
246-928-120 Mandatory reporting. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246- 928-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-130, filed 6/30/89.] Repealed by 01-11- 165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-130 Health care institutions. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246- 928-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-140, filed 6/30/89.] Repealed by 01-11- 165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-140 Respiratory care practitioner associations or societies. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-150, filed 6/30/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.- 050(1).

246-928-150 Professional liability carriers. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-160, filed 6/30/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-160 Courts. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-170, filed 6/30/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-170 State and federal agencies. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-180, filed 6/30/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-180 Cooperation with investigation. [Statutory Authority: RCW 18.89.050, 18.130.050 and 18.130.070. 92-02- 018 (Order 224), § 246-928-180, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.130.070. 89-14-092 (Order PM 842), § 308-195-190, filed 6/30/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-190 AIDS prevention and information education require ments. [Statutory Authority: RCW 43.70.280. 98-05- 060, § 246-928-190, filed 2/15/98, effective 3/16/98. Statutory Authority: RCW 18.89.050 and 70.24.270. 92-02-018 (Order 224), § 246-928-190, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.270. 88-22-077 (Order PM 786), § 308-195-200, filed 11/2/88.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-200 Temporary practice. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246- 928-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.89.050. 89-09-006 (Order PM 832), § 308-195-210, filed 4/7/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-210 Definitions—Alternative training respiratory care practitioners. [Statutory Authority: RCW 43.70.040. 91-02- 049 (Order 121), recodified as § 246-928-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.89.050, 89-09-006 (Order PM 832), § 308-195-220, filed 4/7/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).

246-928-220 Alternative training requirements. [Statutory Authority: RCW 18.89.050. 92-02-018 (Order 224), § 246-928- 220, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.89.050, 89-09-006 (Order PM 832), § 308-195-230, filed 4/7/89.] Repealed by 01-11-165, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 18.89.050(1).
WAC 246-928-420 How to become licensed as a respiratory care practitioner. This section explains how a person may become licensed as a respiratory care practitioner with the department.

(1) The department shall provide forms for use by an applicant for licensure as a respiratory care practitioner. All applications for licensure must be submitted on these forms, with the appropriate fee required in WAC 246-928-990. The specific requirements and process for licensure is set forth in WAC 246-12-020.

(2) The applicant shall certify that all information on the application forms is accurate. The applicant is subject to investigation and discipline by the department for any apparent violation of chapters 18.130 and 18.89 RCW, or this chapter.

WAC 246-928-430 How and when to renew a respiratory care practitioner license. This section explains how and when to renew a respiratory care practitioner license.

(1) Applications for renewal of the license for respiratory care practitioner shall be submitted on forms provided by the department, with the appropriate fee required in WAC 246-928-990. The specific requirements and process for renewal of a license are set forth in WAC 246-12-030.

(2) Renewal fees must be postmarked on or before the renewal date or the department will charge a late renewal penalty fee and licensure reissue fee.

WAC 246-928-440 Continuing education requirements. Purposes. The ultimate aim of continuing education is to ensure the highest quality of professional work. Continuing education consists of educational activities designed to review existing concepts and techniques and to convey information and knowledge about advances in respiratory care as applied to the work settings. The objectives are to improve and increase the ability of the respiratory care practitioner to deliver the highest possible quality of respiratory care work and to keep the professional respiratory care practitioner abreast of current developments in a rapidly changing field. All respiratory care practitioners licensed under chapter 18.89 RCW will be required to meet the continuing education requirements set forth in these rules as a prerequisite to license renewal.

(c) Any person who is pursuing a supervised course of study leading to a degree or certificate in respiratory care, if the person is designated by a title that clearly indicates his or her status as a student or trainee and limited to the extent of demonstrated proficiency of completed curriculum, and under direct supervision;

(d) Any person who is licensed as a registered nurse under chapter 18.79 RCW;

(e) Any person who is practicing respiratory care without compensation for a family member.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-410, filed 5/23/01, effective 6/23/01.]

