessing respiratory secretions;

13 (3) measuring ventilatory volumes, pressures, and
14 flows;

15 (4) testing pulmonary function;

16 (5) testing and studying the cardiopulmonary system;

17 and

18 (6) diagnostic testing of breathing patterns related to
19 sleeping disorders;

20 (7) assisting hemodynamic monitoring and support of
21 the cardiopulmonary system;

22 (8) assessing and making suggestions for
23 modifications in the treatment regimen based on
24 abnormalities, protocols, or changes in patient response to
25 respiratory care treatment;

1 (9) providing cardiopulmonary rehabilitation
2 including respiratory care-related educational components,
3 postural drainage, chest physiotherapy, breathing exercises,
4 aerosolized administration of medications, and equipment
5 use and maintenance;

6 (10) instructing patients and their families in
7 techniques for the prevention, alleviation and rehabilitation
8 of deficiencies, abnormalities, and diseases of the
9 cardiopulmonary system;

10 (11) assisting with management of the
11 cardiopulmonary system and medical equipment during off-
12 island transports;

13 (12) transcribing and implementing physician orders
14 for respiratory care services;

15 (f) services within the training and experience of the
16 practitioner;

17 (g) services within the parameters of the laws, rules and
18 standards of the facilities in which the respiratory care practitioner
19 practices.

20 (4) Respiratory care services provided by a licensed Registered
21 Respiratory Therapist, whether delivered in a health care facility or the
22 patient's residence, must not be provided except upon referral from a
23 physician.

24 **(b) Licensed Certified Respiratory Technician Therapists.**

1 (1) A ~~respiratory therapy technician~~ licensed Certified Respiratory
2 Therapist is *not* an independent practitioner, and works under the
3 indirect supervision of the licensed ~~respiratory therapist~~ Registered
4 Respiratory Therapist.

5 (2) A licensed ~~respiratory technician~~ Certified Respiratory
6 Therapist will follow the treatment program set by the licensed
7 ~~respiratory therapist~~ Registered Respiratory Therapist.

8 (3) ~~A respiratory technician shall have the minimum qualification~~
9 ~~of a certificate, or document showing graduation from a Respiratory~~
10 ~~Therapy Technician Program approved by the American Medical~~
11 ~~Association.~~

12 (4) ~~Current certification as a Certified Respiratory Therapy~~
13 ~~Technician by the National Board of Respiratory Care.~~

14 (3) The practice of respiratory care by a licensed Certified
15 Respiratory Therapist includes, but is not limited to, the following
16 services:

17 (a) providing and monitoring therapeutic administration of
18 medical gases, aerosolized humidification, and pharmacological
19 agents related to respiratory care procedures, but not including
20 administration of anesthesia;

21 (b) carrying out therapeutic application and monitoring of
22 mechanical ventilator support;

23 (c) providing cardiopulmonary resuscitation and
24 maintenance of natural airways and insertion and maintenance of
25 artificial airways;

1 (d) assessing and monitoring signs, symptoms, and general
2 behavior relating to, respiratory care treatment or evaluation for
3 treatment and diagnostic testing, including determination of
4 whether the signs, symptoms, reactions, behavior, or general
5 response exhibit abnormal characteristics;

6 (e) obtaining physiological specimens and interpreting
7 physiological data including:

8 (1) analyzing arterial and venous blood gases;

9 (2) assessing respiratory secretions;

10 (3) measuring ventilatory volumes, pressures, and
11 flows;

12 (4) testing pulmonary function;

13 (5) assessing and making suggestions for
14 modifications in the treatment regimen based on
15 abnormalities, protocols, or changes in patient response to
16 respiratory care treatment;

17 (6) providing cardiopulmonary rehabilitation
18 including respiratory care-related educational components,
19 postural drainage, chest physiotherapy, breathing exercises,
20 aerosolized administration of medications, and equipment
21 use and maintenance;

22 (7) instructing patients and their families in techniques
23 for the prevention, alleviation and rehabilitation of
24 deficiencies, abnormalities, and diseases of the
25 cardiopulmonary system;

1 (8) transcribing and implementing physician orders for
2 respiratory care services;

3 (f) services within the training and experience of the
4 practitioner;

5 (g) services within the parameters of the laws, rules and
6 standards of the facilities in which the respiratory care practitioner
7 practices.

8 (4) Respiratory care services provided by a licensed Registered
9 Respiratory Therapist, whether delivered in a health care facility or the
10 patient's residence, must not be provided except upon referral from a
11 physician."

12 Section 5. §122005 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
13 of the Guam Code Annotated is hereby *amended* to read as follows:

14 "**§122005. Supportive Personnel; Delineation of Responsibilities.**

15 A licensed respiratory therapist Registered Respiratory Therapist
16 is professionally and legally responsible for patient care given by
17 supportive personnel under the respiratory therapist's Registered
18 Respiratory Therapist's supervision. If a licensed respiratory therapist
19 Registered Respiratory Therapist fails to adequately supervise patient
20 care given by supportive personnel, the Board may take disciplinary
21 action against the licensee. Supervision of supportive personnel requires
22 that the licensed respiratory therapist Registered Respiratory Therapist
23 perform or supervise the following activities:

24 (a) provide initial evaluation of the patient;

1 (b) develop a treatment plan and program, including
2 treatment goals;

3 (c) assess the competence of supportive personnel to
4 perform assigned tasks;

5 (d) select and delegate appropriate portions of the treatment
6 plan and program;

7 (e) direct and supervise supportive personnel in delegated
8 functions;

9 (f) re-evaluate the patient and adjust the treatment plan as
10 acceptable respiratory therapy practice requires, consistent with
11 the delegated health care task;

12 (g) document sufficient in-service training and periodic
13 evaluation of performance to assure safe performance of the tasks
14 assigned to supportive personnel; *and*

15 (h) provide discharge planning."
16



NBRC

The National Board for Respiratory Care, Inc.

**PLEASE READ
IMPORTANT NOTICE**

DATE: January 1999

TO: All Credentialed Members

FROM: Steven K. Bryant, Executive Director

SUBJECT: Change in CRTT Credential Designation

This is to officially inform you that effective July 1, 1999 the name of the Certified Respiratory Therapy Technician credential will change to "Certified Respiratory Therapist," and the acronym used to identify this credential will change from CRTT to "CRT." This action was approved by unanimous vote of the NBRC's Board of Trustees in May 1998. The Board made this decision based on national job analysis research which indicates that respiratory care is practiced by two levels of personnel, most appropriately referred to as entry level and advanced respiratory therapists (CRT and RRT).

All current CRTTs will be automatically recognized as CRTs by the NBRC on July 1 and may begin using the new CRT designation to denote that they have successfully completed the certification examination, or its equivalent, for entry into the profession. The NBRC will continue to recognize CRTT certificates issued before July 1, 1999 as valid and equivalent to CRT credentials awarded after July 1. However, current CRTTs may also obtain replacement certificates, indicating achievement of the CRT credential, if they desire to do so. A form for this purpose is provided on the **reverse side** of this letter.

CRTTs who do not wish to have a replacement certificate may use this letter along with their original CRTT certificates as official evidence that the Board of Trustees considers them to be CRTs as of July 1. If you have any questions regarding your national credentials, please contact the Executive Office at any time.

**PLEASE READ
IMPORTANT NOTICE**



NBRC Annual Renewal

National Board for Respiratory Care, Inc.
8310 Nieman Road
Lenexa, Kansas 66214-1579
(913) 599-4200
E-mail: nbrc-info@nbrc.org

January 1999

Dear Colleague:

I am writing to encourage you to invest in your professional future by renewing your active membership in the national groups holding the CRTT, RRT, CPFT, RPFT and/or Perinatal/Pediatric Respiratory Care Specialist credentials. Your support enables the NBRC to maintain high credentialing standards and continue to assure the value and meaning of your credentials. Your NBRC credentials likely allow you to earn a higher salary than you might otherwise earn, and they enable you to enjoy reciprocity when moving from one state with licensure to another.

Benefits of active membership include preferential fees for credential verification and recredentialing examinations. You will also receive the 1999 *NBRC Directory* and a subscription to *NBRC Horizons*, an informative bimonthly newsletter. Renewal of your NBRC active membership in 1999 will also help the Board of Trustees accomplish the following this year:

- Continue to provide quality respiratory care and pulmonary technology credentialing examinations and other services to examination candidates and credentialed practitioners.
- Prepare to implement administration of all NBRC credentialing examinations via computer in 2000.
- Implement the change in the entry level respiratory care credential designation from CRTT to CRT by July 1, 1999.

