

Minutes

The Respiratory Care Advisory Committee of the Board of Medical Licensure and Supervision met in regular meeting on November 5, 2009 at the office of the Board, 5104 North Francis, Suite C, Oklahoma City, Oklahoma. The meeting was held in accordance with the Open Meeting Act and the Administrative Procedure Act. Members present were:

Dean Wersal, RC, Chair
Jim Porterfield, RC, Vice Chair
Justin Sparkes, DO
Carl B. Pettigrew, DO
Karen Hart, RC
Julie Fanselau, RC
Carol Smith, RC

Members absent were:

Deborah Huff, MD
Matthew Britt, MD

Also present:

Lyle Kelsey, Executive Director
Robyn Hall, Director of Licensing
Kathy Plant, Executive Secretary
Gay Tudor, Assistant Attorney General
Libby Scott, Assistant Attorney General

The meeting was called to order at 11:30 a.m. Mr. Porterfield opened the meeting. The minutes of the September 3, 2009 Committee meeting were reviewed. Ms. Fanselau moved to approve the minutes as presented. Ms. Hart seconded the motion and the vote was unanimous in the affirmative.

OBAIDULLAH ZAID, RCP appeared with his attorney Bob Hague' at the Committee's request to discuss issues with his treatment of patients at St. Francis Hospital. Mr. Wersal and Ms. Smith recused from the case. The Committee discussed with Mr. Zaid allegations that he shortened patient treatment times, falsified patient records, documented that the patient declined treatment when, according to patient's parent, he told them it wasn't needed. Mr. Zaid testified that failure to give CPT was an honest mistake. He said it was not his role to tell the patient that treatment is not needed. He denied using a suction tube picked up off the floor. Mr. Zaid said he was now working at Muskogee and Oklahoma Surgical Hospital. He presented several letters regarding his conduct for his new employer. The Committee was concerned that the amount of time CPT was given was inadequate and if treatment was not

being tolerated by the patient, that fact should have been documented in the record. Concerns also were raised about the short period of time aerosol medications were administered. After discussion, Ms. Hart moved to have staff proceed with an investigation into the case. Ms. Fanselau seconded the motion and the vote was unanimous in the affirmative.

Mr. Wersal and Ms. Smith joined meeting. Mr. Wersal took over as Chair.

EILEEN ALICE RADENCIC appeared in support of her application for Respiratory Care Practitioner licensure. Ms. Radencic had been out of practice since 2006. She testified regarding her practice as a Respiratory Care Practitioner, her activities since leaving practice and her reasons for returning. She presented proof of seven continuing education hours. After discussion, Ms. Hart moved to recommend approval of the application. Ms. Smith seconded the motion and the vote was unanimous in the affirmative.

SHERI LYNN WARNKEN appeared in support of her application for a Respiratory Care Practitioner license. Ms. Warnken had practiced four shifts prior to obtaining licensure at South Crest in Tulsa. Ms. Warnken thought she had a temporary license but later discovered that she did not. She said she was unfamiliar with Oklahoma procedures and was relying on information from her employer, an agency. Ms. Hart moved to recommend approval of the application with a letter in her file stating there will be no tolerance if she again practices in any state without a license. Ms. Hart admonished her to be responsible for obtaining and maintaining her license and cautioned her against relying on her employer or anyone else. Mr. Porterfield seconded the motion. Ms. Fanselau recommended something be sent to South Crest and to Total Medical Staffing advising them to review their practice for checking licensure status of employees. Ms. Hart accepted the amendment to the motion. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative.

KENNETH D. VERMILLION appeared in support of his application for Respiratory Care Practitioner license. Ms. Scott briefed the Committee on a discrepancy in the application regarding the explanation of a "yes" answer to the question regarding past arrests. Mr. Vermillion's application included an explanation of a 2006 incident but not one for a 2004 incident. Mr. Vermillion said he was advised by his lawyer that he did not have to report the 2004 incident because it was a deferred adjudication. Mr. Vermillion testified regarding his practice history and his reasons for moving to Oklahoma. Ms. Scott said staff was concerned with his honesty and would oppose licensure. After hearing testimony and reviewing the application, Mr. Wersal moved to enter into Executive Session. Ms. Fanselau seconded the motion and the vote was unanimous in the affirmative. Upon return to open session, Ms. Hart moved to table the application until Mr. Vermillion could be thoroughly assessed for substance abuse and those results could be reviewed by the Committee. She further moved to direct the Board Secretary to not issue a temporary license. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative. Ms. Scott advised Mr. Vermillion that he had the right to appeal the Committee's action to the Board at their next meeting.

