

OKLAHOMA STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION
101 NE 51ST STREET
OKLAHOMA CITY OK 73105
Phone: (405)962-1400 Fax: (405)962-1440 email: licensing@okmedicalboard.org

Instructions for Applying for Respiratory Care Practitioner License/Reinstatement (RC)
Provisional Respiratory Care Therapist License (PR)

The information contained herein is vital to the successful completion of your application and timely consideration of your request for licensure and/or reinstatement. Questions or challenges regarding application requirements should be addressed in writing to the Board Secretary. You will be notified, by email that your application has been received within 3 to 5 business days after submission. The email will list the deficiencies in the application and how to check the status of your application on the website.

An application for licensure as a **Respiratory Care Practitioner (RC)** must be based on one of the following:

- A. Examination – successful passing of an examination for respiratory care practitioners administered by the National Board of Respiratory Care, resulting in obtaining Certified Respiratory Therapy Technician (CRTT) or Registered Respiratory Therapist (RRT) credentials.
- B. Endorsement –
 - 1) Currently licensed to practice respiratory care in another state, territory or country if the qualifications of the applicant are deemed by the Board to be equivalent to those required in this state.
 - 2) Credentials conferred by the National Board for Respiratory Care as a Certified Respiratory Therapy Technician (CRTT) or as a Registered Respiratory Therapist (RRT), provided such credentials have not been suspended or revoked; and
 - 3) Certification under oath that applicant’s credentials have not been suspended or revoked.

An application for a **Provisional Respiratory Care Therapist (PR)** license may be issued to:

- A. A person licensed in another state, territory or country who has applied to take the license examination administered by the National Board of Respiratory Care. Applicant must be currently practicing or have practiced within the last six (6) months in another state, territory, or country.
- B. A graduate of a respiratory care education program, approved by the Commission on Accreditation of Allied Health Education Programs, who has applied to take the license examination administered by the National Board of Respiratory Care (NBRC).
- C. A student currently enrolled in a respiratory care education program, approved by the Commission on Accreditation of Allied Health Education Programs, who is engaged in the practice of respiratory care for remuneration.

Provisional licenses are issued for six (6) months under the supervision of a consenting Oklahoma licensed respiratory care practitioner or consenting Oklahoma licensed physician. Provisional licenses may be renewed at the discretion of the Board for additional six-month periods.

Fees – All fees are non-refundable. Fees for application must be paid online by credit card, debit card, or EFT from checking or savings account. Fees returned by the payer’s financial institution must be replaced by a certified check or money order and include a \$30 returned check processing fee.

Respiratory Care Practitioner (RC)	Initial Application Fee - \$100	Biennial License Renewal Fee - \$100
Provisional Respiratory Care Therapist (PR)	Initial Application Fee - \$100	6 Month Renewal of Provisional License - \$100

APPLICATION – must be completed online and can be found at <https://pay.apps.ok.gov/medlic/licensing/app/menu.php>.

- 1) All sections must be completed to the best of your knowledge. No applicant shall be awarded a license who does not provide the Board with complete, open and honest responses to all requests for information. For those items that do not apply to you, mark N/A (Not Applicable).
- 2) Any “yes” answer in the Attestation section of the application must be explained by a sworn affidavit (a statement signed by the applicant and notarized). If you answer “yes” to the question regarding previous arrests, you must provide all available police reports, arrest records, and court documents.
- 3) A detailed chronological life history from age eighteen years to the present, including education, employment, military service, and non-work time must be provided.

Forms – all forms can be found at www.okmedicalboard.org/respiratory_care_practitioners#forms-resources.

Evidence of Status - In order to verify citizenship or qualified alien status, applicants for licensure by endorsement or examination or for reinstatement of their license, must submit an Evidence of Status Form and the required supporting documentation with their application. This form must be notarized and mailed to the office.

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Oath and Photo Form – Applicants for licensure are required to complete the Oath and Photo Form. This form must be notarized and mailed to the office.

Form 1 VERIFICATION OF EDUCATION - (Not required if NBRC certified or student currently enrolled in education program) Verification of successful completion of a respiratory technician or respiratory therapist training and education program accredited by the Commission on accreditation of Allied Health Education Programs (CAAHEP). **The completed form must be submitted directly to the Board by the school.**

PROOF OF EXAM REGISTRATION - (Not required if NBRC certified or student currently enrolled in education program) – applicant who has applied to take the NBRC exam must submit a copy of proof of the exam registration.

Form 3 VERIFICATION OF LICENSURE – Verification of all respiratory licenses or certificates ever held in the United States and/or Canada must be sent by the respective Licensing Board directly to the Oklahoma Medical Board office. It is recommended the applicant contact the respective Licensing Board to see how they require ordering the verification.

Form 5 VERIFICATION OF SUPERVISION – Verification of supervision for provisional license applicants or for respiratory care license applicants desiring to practice prior to the Board issuing a full license. Supervisor is defined as an Oklahoma licensed respiratory care practitioner or an Oklahoma licensed physician. For more detailed information and definitions see Form 5.

Form 6 VERIFICATION OF STUDENT STATUS – (Not required if NBRC certified) An educator of the Respiratory Therapist/Technician program in which provisional license applicant is currently enrolled must complete Form 6. The completed form must be submitted directly to the Board by the educator.

Form 8 VERIFICATION OF CREDENTIALS – This form must be sent to the National Board of Respiratory Care, Inc. along with the appropriate fee if applicant is NBRC credentialed.

EXTENDED BACKGROUND CHECK – Applicants for licensure re required to request an Extended Background Check

GENERAL APPLICATION PROCESS - The Respiratory Care Advisory Committee will review all applications by individuals for licensure and submit recommendations to the Board for action. Applications for licensure will be approved by the Board approximately two weeks after the Committee meeting.

TEMPORARY LETTER TO PRACTICE - For the purpose of safeguarding the health, safety and welfare of the public, the Secretary of the Board may authorize the temporary practice, under the supervision of an Oklahoma licensed respiratory care practitioner, in the interim between acceptance of completed application and issuance of a license.

PRACTICE MAY NOT BEGIN UNTIL A LETTER GRANTING PERMISSION TO PRACTICE IS ISSUED BY THE BOARD SECRETARY OR A FULL LICENSE IS GRANTED BY THE BOARD.

I, the undersigned, have read the instructions and understand their content. I swear that the contents of my application are true. All information supplied herein may be verified by the Oklahoma State Board of Medical Licensure and Supervision. I have read and understand the Respiratory Care Practice Act, which I received with my application information.

Date

Printed Name

Signature

MAIL THESE SIGNED INSTRUCTIONS WITH ALL REQUIRED FORMS AND DOCUMENTS TO:

Oklahoma State Board of Medical Licensure and Supervision
101 NE 51st Street
Oklahoma City, OK 73105