See the special notice enclosed with this mailing for further information about this change.

- Develop draft admission policies for the respiratory care examinations to reflect the requirement of a minimum of an associate degree at the entry level by January 1, 2004, and to present the draft standards for consideration by the Board of Trustees by December 31, 1999.
- In cooperation with the NBRC's Recredentialing Commission, develop a plan to insure compliance with the requirements of the National Commission for Certifying Agencies (NCCA), which include a mandatory recredentialing system, for consideration by the Board of Trustees by December 31, 2000.
- Promote continued cooperation and communication within the respiratory care community and with the sponsoring organizations of the NBRC.
- Continue to ensure that 100 percent of the states regulating respiratory care recognize your national credentials as standards for licensure.
- Support scholarships, research grants and the International Fellowship Program through the American Respiratory Care Foundation (ARCF).

I hope you will renew your active membership in 1999. You are eligible for active membership if you are actively involved in respiratory care. If you are not currently practicing, you may continue to support the NBRC by renewing as an NBRC "supporter." Simply complete the enclosed form and return it with the \$20 fee by March 1, 1999.

Thank you for your continued support of the NBRC and the respiratory care credentialing system. Renewing your active membership assures the continued value of your professional credentials.

Sincerely,

Barbara G. Wilson

Barbara G. Wilson, MEd, RRT
President

See the reverse side of this letter for information about two new respiratory care products.

I MINA' BENTE SINGKO NA LIHESLATURAN GUÅHAN
Committee on Health, Human Services and Chamorro Heritage
Kumiten Salut, Setbision Tinaotao yan Iremsian Chamorro

TESTIMONY RECORD for
 PUBLIC HEARING, December 7, 2000, 9:30 AM, Legislative Session Hall, Hagåtña, Guam
Bill 511 (COR) An act to amend §§122001, 122002, 122004 and 122005 of Article 20 of Chapter 12,
 Division 1, Part 1 of Title 10 of the Guam Code Annotated, relative to the regulation of respiratory
 therapy profession.

<u>Robin Olmo</u> NAME <u>PO Box 21242</u>	<u>Private citizen</u> ORGANIZATION <u>647-2189</u>	WRITTEN or <u>ORAL</u> Testimony? [please circle one or both]
<u>SMT, Guam 96921</u> MAILING ADDRESS	CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

_____ NAME	_____ ORGANIZATION	WRITTEN or ORAL Testimony? [please circle one or both]
_____ MAILING ADDRESS	_____ CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

_____ NAME	_____ ORGANIZATION	WRITTEN or ORAL Testimony? [please circle one or both]
_____ MAILING ADDRESS	_____ CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

_____ NAME	_____ ORGANIZATION	WRITTEN or ORAL Testimony? [please circle one or both]
_____ MAILING ADDRESS	_____ CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

_____ NAME	_____ ORGANIZATION	WRITTEN or ORAL Testimony? [please circle one or both]
_____ MAILING ADDRESS	_____ CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

MINA'BENTE SINGKO NA LIHESLATURAN GUAHAN
2000 (SECOND) Regular Session

CERTIFICATION OF PASSAGE OF AN ACT TO I MAGA'LAHEN GUAHAN

This is to certify that Bill No. 511 (COR), "AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF THE RESPIRATORY THERAPY PROFESSION," was on the 20th day of December 2000, duly and regularly passed.

ANTONIO R. UNPINGCO
Speaker

Attested:

JOANNE M.S. BROWN
Senator and Legislative Secretary

.....
This Act was received by *I Maga'lahen Guahan* this _____ day of _____, 2000,
at _____ o'clock _____.M.

Assistant Staff Officer
Maga'lahi's Office

APPROVED:

CARL T. C. GUTIERREZ
I Maga'lahen Guahan

Date: _____

Public Law No. _____

MINA'BENTE SINGKO NA LIHESLATURAN GUÅHAN
2000 (SECOND) Regular Session

Bill No. 511 (COR)

As amended by the Committee on
Health, Human Services and
Chamorro Heritage and amended.

Introduced by:

S. A. Sanchez, II
F. B. Aguon, Jr.
E. C. Bermudes
A. C. Blaz
J. M.S. Brown
E. B. Calvo
M. G. Camacho
Mark Forbes
L. F. Kasperbauer
A. C. Lamorena, V
C. A. Leon Guerrero
K. S. Moylan
V. C. Pangelinan
J. C. Salas
A. R. Unpingco

**AN ACT TO AMEND §§122001, 122002, 122004 AND
122005 OF TITLE 10 OF THE GUAM CODE
ANNOTATED, RELATIVE TO THE REGULATION OF
THE RESPIRATORY THERAPY PROFESSION.**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1. Legislative Findings and Intent.** The purpose of this Act is
3 to more clearly define, regulate and control the practice of respiratory therapy

1 services on Guam to better serve the public interest. Because these services
2 play an important part in the attainment and maintenance of health, it is in
3 the public's best interest that persons who present themselves as providers of
4 services in these areas meet specific requirements and qualifications.

5 Licensure requirements for respiratory therapists were originally
6 enacted in Public Law Number 24-329. This proposed revision would clarify
7 incomplete and inaccurate information in the current law and use
8 terminology which encompasses all persons who practice, and assist with,
9 respiratory services.

10 **Section 2.** Section 122001 of Article 20, Chapter 12, Part 1, Division 1 of
11 Title 10 of the Guam Code Annotated, as added by Public Law Number 24-
12 329:13, is hereby *amended* to read as follows:

13 **"Section 122001. Definitions.** For purposes of this
14 Article, the following words and phrases are defined to mean:

15 (a) '*Licensed Registered Respiratory Therapist*' ('RRT') means
16 a person who is currently a 'Registered Respiratory Therapist'
17 credentialed by the National Board for Respiratory Care ('NBRC'),
18 or the equivalent thereof, and who is currently and validly
19 licensed to practice respiratory therapy on Guam.

20 (b) '*Licensed Certified Respiratory Therapist*' means a person
21 who is currently a 'Certified Respiratory Therapist' ('CRT')
22 (formerly 'Certified Respiratory Therapy Technician ('CRRT'))
23 credentialed by the National Board for Respiratory Care ('NBRC'),
24 or the equivalent thereof as accepted by the NBRC, and who

1 assists in the treatment of patients under the indirect supervision
2 of a licensed Registered Respiratory Therapist.

3 (c) '*Respiratory therapy*' means the management of
4 pulmonary diseases with medicines and machines.

5 (d) '*Consultation*' means the communication regarding the
6 patient's evaluation and proposed treatment plan with an
7 authorized health care practitioner.

8 (e) '*Authorized health care practitioner*' includes licensed
9 physicians, osteopathic physicians, chiropractors, podiatrists and
10 dentists; provided, *however*, that nothing herein shall be construed
11 as altering the scope of practice of such practitioners as defined in
12 their respective licensure regulations."

13 **Section 3.** Section 122002 of Article 20, Chapter 12, Part 1, Division 1 of
14 Title 10 of the Guam Code Annotated, as added by Public Law Number 24-
15 329:13, is hereby *amended* to read as follows:

16 **"Section 122002. Qualifications for Licensure.** Applicants for
17 a license to practice respiratory therapy on Guam must complete and
18 file an application with the Board. Applicants must have *all* of the
19 following qualifications:

20 **(1) Licensed Registered Respiratory Therapist:**

21 (a) transcripts from an approved school of
22 respiratory therapy, evidencing the successful completion of
23 a two (2) year program, resulting in a *minimum* of an
24 Associate's Degree in Respiratory Therapy;

1 (b) current certification as a RRT by the National
2 Board for Respiratory Care; *or*

3 (c) have obtained RRT status from the National
4 Board for Respiratory Care *prior to* January 1, 2004.

5 (2) **Licensed Certified Respiratory Therapist or Certified**
6 **Respiratory Therapy Technician:**

7 (a) transcripts from an approved school of
8 respiratory therapy, evidencing the successful completion of
9 a one (1) year program; *and*

10 (b) current certification as a Certified Respiratory
11 Therapist by the National Board for Respiratory Care; *or*

12 (c) have obtained certification as a Certified
13 Respiratory Therapy Technician by the National Board of
14 Respiratory Care *before* July 1, 1999."