BRENDA RAPP DUNN appeared in support of her application for Respiratory Care Practitioner licensure. Ms. Dunn testified regarding two DWIs from 2002. She testified that the second DWI changed her life. She was assessed, attended AA and went back to school. She stated she is licensed in Texas and has applied for licensure in Kansas. She testified regarding her plans to practice on the Kansas-Oklahoma border. She has had no further incidents. After discussion, Ms. Fanselau moved to recommend approval of the application. Ms. Hart seconded the motion and the vote was unanimous in the affirmative.

Ms. Scott reported on pending disciplinary cases. She reported on the allegations of substance abuse and narcotics violations in the case of **Kimberly Dawn Barnett, RC**. Ms. Barnett had agreed not to practice during the pendency of her case. Ms. Scott reported that staff would be recommending revocation of the license. Ms. Fanselau moved to support staff's recommendation if the allegations are proven to be true. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative.

The case of **Becky Dianne Diercks, RC** alleged substance abuse and violation of probation. Ms. Hart moved to recommend revocation if the allegations are proven to be true. Ms. Fanselau seconded the motion and the vote was unanimous in the affirmative. Ms. Hart asked staff to contact Ms. Diercks last place of employment to notify them of the pending complaint.

The case of **Linda Jean Riseley, RC** alleged substance abuse. Ms. Scott reported that the latest information was that Ms. Riseley was with family in Iowa and would be obtaining treatment. Ms. Riseley did voluntarily disclose her initial treatment for substance abuse to the Board. Ms. Scott advised that staff usually recommends probation with terms that include treatment recommendations but in this case no recommendations had been provided. Ms. Hart moved, if the allegations are proven to be true, to suspend the license until such time that Ms. Riseley obtains an assessment and completes any recommended treatment. Dr. Pettigrew seconded the motion and the vote was unanimous in the affirmative.

Applications for licensure were reviewed. Ms. Hart moved to recommend approval of the following applications for licensure as Respiratory Care Practitioners. Ms. Smith seconded the motion and the vote was unanimous in the affirmative.

**TONY ABRAHAM
JAN MARIE ALLEN
JOHN PAUL BYRD
MATTHEW TYSON CRADDOCK
DENA WYATT HILL
TIFFANY LYNN JOHNSON
DIANA LAVARN
KAMI LYNNAE LIVELY
JANNA MARIE MCCALLUM**

**ROBERT JAMES ADAMS
MAXIMILLIAN BRODIE-MENDS
SARAH ELIZABETH CORLETT
SABRINA ILENE DAVIS
AMY CASSONDRA JIM
ELIZABETH KAY KETTER
STACEY LINNET LEWIS
JENCY ELSA MATHEW
NORA ALEXIS MCDUGAL**

**KAILIE SHEA PATTON
CHRISTOHPER MICHAEL QUALLS
JASON ROBERT SCHLOSS
SHIRLEY DIANE TURNER
WRYAN MITCHELL WEBB
MICHAEL ALAN WRIGHT
AMBER COLLEEN PALACIOS**

**DIANA RUTH PHILLIPS
FABIO CP SANTANA
TRACI MICHELLE SEELY
LORI DAWN BENABLE
SARA LYNN WHITT
MICHELLE LYNN REA**

Ms. Fanselau moved to recommend approval of the following applications for licensure as Respiratory Care Practitioners pending satisfactory completion of the files. Ms. Hart seconded the motion and the vote was unanimous in the affirmative.

**CHRISTINA SPRADLIN BOND
MILMA RAMIREZ COLLINS
LINDA LEE LUKENS
NATHAN DOUGLAS HINDS**

**AMANDA MIKEL CAMACHO
DONALD R KINCADE
DOUGLAS DOC MAHER**

Ms. Hart moved to recommend approval of the application of **KRISTY S. MILLER** for reinstatement of her Respiratory Care Practitioner license. Ms. Smith seconded the motion and the vote was unanimous in the affirmative.