15 **Section 4.** Section 122004 of Article 20, Chapter 12, Part 1, Division 1 of
16 Title 10 of the Guam Code Annotated, as added by Public Law Number 24-
17 329:13, is hereby *amended* to read as follows:

18 **"Section 122004. Scope of Practice.**

19 (a) **Registered Respiratory Therapists.** The
20 practice of respiratory care includes, but is *not* limited to, the
21 services set forth in the law. The licensed Registered Respiratory
22 Therapist provides these services for the assessment, treatment,
23 management, evaluation and care of patients with deficiencies,
24 abnormalities and diseases of the cardiopulmonary system with

1 guidance from a qualified medical director, and pursuant to a
2 referral from a physician who has medical responsibility for the
3 patient.

4 (1) A person licensed under this Chapter as a
5 Respiratory Therapist may evaluate and treat human
6 ailments by respiratory therapy according to a physician's
7 consultation. The evaluation shall be the Therapist's
8 assessment of a patient's problem and shall include a
9 respiratory therapy diagnosis. *If* a patient's problem is
10 outside the scope of therapist, the therapist shall consult
11 with a person licensed to practice medicine. *If* a patient, at
12 any time, requires further medical evaluation or diagnostic
13 testing, that patient shall be referred to an authorized health
14 care practitioner.

15 (2) Direct referral of a patient by an authorized
16 health care practitioner may be by telephone, letter or in
17 person; provided, however, *if* the instructions are oral, the
18 therapist may administer treatment accordingly, but must
19 make a record describing the nature of the treatment, the
20 date administered, the name of the person receiving the
21 treatment and the name of the referring authorized health
22 care practitioner.

23 (3) The practice of respiratory care by a licensed
24 Registered Respiratory Therapist includes, but is *not* limited
25 to, the following services:

1 (a) providing and monitoring therapeutic
2 administration of medical gases, aerosolized
3 humidification and pharmacological agents related to
4 respiratory care procedures, but *not* including
5 administration of anesthesia;

6 (b) carrying out therapeutic application and
7 monitoring of mechanical ventilator support;

8 (c) providing cardiopulmonary resuscitation
9 and maintenance of natural airways and insertion, and
10 maintenance of artificial airways;

11 (d) assessing and monitoring signs, symptoms
12 and general behavior relating to, respiratory care
13 treatment or evaluation for treatment and diagnostic
14 testing, including determination of whether the signs,
15 symptoms, reactions, behavior or general response
16 exhibit abnormal characteristics;

17 (e) obtaining physiological specimens and
18 interpreting physiological data including:

19 (1) analyzing arterial and venous blood
20 gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes,
23 pressures, and flows;

24 (4) testing pulmonary function;

1 (5) testing and studying the
2 cardiopulmonary system;

3 (6) diagnostic testing of breathing
4 patterns related to sleeping disorders;

5 (7) assisting hemodynamic monitoring
6 and support of the cardiopulmonary system;

7 (8) assessing and making suggestions for
8 modifications in the treatment regimen based on
9 abnormalities, protocols or changes in patient
10 response to respiratory care treatment;

11 (9) providing cardiopulmonary
12 rehabilitation, including respiratory care-related
13 educational components, postural drainage,
14 chest physiotherapy, breathing exercises,
15 aerosolized administration of medications, and
16 equipment use and maintenance;

17 (10) instructing patients and their families
18 in techniques for the prevention, alleviation and
19 rehabilitation of deficiencies, abnormalities and
20 diseases of the cardiopulmonary system;

21 (11) assisting with management of the
22 cardiopulmonary system and medical
23 equipment during off-Guam transports;

24 (12) transcribing and implementing
25 physician orders for respiratory care services;

1 (f) services within the training and experience
2 of the practitioner; *and*

3 (g) services within the parameters of the laws,
4 rules and standards of the facilities in which the
5 respiratory care practitioner practices.

6 (4) Respiratory care services provided by a licensed
7 Registered Respiratory Therapist, whether delivered in a
8 health care facility or the patient's residence, must *not* be
9 provided, *except* upon referral from a physician.

10 **(b) Licensed Certified Respiratory Therapists.**

11 (1) A licensed Certified Respiratory Therapist is *not*
12 an independent practitioner, and works under the indirect
13 supervision of the licensed Registered Respiratory Therapist.

14 (2) A licensed Certified Respiratory Therapist will
15 follow the treatment program set by the licensed Registered
16 Respiratory Therapist.

17 (3) The practice of respiratory care by a licensed
18 Certified Respiratory Therapist includes, but is *not* limited
19 to, the following services:

20 (a) providing and monitoring therapeutic
21 administration of medical gases, aerosolized
22 humidification, and pharmacological agents related to
23 respiratory care procedures, but *not* including
24 administration of anesthesia;

1 (b) carrying out therapeutic application and
2 monitoring of mechanical ventilator support;

3 (c) providing cardiopulmonary resuscitation
4 and maintenance of natural airways, and insertion and
5 maintenance of artificial airways;

6 (d) assessing and monitoring signs, symptoms
7 and general behavior relating to, respiratory care
8 treatment or evaluation for treatment and diagnostic
9 testing, including determination of whether the signs,
10 symptoms, reactions, behavior or general response
11 exhibit abnormal characteristics;

12 (e) obtaining physiological specimens and
13 interpreting physiological data including:

14 (1) analyzing arterial and venous blood
15 gases;

16 (2) assessing respiratory secretions;

17 (3) measuring ventilatory volumes,
18 pressures, and flows;

19 (4) testing pulmonary function;

20 (5) assessing and making suggestions for
21 modifications in the treatment regimen based on
22 abnormalities, protocols or changes in patient
23 response to respiratory care treatment;

24 (6) providing cardiopulmonary
25 rehabilitation, including respiratory care-related

1 Therapist is professionally and legally responsible for patient care given
2 by supportive personnel under the Registered Respiratory Therapist's
3 supervision. *If* a licensed Registered Respiratory Therapist fails to
4 adequately supervise patient care given by supportive personnel, the
5 Board may take disciplinary action against the licensee. Supervision of
6 supportive personnel requires that the licensed Registered Respiratory
7 Therapist perform or supervise the following activities:

8 (a) provide initial evaluation of the patient;

9 (b) develop a treatment plan and program, including
10 treatment goals;

11 (c) assess the competence of supportive personnel to
12 perform assigned tasks;

13 (d) select and delegate appropriate portions of the
14 treatment plan and program;

15 (e) direct and supervise supportive personnel in
16 delegated functions;

17 (f) reevaluate the patient and adjust the treatment plan as
18 acceptable respiratory therapy practice requires, consistent with
19 the delegated health care task;

20 (g) document sufficient in-service training and periodic
21 evaluation of performance to assure safe performance of the tasks
22 assigned to supportive personnel; *and*

23 (h) provide discharge planning."



FILE

MINA' BENTE SINGKO NA LIHESLATURAN GUÅHAN
TWENTY-FIFTH GUAM LEGISLATURE
155 Hesler Street, Hagåtña, Guam 96910

December 14, 2000

(DATE)

Memorandum

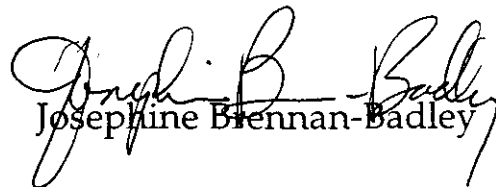
To: Senator Simon A. Sanchez, II

From: Clerk of the Legislature

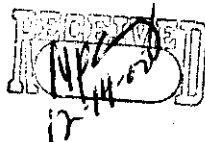
Subject: Report on Bill No. 511(COR)

Pursuant to §7.04 of Rule VII of the 25th Standing Rules, transmitted herewith is a copy of the Committee Report on Bill No. 511(COR), for which you are the prime sponsor.

Should you have any questions or need further information, please call the undersigned at 472-3464/5.


Josephine Brennan-Badley

Attachment



I MINA' BENTE SINGKO NA LIHESLATURAN GUÅHAN
Committee on Health, Human Services and Chamorro Heritage
Kumiten Salut, Setbision Tinaotao yan Irensian Chamoru
Sinadot Simon A. Sanchez II, Ge'Hilo'

December 12, 2000

Speaker Antonio R. Unpingco
I Mina' Bente Singko Na Liheslaturan Guåhan
155 Hesler Street
Hagåtña, Guåhan 96910

Dear Mr. Speaker:

I Kumiten Salut, Setbision Tinaotao yan Irensian Chamoru has completed its evaluation of Bill No. 511 and hereby issues the enclosed Committee Report.

A public hearing was held on the measure on December 7, 2000.

Committee Members voted as follows:

To pass	<u>7</u>
Not to pass	—
Abstain	—
Inactive File	—

Consequently, the Committee submits its recommendation to "DO PASS" Bill No. 511, as amended by the Committee on Health, Human Services and Chamorro Heritage.

Your kind attention to this matter is immensely appreciated.

Saina Ma'åse' yan Magof Ha'ånen Yu'os,


SIMON A. SANCHEZ II

I MINA' BENTE SINGKO NA LIHESLATURAN GUÅHAN
Committee on Health, Human Services and Chamorro Heritage
Kumiten Salut, Setbision Tinaotao yan Irensian Chamorro
Sinadot Simon A. Sanchez II, Ge'Hilo'

December 12, 2000

MEMORANDUM

TO: Committee Members

FROM: Chairperson

SUBJECT: Committee Report for Bill No. 511 (COR), as amended by the Committee on Health, Human Services and Chamorro Heritage, – An act to amend §§122001, 122002, 122004 and 122005 of Article 20 of Chapter 12, Division 1, Part 1 of Title 10 of the Guam Code Annotated, relative to the regulation of respiratory therapy profession.


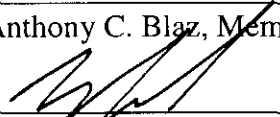
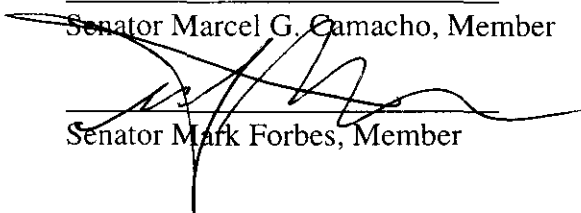
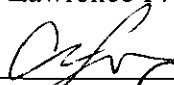
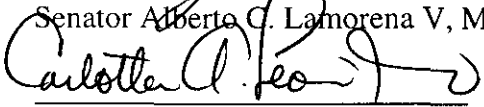


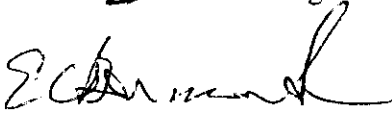
Attached hereto is the Committee Report for your review and consideration. Please call me if you need clarification or additional information. Then, please mark and sign the accompanying Voting Sheet.

Saina Ma'åse' yan Magof Ha'ånen Yu'os,


SIMON A. SANCHEZ II

‘Aina’ Bente Singko Na Liheslaturan Guåhan
Kumiten Salud, Setbision Tinaotao Yan Ireñsian Chamoru
VOTING SHEET

Bill No. 511, as amended by the Committee on Health, Human Services and Chamorro Heritage – An act to amend §§122001, 122002, 122004 and 122005 of Article 20 of Chapter 12, Division 1, Part 1 of Title 10 of the Guam Code Annotated, relative to the regulation of respiratory therapy profession.

	To Pass	Not to Pass	Abstain	Inactive File
 _____ Senator Simon A. Sanchez II, Chairperson	✓			
_____ Senator Joanne M.S. Brown, Vice Chairperson				
_____ Senator Frank B. Aguon, Jr., Member				
_____ Senator Anthony C. Blaz, Member				
 _____ Senator Eduardo B. Calvo, Member	✓			
_____ Senator Marcel G. Camacho, Member				
 _____ Senator Mark Forbes, Member	✓			
_____ Senator Lawrence F. Kasperbauer, Member				
 _____ Senator Alberto C. Lamorena V, Member	✓			
 _____ Senator Carlotta A. Leon Guerrero, Member	✓			
 _____ Senator Kaleo S. Moylan, Member	✓			
 _____ Senator Vicente C. Pangelinan, Member	✓			
 _____ Senator E. ..., Member	✓			

*I Mina' Bente Singko Na Liheslaturan Guåhan
Kumiten Salut, Setbision Tinaotao yan Irensian Chamoru*

**Committee Report
Bill No. 511 (COR)**

as amended by the Committee on Health, Human Services and Chamorro Heritage

"An act to amend §§122001, 122002, 122004 and 122005 of Article 20 of Chapter 12, Division 1, Part 1 of Title 10 of the Guam Code Annotated, relative to the regulation of respiratory therapy profession".

**Simon A. Sanchez II, Chairperson
Joanne M.S. Brown, Vice Chairperson**

Members

**Frank B. Aguon, Jr.
Anthony C. Blaz
Marcel G. Camacho
Lawrence F. Kasperbauer
Carlotta A. Leon Guerrero
Vicente C. Pangelinan**

**Eulogio C. Bermudes
Eduardo B. Calvo
Mark Forbes
Alberto C. Lamorena V
Kaleo S. Moylan**

I. OVERVIEW

Bill No. 511 proposes to more clearly define, regulate and control the practice of respiratory therapy services on Guam to better serve the public interest.

The Bill was introduced November 17, 2000 and publicly heard on December 7, 2000.

II. COMMITTEE FINDINGS

Licensure requirements for respiratory therapists were originally enacted in Public Law 24-239. The revisions proposed by this Bill would clarify incomplete and inaccurate information in the current law and use terminology that encompasses all persons who practice, and assist with, respiratory services.

The Committee has amended the original Bill in response to input from therapists at the hearing. The national certifying body for this profession, the National Board for Respiratory Care, Inc., has changed the entry level respiratory care credential designation from CRRT to CRT since July 1, 1999 and the Bill reflects the change.

III. COMMITTEE RECOMMENDATIONS

The Committee on Health, Human Services and Chamorro Heritage thus recommends to the full body for **Bill No. 511, as amended by the Committee, "TO PASS"**.

MINA'BENTE SINGKO NA LIHESLATURAN GUÅHAN
2000 (SECOND) Regular Session

Bill No. 511 (COR)

as amended by the Committee on
Health, Human Services and Chamorro Heritage

Introduced by:

S. A. Sanchez, II

**AN ACT TO AMEND §§122001, 122002, 122004 AND
122005 OF ARTICLE 20 OF CHAPTER 12, DIVISION 1,
PART 1 OF TITLE 10 OF THE GUAM CODE
ANNOTATED, RELATIVE TO THE REGULATION OF
RESPIRATORY THERAPY PROFESSION.**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1. Legislative findings and intent.** The purpose of this Act is to
3 more clearly define, regulate and control the practice of respiratory therapy
4 services on Guam to better serve the public interest. Because these services
5 play an important part in the attainment and maintenance of health, it is in
6 the public's best interest that persons who present themselves as providers of
7 services in these areas meet specific requirements and qualifications.

8 Licensure requirements for respiratory therapists were originally
9 enacted in Public Law 24-329. This proposed revision would clarify
10 incomplete and inaccurate information in the current law and use

1 terminology which encompasses all persons who practice, and assist with,
2 respiratory services.

3 **Section 2.** §122001 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
4 of the Guam Code Annotated is hereby *amended* to read as follows:

5 **“ARTICLE 20.**

6 **RESPIRATORY THERAPY.**

7 **§122001. Definitions.** For purposes of this Article, the following
8 words and phrases ~~have been~~ are defined to mean:

9 (a) ~~‘Licensed respiratory therapist’~~ ~~(‘Therapist’)~~ ‘Licensed
10 Registered Respiratory Therapist (RRT)’ means a person who is
11 currently a ‘Registered Respiratory Therapist’ credentialed by the
12 National Board for Respiratory Care (NBRC), or the equivalent
13 thereof, and who is currently and validly licensed to practice
14 respiratory therapy on Guam.

15 (b) ~~‘Respiratory technician’~~ ‘Licensed Certified Respiratory
16 Therapist’ means ~~an individual who assists in the treatment of~~
17 ~~patients under the indirect supervision of a licensed respiratory~~
18 ~~therapist~~ a person who is currently a ‘Certified Respiratory
19 Therapist (CRT)’ (formerly ‘Certified Respiratory Therapy Technician
20 (CRRT)’) credentialed by the National Board for Respiratory Care
21 (NBRC), or the equivalent thereof as accepted by the NBRC, and
22 who assists in the treatment of patients under the indirect
23 supervision of a licensed Registered Respiratory Therapist.

24 (c) *‘Respiratory therapy’* means the management of pulmonary
25 diseases with medicines and machines.

1 (d) 'Consultation' means the communication regarding the
2 patient's evaluation and proposed treatment plan with an
3 authorized health care practitioner.