Ms. Hart moved to recommend the following re-entry applications for Respiratory Care Practitioners be granted. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative.

LISA CAMILLE LONGCROW

**NICHOLAS JAMES MORGAN –
pending completion of the file**

Ms. Fanselau moved to recommend approval of the application of **FINNY VARUGHESE** for Provisional Respiratory Care Practitioner licensure. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative.

Ms. Fanselau moved to recommend approval of the following applications for licensure as Provisional Respiratory Care Practitioners pending satisfactory completion of the files. Mr. Porterfield seconded the motion and the vote was unanimous in the affirmative.

**PATRICK MICHAEL COLLINS
HELEN HUYNH**

**RHONDA DIANE DOWNING
ASHLEY DAWN MARITZ**

Ms. Smith moved to recommend approval of the re-entry application for Provisional Respiratory Care Practitioner licensure of **GINA LEE AUSTIN**. Ms. Hart seconded the motion and the vote was unanimous in the affirmative.

Staff reported that renewals would be going on-line within the next year. An issue that needed to be decided was how to handle reporting of continuing education. Current procedures had proof of hours submitted with the renewal application. The Committee discussed various methods of verifying hours. Staff was directed to prepare a rule amendment allowing random audits of continuing education. A public hearing would be held at the next Committee meeting.

A request for clarification on setup and adjusting of durable medical equipment and CPAP/BiPAP was reviewed. A letter from Tara Oelke, of Integris Regency Home Medical Equipment asked when could non-licensed employees set and adjust CPAP/BiPAP settings and assess the appropriateness or efficiency of a conserving device. It was the consensus of the Committee that CPAP/BiPAP is not durable medical equipment, and setting and adjusting the settings, as well as fitting and adjusting the mask are not exempt from the definition of respiratory care. An unlicensed person cannot legally do those procedures. Additionally, the Committee stated that assessing the appropriateness and efficiency of a conserving device fits within the definition of the practice of respiratory care and would require a licensed respiratory care practitioner. Ms. Tudor offered to research the law and rules to insure that the Committee's position was supported. The Committee directed Ms. Tudor to write a response to Ms. Oelke for staff to send around to the Committee for their review.

The Committee discussed RCPs doing PICC Line procedures. Ms. Tudor was concerned that Respiratory Care law may not allow PICC line procedures. Secondly, she was concerned that it may encroach in other professions' scope of practice. Mr. Porterfield said certain procedures that are not specifically prohibited by law are commonly done in certain facilities. Any facility thinking of using Respiratory Care Practitioners to do PICC procedures should have guidelines/policies in place and should have a training program with competency validations, etc. Ms. Hart felt it was within the Respiratory Care scope of practice to do those procedures. But it would be important for the organization to have the proper procedures in place to address infection-control, proper placement, purging correctly, etc., and policies on the people who can do the procedures in the facility. It would be important for the organization to decide who is best trained to do the procedures. Mr. Kelsey said another limiting factor would include liability and reimbursement guidelines.

Respiratory Care Practitioners could administer flu shots if properly trained and if the facility or organization has guidelines/policies/procedures in place.

Ms. Tudor said the biggest concern for the profession is that the public knows what to expect or know what a Respiratory Care Practitioner can do. To say that if it comes back to breathing then it falls within Respiratory Care might be overly broad. There should be some specifications for the training. The Committee may want to consider setting standards for training, establishment of organizational policies, etc.

A message from Allison Revas, CRT, Manager of Respiratory Care at Kindred Hospital regarding respiratory care's role in PEG procedures was reviewed. The Committee was deeply concerned that Kindred had no policies, no formal education or training or continuing competency validation and no medical staff approval. In order to protect the licensees and the public, the facility should have those things in place. Dr. Sparks was concerned with RCPs assisting in a procedure that can be risky, especially if an artery is punctured. He questioned whether a RCPs training would equip them to deal with that situation. Ms. Tudor said the definition of respiratory care is very broad. There are things that are directly and indirectly related, and things that they may have been trained for that are similar; however, any kind of procedure like this requires the institution to establish policies addressing who may perform the procedures, the required education, training, and how competency validation will be verified, etc.

The following were set as meeting dates for 2010:

February 4

May 5

August 12

November 4 (will change if Board meets that day)

There being no further business, the meeting was adjourned. The time was 1:50 p.m.