4 (e) 'Authorized health care practitioner' includes licensed
5 physicians, osteopathic physicians, chiropractors, podiatrists and
6 dentists; provided, however, that nothing herein shall be
7 construed as altering the scope of practice of such practitioners as
8 defined in their respective licensure regulations."

9 **Section 3.** §122002 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
10 of the Guam Code Annotated is hereby *amended* to read as follows:

11 "**§122002. Qualifications for licensure.** Applicants for a license to
12 practice ~~physical~~ respiratory therapy on Guam must complete and file
13 an application with the Board. Applicants must have *all* of the following
14 qualifications:

15 ~~(1) a bachelor's degree in respiratory therapy from an~~
16 ~~accredited school of respiratory therapy in the United States or~~
17 ~~one (!) year experience as a registered respiratory therapist and~~
18 ~~graduation from a respiratory therapist program approved by the~~
19 ~~American Medical Association ('AMA') with an associate degree~~
20 ~~in respiratory therapy;~~

21 ~~(2) transcripts from an approved school of respiratory~~
22 ~~therapy, evidencing the successful completion of a four (4) year~~
23 ~~degree program;~~

24 ~~(3) current certification as a Registered Respiratory Therapist~~
25 ~~by the National Board for Respiratory Care; and~~

1 (4) the applicant must have passed an examination given by
2 the Professional Examination Service in the U.S. or one (1) of its
3 territories, and have been granted a license.

4 (1) Licensed Registered Respiratory Therapist (RRT):

5 (a) transcripts from an approved school of respiratory
6 therapy, evidencing the successful completion of a two (2)
7 year program, resulting in a minimum of an Associate's
8 Degree in Respiratory Therapy; or

9 (b) current certification as a Registered Respiratory
10 Therapist by the National Board for Respiratory Care; or

11 (c) have obtained Registered Respiratory Therapist
12 status from the National Board for Respiratory Care prior to
13 January 1, 2004.

14 (2) Licensed Certified Respiratory Therapist (CRT) or
15 Certified Respiratory Therapy Technician (CRRT):

16 (a) transcripts from an approved school of respiratory
17 therapy, evidencing the successful completion of a one (1)
18 year program; and

19 (b) current certification as a Certified Respiratory
20 Therapist by the National Board for Respiratory Care; or

21 (c) have obtained certification as a Certified
22 Respiratory Therapy Technician by the National Board of
23 Respiratory Care before July 1, 1999."

24 **Section 4.** §122004 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
25 of the Guam Code Annotated is hereby *amended* to read as follows:

1 "§122004. Scope of Practice. (a) **Registered Respiratory Therapists.** The
2 practice of respiratory care includes, but is not limited to, the services set forth
3 in the law. The licensed Registered Respiratory Therapist provides these
4 services for the assessment, treatment, management, evaluation, and care of
5 patients with deficiencies, abnormalities, and diseases of the cardiopulmonary
6 system with guidance from a qualified medical director and pursuant to a
7 referral from a physician who has medical responsibility for the patient.

8 (1) A person licensed under this Chapter as a Respiratory
9 Therapist may evaluate and treat human ailments by respiratory
10 therapy according to a physician's consultation. The evaluation shall be
11 the Therapist's assessment of a patient's problem and shall include a
12 respiratory therapy diagnosis. If a patient's problem is outside the scope
13 of Therapist, the therapist shall consult with a person licensed to
14 practice medicine. If a patient, at any time, requires further medical
15 evaluation or diagnostic testing, that patient shall be referred to an
16 authorized health care practitioner.

17 (2) Direct referral of a patient by an authorized health care
18 practitioner may be by telephone, letter or in person; provided,
19 however, if the instructions are oral, the Therapist may administer
20 treatment accordingly, but must make a record describing the nature of
21 the treatment, the date administered, the name of the person receiving
22 the treatment and the name of the referring authorized health care
23 practitioner.

1 (3) The practice of respiratory care by a licensed Registered
2 Respiratory Therapist includes, but is not limited to, the following
3 services:

4 (a) providing and monitoring therapeutic administration of
5 medical gases, aerosolized humidification, and pharmacological
6 agents related to respiratory care procedures, but not including
7 administration of anesthesia;

8 (b) carrying out therapeutic application and monitoring of
9 mechanical ventilator support;

10 (c) providing cardiopulmonary resuscitation and
11 maintenance of natural airways and insertion and maintenance of
12 artificial airways;

13 (d) assessing and monitoring signs, symptoms, and general
14 behavior relating to, respiratory care treatment or evaluation for
15 treatment and diagnostic testing, including determination of
16 whether the signs, symptoms, reactions, behavior, or general
17 response exhibit abnormal characteristics;

18 (e) obtaining physiological specimens and interpreting
19 physiological data including:

20 (1) analyzing arterial and venous blood gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes, pressures, and
23 flows;

24 (4) testing pulmonary function;

1 (5) testing and studying the cardiopulmonary system;

2 and

3 (6) diagnostic testing of breathing patterns related to
4 sleeping disorders;

5 (7) assisting hemodynamic monitoring and support of
6 the cardiopulmonary system;

7 (8) assessing and making suggestions for
8 modifications in the treatment regimen based on
9 abnormalities, protocols, or changes in patient response to
10 respiratory care treatment;

11 (9) providing cardiopulmonary rehabilitation
12 including respiratory care-related educational components,
13 postural drainage, chest physiotherapy, breathing exercises,
14 aerosolized administration of medications, and equipment
15 use and maintenance;

16 (10) instructing patients and their families in
17 techniques for the prevention, alleviation and rehabilitation
18 of deficiencies, abnormalities, and diseases of the
19 cardiopulmonary system;

20 (11) assisting with management of the
21 cardiopulmonary system and medical equipment during off-
22 island transports;

23 (12) transcribing and implementing physician orders
24 for respiratory care services;

1 (f) services within the training and experience of the
2 practitioner;

3 (g) services within the parameters of the laws, rules and
4 standards of the facilities in which the respiratory care practitioner
5 practices.

6 (4) Respiratory care services provided by a licensed Registered
7 Respiratory Therapist, whether delivered in a health care facility or the
8 patient's residence, must not be provided except upon referral from a
9 physician.

10 **(b) Licensed Certified Respiratory Technician Therapists.**

11 (1) A ~~respiratory therapy technician~~ licensed Certified Respiratory
12 Therapist is *not* an independent practitioner, and works under the
13 indirect supervision of the licensed ~~respiratory therapist~~ Registered
14 Respiratory Therapist.

15 (2) A licensed ~~respiratory technician~~ Certified Respiratory
16 Therapist will follow the treatment program set by the licensed
17 ~~respiratory therapist~~ Registered Respiratory Therapist.

18 (3) ~~A respiratory technician shall have the minimum qualification~~
19 ~~of a certificate, or document showing graduation from a Respiratory~~
20 ~~Therapy Technician Program approved by the American Medical~~
21 ~~Association.~~

22 (4) ~~Current certification as a Certified Respiratory Therapy~~
23 ~~Technician by the National Board of Respiratory Care.~~

1 (3) The practice of respiratory care by a licensed Certified
2 Respiratory Therapist includes, but is not limited to, the following
3 services:

4 (a) providing and monitoring therapeutic administration of
5 medical gases, aerosolized humidification, and pharmacological
6 agents related to respiratory care procedures, but not including
7 administration of anesthesia;

8 (b) carrying out therapeutic application and monitoring of
9 mechanical ventilator support;

10 (c) providing cardiopulmonary resuscitation and
11 maintenance of natural airways and insertion and maintenance of
12 artificial airways;

13 (d) assessing and monitoring signs, symptoms, and general
14 behavior relating to, respiratory care treatment or evaluation for
15 treatment and diagnostic testing, including determination of
16 whether the signs, symptoms, reactions, behavior, or general
17 response exhibit abnormal characteristics;

18 (e) obtaining physiological specimens and interpreting
19 physiological data including:

20 (1) analyzing arterial and venous blood gases;

21 (2) assessing respiratory secretions;

22 (3) measuring ventilatory volumes, pressures, and
23 flows;

24 (4) testing pulmonary function;

1 (5) assessing and making suggestions for
2 modifications in the treatment regimen based on
3 abnormalities, protocols, or changes in patient response to
4 respiratory care treatment;

5 (6) providing cardiopulmonary rehabilitation
6 including respiratory care-related educational components,
7 postural drainage, chest physiotherapy, breathing exercises,
8 aerosolized administration of medications, and equipment
9 use and maintenance;

10 (7) instructing patients and their families in techniques
11 for the prevention, alleviation and rehabilitation of
12 deficiencies, abnormalities, and diseases of the
13 cardiopulmonary system;

14 (8) transcribing and implementing physician orders for
15 respiratory care services;

16 (f) services within the training and experience of the
17 practitioner;

18 (g) services within the parameters of the laws, rules and
19 standards of the facilities in which the respiratory care practitioner
20 practices.

21 (4) Respiratory care services provided by a licensed Registered
22 Respiratory Therapist, whether delivered in a health care facility or the
23 patient's residence, must not be provided except upon referral from a
24 physician."

1 Section 5. §122005 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
2 of the Guam Code Annotated is hereby *amended* to read as follows:

3 **"§122005. Supportive Personnel; Delineation of Responsibilities.**

4 A licensed respiratory therapist Registered Respiratory Therapist
5 is professionally and legally responsible for patient care given by
6 supportive personnel under the ~~respiratory therapist's~~ Registered
7 Respiratory Therapist's supervision. If a licensed respiratory therapist
8 Registered Respiratory Therapist fails to adequately supervise patient
9 care given by supportive personnel, the Board may take disciplinary
10 action against the licensee. Supervision of supportive personnel requires
11 that the licensed respiratory therapist Registered Respiratory Therapist
12 perform or supervise the following activities:

13 (a) provide initial evaluation of the patient;

14 (b) develop a treatment plan and program, including
15 treatment goals;

16 (c) assess the competence of supportive personnel to
17 perform assigned tasks;

18 (d) select and delegate appropriate portions of the treatment
19 plan and program;

20 (e) direct and supervise supportive personnel in delegated
21 functions;

22 (f) re-evaluate the patient and adjust the treatment plan as
23 acceptable respiratory therapy practice requires, consistent with
24 the delegated health care task;

1 (g) document sufficient in-service training and periodic
2 evaluation of performance to assure safe performance of the tasks
3 assigned to supportive personnel; *and*
4 (h) provide discharge planning."

Clerk of the Legislature

MINA'BENTE SINGKO NA LIHESLACION
2000 (SECOND) Regular Session

RECEIVED RECEIPT
Received by: AS
Time: 4:30 P
Date: 11/17/00

Bill No. 511 (COR)

Introduced by:

S. A. Sanchez, II SASII

AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF ARTICLE 20 OF CHAPTER 12, DIVISION 1, PART 1 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF RESPIRATORY THERAPY PROFESSION.

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. Legislative findings and intent. The purpose of this Act is
3 to more clearly define, regulate and control the practice of respiratory therapy
4 services on Guam to better serve the public interest. Because these services
5 play an important part in the attainment and maintenance of health, it is in
6 the public's best interest that persons who present themselves as providers of
7 services in these areas meet specific requirements and qualifications.

8 Licensure requirements for respiratory therapists were originally
9 enacted in Public Law 24-329. This proposed revision will clarify incomplete
10 and inaccurate information in the current law and use terminology which
11 encompasses all persons who practice, and assist with, respiratory services.

1 Section 2. §122001 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
2 of the Guam Code Annotated is hereby *amended* to read as follows:

3 "ARTICLE 20.

4 RESPIRATORY THERAPY.

5 §122001. **Definitions.** For purposes of this Article, the following
6 words and phrases ~~have been~~ are defined to mean:

7 (a) ~~'Licensed respiratory therapist' ('Therapist')~~ 'Licensed
8 Registered Respiratory Therapist (RRT)' means a person who is
9 currently a 'Registered Respiratory therapist' credentialed by the
10 National Board for Respiratory Care (NBRC), or the equivalent
11 thereof, and who is currently and validly licensed to practice
12 respiratory therapy on Guam.

13 (b) ~~'Respiratory technician'~~ 'Licensed Certified Respiratory
14 Therapist' means ~~an individual who assists in the treatment of~~
15 ~~patients under the indirect supervision of a licensed respiratory~~
16 ~~therapist~~ a person who is currently a 'Certified Respiratory
17 Therapist' credentialed by the National Board for Respiratory
18 Care (NBRC), or the equivalent thereof as accepted by the NBRC,
19 and who assists in the treatment of patients under the indirect
20 supervision of a licensed Registered Respiratory Therapist.

21 (c) *'Respiratory therapy'* means the management of pulmonary
22 diseases with medicines and machines.

23 (d) *'Consultation'* means the communication regarding the
24 patient's evaluation and proposed treatment plan with an
25 authorized health care practitioner.

1 (e) 'Authorized health care practitioner' includes licensed
2 physicians, osteopathic physicians, chiropractors, podiatrists and
3 dentists; provided, however, that nothing herein shall be
4 construed as altering the scope of practice of such practitioners as
5 defined in their respective licensure regulations."

6 Section 3. §122002 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
7 of the Guam Code Annotated is hereby *amended* to read as follows:

8 "§122002. **Qualifications for licensure.** Applicants for a license to
9 practice ~~physical~~ respiratory therapy on Guam must complete and file
10 an application with the Board. Applicants must have *all* of the following
11 qualifications:

12 ~~(1) a bachelor's degree in respiratory therapy from an~~
13 ~~accredited school of respiratory therapy in the United States or~~
14 ~~one (!) year experience as a registered respiratory therapist and~~
15 ~~graduation from a respiratory therapist program approved by the~~
16 ~~American Medical Association ('AMA') with an associate degree~~
17 ~~in respiratory therapy;~~

18 ~~(2) transcripts from an approved school of respiratory~~
19 ~~therapy, evidencing the successful completion of a four (4) year~~
20 ~~degree program;~~

21 ~~(3) current certification as a Registered Respiratory Therapist~~
22 ~~by the National Board for Respiratory Care; and~~

23 ~~(4) the applicant must have passed an examination given by~~
24 ~~the Professional Examination Service in the U.S. or one (1) of its~~
25 ~~territories, and have been granted a license.~~

1 (1) Licensed Registered Respiratory Therapist (RRT):

2 (a) transcripts from an approved school of respiratory
3 therapy, evidencing the successful completion of a two (2)
4 year program, resulting in a minimum of an Associate's
5 Degree in Respiratory Therapy; or

6 (b) current certification as a Registered Respiratory
7 Therapist by the National Board for Respiratory Care; or

8 (c) have obtained Registered Respiratory Therapist
9 status from the National Board for Respiratory Care prior to
10 January 1, 2001.

11 (2) Licensed Certified Respiratory Therapist (CRT):

12 (a) transcripts from an approved school of respiratory
13 therapy, evidencing the successful completion of a one (1)
14 year program,; and

15 (b) current certification as a Certified Respiratory
16 Therapist by the National Board for Respiratory Care."

17 Section 4. §122004 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
18 of the Guam Code Annotated is hereby *amended* to read as follows:

19 **"§122004. Scope of Practice. (a) Registered Respiratory Therapists.** The
20 practice of respiratory care includes, but is not limited to, the services set forth
21 in the law. The licensed Registered Respiratory Therapist provides these
22 services for the assessment, treatment, management, evaluation, and care of
23 patients with deficiencies, abnormalities, and diseases of the cardiopulmonary
24 system with guidance from a qualified medical director and pursuant to a
25 referral from a physician who has medical responsibility for the patient.

1 (1) A person licensed under this Chapter as a Respiratory
2 Therapist may evaluate and treat human ailments by respiratory
3 therapy according to a physician's consultation. The evaluation shall be
4 the Therapist's assessment of a patient's problem and shall include a
5 respiratory therapy diagnosis. If a patient's problem is outside the scope
6 of Therapist, the therapist shall consult with a person licensed to
7 practice medicine. If a patient, at any time, requires further medical
8 evaluation or diagnostic testing, that patient shall be referred to an
9 authorized health care practitioner.

10 (2) Direct referral of a patient by an authorized health care
11 practitioner may be by telephone, letter or in person; provided,
12 however, if the instructions are oral, the Therapist may administer
13 treatment accordingly, but must make a record describing the nature of
14 the treatment, the date administered, the name of the person receiving
15 the treatment and the name of the referring authorized health care
16 practitioner.

17 (3) The practice of respiratory care by a licensed Registered
18 Respiratory Therapist includes, but is not limited to, the following
19 services:

20 (a) providing and monitoring therapeutic administration of
21 medical gases, aerosolized humidification, and pharmacological
22 agents related to respiratory care procedures, but not including
23 administration of anesthesia;

24 (b) carrying out therapeutic application and monitoring of
25 mechanical ventilator support;

1 ~~(1) A respiratory therapy technician licensed Certified Respiratory~~
2 ~~Therapist~~ is *not* an independent practitioner, and works under the
3 indirect supervision of the licensed respiratory therapist Registered
4 Respiratory Therapist.

5 (2) A licensed ~~respiratory technician~~ Certified Respiratory
6 Therapist will follow the treatment program set by the licensed
7 respiratory therapist Registered Respiratory Therapist.

8 ~~(3) A respiratory technician shall have the minimum qualification~~
9 ~~of a certificate, or document showing graduation from a Respiratory~~
10 ~~Therapy Technician Program approved by the American Medical~~
11 ~~Association.~~

12 ~~(4) Current certification as a Certified Respiratory Therapy~~
13 ~~Technician by the National Board of Respiratory Care.~~

14 (3) The practice of respiratory care by a licensed Certified
15 Respiratory Therapist includes, but is not limited to, the following
16 services:

17 (a) providing and monitoring therapeutic administration of
18 medical gases, aerosolized humidification, and pharmacological
19 agents related to respiratory care procedures, but not including
20 administration of anesthesia;

21 (b) carrying out therapeutic application and monitoring of
22 mechanical ventilator support;

23 (c) providing cardiopulmonary resuscitation and
24 maintenance of natural airways and insertion and maintenance of
25 artificial airways;

1 (d) assessing and monitoring signs, symptoms, and general
2 behavior relating to, respiratory care treatment or evaluation for
3 treatment and diagnostic testing, including determination of
4 whether the signs, symptoms, reactions, behavior, or general
5 response exhibit abnormal characteristics;

6 (e) obtaining physiological specimens and interpreting
7 physiological data including:

8 (1) analyzing arterial and venous blood gases;

9 (2) assessing respiratory secretions;

10 (3) measuring ventilatory volumes, pressures, and
11 flows;

12 (4) testing pulmonary function;

13 (5) assessing and making suggestions for
14 modifications in the treatment regimen based on
15 abnormalities, protocols, or changes in patient response to
16 respiratory care treatment;

17 (6) providing cardiopulmonary rehabilitation
18 including respiratory care-related educational components,
19 postural drainage, chest physiotherapy, breathing exercises,
20 aerosolized administration of medications, and equipment
21 use and maintenance;

22 (7) instructing patients and their families in techniques
23 for the prevention, alleviation and rehabilitation of
24 deficiencies, abnormalities, and diseases of the
25 cardiopulmonary system;

1 (8) transcribing and implementing physician orders for
2 respiratory care services;

3 (f) services within the training and experience of the
4 practitioner;

5 (g) services within the parameters of the laws, rules and
6 standards of the facilities in which the respiratory care practitioner
7 practices.

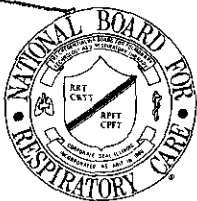
8 (4) Respiratory care services provided by a licensed Registered
9 Respiratory Therapist, whether delivered in a health care facility or the
10 patient's residence, must not be provided except upon referral from a
11 physician."

12 Section 5. §122005 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
13 of the Guam Code Annotated is hereby *amended* to read as follows:

14 "**§122005. Supportive Personnel; Delineation of Responsibilities.**

15 A licensed respiratory therapist Registered Respiratory Therapist
16 is professionally and legally responsible for patient care given by
17 supportive personnel under the respiratory therapist's Registered
18 Respiratory Therapist's supervision. If a licensed respiratory therapist
19 Registered Respiratory Therapist fails to adequately supervise patient
20 care given by supportive personnel, the Board may take disciplinary
21 action against the licensee. Supervision of supportive personnel requires
22 that the licensed respiratory therapist Registered Respiratory Therapist
23 perform or supervise the following activities:

24 (a) provide initial evaluation of the patient;




NBRC

The National Board for Respiratory Care, Inc.

**PLEASE READ
IMPORTANT NOTICE**

DATE: January 1999

TO: All Credentialed Members
FROM:  Steven K. Bryant, Executive Director

SUBJECT: Change in CRTT Credential Designation

This is to officially inform you that effective July 1, 1999 the name of the Certified Respiratory Therapy Technician credential will change to "Certified Respiratory Therapist," and the acronym used to identify this credential will change from CRTT to "CRT." This action was approved by unanimous vote of the NBRC's Board of Trustees in May 1998. The Board made this decision based on national job analysis research which indicates that respiratory care is practiced by two levels of personnel, most appropriately referred to as entry level and advanced respiratory therapists (CRT and RRT).

All current CRTTs will be automatically recognized as CRTs by the NBRC on July 1 and may begin using the new CRT designation to denote that they have successfully completed the certification examination, or its equivalent, for entry into the profession. The NBRC will continue to recognize CRTT certificates issued before July 1, 1999 as valid and equivalent to CRT credentials awarded after July 1. However, current CRTTs may also obtain replacement certificates, indicating achievement of the CRT credential, if they desire to do so. A form for this purpose is provided on the **reverse side** of this letter.

CRTTs who do not wish to have a replacement certificate may use this letter along with their original CRTT certificates as official evidence that the Board of Trustees considers them to be CRTs as of July 1. If you have any questions regarding your national credentials, please contact the Executive Office at any time.

**PLEASE READ
IMPORTANT NOTICE**



NBRC Annual Renewal

National Board for Respiratory Care, Inc.
8310 Nieman Road
Lenexa, Kansas 66214-1579
(913) 599-4200
E-mail: nbrc-info@nbrc.org

January 1999

Dear Colleague:

I am writing to encourage you to invest in your professional future by renewing your active membership in the national groups holding the CRTT, RRT, CPFT, RPFT and/or Perinatal/Pediatric Respiratory Care Specialist credentials. Your support enables the NBRC to maintain high credentialing standards and continue to assure the value and meaning of your credentials. Your NBRC credentials likely allow you to earn a higher salary than you might otherwise earn, and they enable you to enjoy reciprocity when moving from one state with licensure to another.

Benefits of active membership include preferential fees for credential verification and recredentialing examinations. You will also receive the 1999 *NBRC Directory* and a subscription to *NBRC Horizons*, an informative bimonthly newsletter. Renewal of your NBRC active membership in 1999 will also help the Board of Trustees accomplish the following this year:

- Continue to provide quality respiratory care and pulmonary technology credentialing examinations and other services to examination candidates and credentialed practitioners.
- Prepare to implement administration of all NBRC credentialing examinations via computer in 2000.
- Implement the change in the entry level respiratory care credential designation from CRTT to CRT by July 1, 1999.

See the special notice enclosed with this mailing for further information about this change.

- Develop draft admission policies for the respiratory care examinations to reflect the requirement of a minimum of an associate degree at the entry level by January 1, 2004, and to present the draft standards for consideration by the Board of Trustees by December 31, 1999.
- In cooperation with the NBRC's Recredentialing Commission, develop a plan to insure compliance with the requirements of the National Commission for Certifying Agencies (NCCA), which include a mandatory recredentialing system, for consideration by the Board of Trustees by December 31, 2000.
- Promote continued cooperation and communication within the respiratory care community and with the sponsoring organizations of the NBRC.
- Continue to ensure that 100 percent of the states regulating respiratory care recognize your national credentials as standards for licensure.
- Support scholarships, research grants and the International Fellowship Program through the American Respiratory Care Foundation (ARCF).

I hope you will renew your active membership in 1999. You are eligible for active membership if you are actively involved in respiratory care. If you are not currently practicing, you may continue to support the NBRC by renewing as an NBRC "supporter." Simply complete the enclosed form and return it with the \$20 fee by March 1, 1999.

Thank you for your continued support of the NBRC and the respiratory care credentialing system. Renewing your active membership assures the continued value of your professional credentials.

Sincerely,

Barbara G. Wilson

Barbara G. Wilson, MEd, RRT
President

See the reverse side of this letter for information about two new respiratory care products.

I MINA' BENTE SINGKO NA LIHESLATURAN GUÅHAN

Committee on Health, Human Services and Chamorro Heritage

Kumiten Salut, Sethision Tinaotao yan Irensian Chamorro

TESTIMONY RECORD for

PUBLIC HEARING, December 7, 2000, 9:30 AM, Legislative Session Hall, Hagåtña, Guam

Bill 511 (COR) An act to amend §§122001, 122002, 122004 and 122005 of Article 20 of Chapter 12, Division 1, Part 1 of Title 10 of the Guam Code Annotated, relative to the regulation of respiratory therapy profession.

<u>Roberto Jimo</u> NAME	<u>Private citizen</u> ORGANIZATION	WRITTEN or <u>ORAL</u> Testimony? [please circle one or both]
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_____ NAME	_____ ORGANIZATION	WRITTEN or ORAL Testimony? [please circle one or both]
_____ MAILING ADDRESS	_____ CONTACT NUMBER(S)	FOR or AGAINST? [please circle one]

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MINA BENTE SINGKO NA LIHESLATURAN GUAHAN
2000 (SECOND) Regular Session

Bill No. 511 (COR)

Introduced by:

S. A. Sanchez, II *SASII*

AN ACT TO AMEND §§122001, 122002, 122004 AND 122005 OF ARTICLE 20 OF CHAPTER 12, DIVISION 1, PART 1 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO THE REGULATION OF RESPIRATORY THERAPY PROFESSION.

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. Legislative findings and intent. The purpose of this Act is
3 to more clearly define, regulate and control the practice of respiratory therapy
4 services on Guam to better serve the public interest. Because these services
5 play an important part in the attainment and maintenance of health, it is in
6 the public's best interest that persons who present themselves as providers of
7 services in these areas meet specific requirements and qualifications.

8 Licensure requirements for respiratory therapists were originally
9 enacted in Public Law 24-329. This proposed revision will clarify incomplete
10 and inaccurate information in the current law and use terminology which
11 encompasses all persons who practice, and assist with, respiratory services.

1 Section 2. §122001 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
2 of the Guam Code Annotated is hereby *amended* to read as follows:

3 “ARTICLE 20.

4 RESPIRATORY THERAPY.

5 §122001. Definitions. For purposes of this Article, the following
6 words and phrases have been are defined to mean:

7 (a) ~~‘Licensed respiratory therapist’~~ (~~‘Therapist’~~) ‘Licensed
8 Registered Respiratory Therapist (RRT)’ means a person who is
9 currently a ‘Registered Respiratory therapist’ credentialed by the
10 National Board for Respiratory Care (NBRC), or the equivalent
11 thereof, and who is currently and validly licensed to practice
12 respiratory therapy on Guam.

13 (b) ~~‘Respiratory technician’~~ ‘Licensed Certified Respiratory
14 Therapist’ means ~~an individual who assists in the treatment of~~
15 ~~patients under the indirect supervision of a licensed respiratory~~
16 ~~therapist~~ a person who is currently a ‘Certified Respiratory
17 Therapist’ credentialed by the National Board for Respiratory
18 Care (NBRC), or the equivalent thereof as accepted by the NBRC,
19 and who assists in the treatment of patients under the indirect
20 supervision of a licensed Registered Respiratory Therapist.

21 (c) *‘Respiratory therapy’* means the management of pulmonary
22 diseases with medicines and machines.

23 (d) *‘Consultation’* means the communication regarding the
24 patient’s evaluation and proposed treatment plan with an
25 authorized health care practitioner.

1 (1) Licensed Registered Respiratory Therapist (RRT):

2 (a) transcripts from an approved school of respiratory
3 therapy, evidencing the successful completion of a two (2)
4 year program, resulting in a minimum of an Associate's
5 Degree in Respiratory Therapy; or

6 (b) current certification as a Registered Respiratory
7 Therapist by the National Board for Respiratory Care; or

8 (c) have obtained Registered Respiratory Therapist
9 status from the National Board for Respiratory Care prior to
10 January 1, 2001.

11 (2) Licensed Certified Respiratory Therapist (CRT):

12 (a) transcripts from an approved school of respiratory
13 therapy, evidencing the successful completion of a one (1)
14 year program;; and

15 (b) current certification as a Certified Respiratory
16 Therapist by the National Board for Respiratory Care."

17 **Section 4.** §122004 of Article 20, Chapter 12, Part 1, Division 1 of Title 10
18 of the Guam Code Annotated is hereby *amended* to read as follows:

19 "**§122004. Scope of Practice. (a) Registered Respiratory Therapists.** The
20 practice of respiratory care includes, but is not limited to, the services set forth
21 in the law. The licensed Registered Respiratory Therapist provides these
22 services for the assessment, treatment, management, evaluation, and care of
23 patients with deficiencies, abnormalities, and diseases of the cardiopulmonary
24 system with guidance from a qualified medical director and pursuant to a
25 referral from a physician who has medical responsibility for the patient.

1 (1) A person licensed under this Chapter as a Respiratory
2 Therapist may evaluate and treat human ailments by respiratory
3 therapy according to a physician's consultation. The evaluation shall be
4 the Therapist's assessment of a patient's problem and shall include a
5 respiratory therapy diagnosis. If a patient's problem is outside the scope
6 of Therapist, the therapist shall consult with a person licensed to
7 practice medicine. If a patient, at any time, requires further medical
8 evaluation or diagnostic testing, that patient shall be referred to an
9 authorized health care practitioner.

10 (2) Direct referral of a patient by an authorized health care
11 practitioner may be by telephone, letter or in person; provided,
12 however, if the instructions are oral, the Therapist may administer
13 treatment accordingly, but must make a record describing the nature of
14 the treatment, the date administered, the name of the person receiving
15 the treatment and the name of the referring authorized health care
16 practitioner.

17 (3) The practice of respiratory care by a licensed Registered
18 Respiratory Therapist includes, but is not limited to, the following
19 services:

20 (a) providing and monitoring therapeutic administration of
21 medical gases, aerosolized humidification, and pharmacological
22 agents related to respiratory care procedures, but not including
23 administration of anesthesia;

24 (b) carrying out therapeutic application and monitoring of
25 mechanical ventilator support;

1 (c) providing cardiopulmonary resuscitation and
2 maintenance of natural airways and insertion and maintenance of
3 artificial airways;

4 (d) assessing and monitoring signs, symptoms, and general
5 behavior relating to, respiratory care treatment or evaluation for
6 treatment and diagnostic testing, including determination of
7 whether the signs, symptoms, reactions, behavior, or general
8 response exhibit abnormal characteristics;

9 (e) obtaining physiological specimens and interpreting
10 physiological data including:

11 (1) analyzing arterial and venous blood gases;

12 (2) assessing respiratory secretions;

13 (3) measuring ventilatory volumes, pressures, and
14 flows;

15 (4) testing pulmonary function;

16 (5) testing and studying the cardiopulmonary system;

17 and

18 (6) diagnostic testing of breathing patterns related to
19 sleeping disorders;

20 (7) assisting hemodynamic monitoring and support of
21 the cardiopulmonary system;

22 (8) assessing and making suggestions for
23 modifications in the treatment regimen based on
24 abnormalities, protocols, or changes in patient response to
25 respiratory care treatment;

1 (9) providing cardiopulmonary rehabilitation
2 including respiratory care-related educational components,
3 postural drainage, chest physiotherapy, breathing exercises,
4 aerosolized administration of medications, and equipment
5 use and maintenance;

6 (10) instructing patients and their families in
7 techniques for the prevention, alleviation and rehabilitation
8 of deficiencies, abnormalities, and diseases of the
9 cardiopulmonary system;

10 (11) assisting with management of the
11 cardiopulmonary system and medical equipment during off-
12 island transports;

13 (12) transcribing and implementing physician orders
14 for respiratory care services;

15 (f) services within the training and experience of the
16 practitioner;

17 (g) services within the parameters of the laws, rules and
18 standards of the facilities in which the respiratory care practitioner
19 practices.

20 (4) Respiratory care services provided by a licensed Registered
21 Respiratory Therapist, whether delivered in a health care facility or the
22 patient's residence, must not be provided except upon referral from a
23 physician.

24 **(b) Licensed Certified Respiratory Technician Therapists.**

1 (b) develop a treatment plan and program, including
2 treatment goals;

3 (c) assess the competence of supportive personnel to
4 perform assigned tasks;

5 (d) select and delegate appropriate portions of the treatment
6 plan and program;

7 (e) direct and supervise supportive personnel in delegated
8 functions;

9 (f) re-evaluate the patient and adjust the treatment plan as
10 acceptable respiratory therapy practice requires, consistent with
11 the delegated health care task;

12 (g) document sufficient in-service training and periodic
13 evaluation of performance to assure safe performance of the tasks
14 assigned to supportive personnel; *and*

15 (h) provide discharge planning."
16