WAC 246-928-441 Implementation. (1) This rule explains implementation process, the number of hours that are required, the type of continuing education approved by the secretary, how to demonstrate compliance of continuing education to the department, and the auditing of continuing education requirements.

(2) Effective October 2003, renewal of any current license or reinstatement of any license lapsed or on disciplinary status shall require evidence of completion of continuing education which meets the requirements of subsection (3) of this section.

(3) Requirements. RCW 18.89.140 requires that all licensed respiratory care practitioners seeking to renew their license shall acquire thirty credit hours of continuing respiratory care education every two years as required in chapter 246-12 WAC, Part 7.

[Statutory Authority: RCW 18.89.050(1) and 18.89.140. 01-21-136, § 246-928-441, filed 10/24/01, effective 11/24/01.]

WAC 246-928-442 Acceptable continuing education. (1) Continuing respiratory care education must be a minimum of ten hours of continuing respiratory care education approved by the American Association for Respiratory Care. The remaining twenty hours of continuing respiratory care education may be in any of the following:

(a) Additional courses approved by the American Association for Respiratory Care.

(b) Category I level formal in-service approved by the American Association for Respiratory Care.

(c) Courses in respiratory care approved by the American Medical Association, the American Osteopathic Association and the American Nurses Association.

(d) Initial and renewal certification courses in Advanced Cardiac Life Support, Pediatric Advanced Life Support and Neonatal Resuscitation Program.

(e) Courses in respiratory care at any accredited college.

(f) Self-study courses in respiratory care.

(g) Passing the National Board for Respiratory Care's self-assessment competency examination with a minimum score of 75. Three hours of continuing education may be applied for successful completion of this examination.

(h) Educational offerings in respiratory care which include learning objectives provided by hospitals or health organizations.

(i) Educational offerings in respiratory care which include learning objectives, where the licensee serves as the instructor subject to the limitation described in subsection (3) of this section.

(2) Documentation. Licensees are responsible for acquiring and maintaining all acceptable documentation of their continuing education activities. Acceptable documentation shall include transcripts, letters from course instructors, or certificates of completion or other formal certifications provided by hospitals, course instructors, and health organizations, as required in chapter 246-12 WAC, Part 7. In all cases other than transcripts, the documentation must show the participant's name, activity title, number of continuing education credit hours, date(s) of activity, instructor's name(s) and
degree and the signature of the verifying individual program sponsor.

(3) The licensee who prepares and presents lectures or education courses that contributes to the professional competence of a licensed respiratory care practitioner may accumulate the same number of hours obtained for continuing education purposes by attendees as determined in WAC 246-12-220. The hours for presenting a specific topic lecture or education may only be used for continuing education credit once during each renewal period.

[Statutory Authority: RCW 18.89.050(1) and 18.89.140. 01-21-136, § 246-928-442, filed 10/24/01, effective 11/24/01.]

WAC 246-928-443 Verification of continuing education. (1) The licensee shall:

(a) Verify on renewal forms provided by the department, that the minimum continuing education has been completed within the two-year renewal cycle prior to the licensee's renewal date; and

(b) Keep records for four years as required in chapter 246-12 WAC, Part 7.

(2) Audits. The department may conduct random compliance audits of continuing education records, as described in chapter 246-12 WAC, Part 7.

(3) Exemptions. In certain emergency situations, the department may excuse all or part of the continuing education requirement as described in chapter 246-12 WAC, Part 7. The department may require verification of the emergency.

[Statutory Authority: RCW 18.89.050(1) and 18.89.140. 01-21-136, § 246-928-443, filed 10/24/01, effective 11/24/01.]

WAC 246-928-450 How to reinstate an expired respiratory care practitioner license. This section explains the process for reinstatement of an expired respiratory care practitioner license. Applications for reinstatement of an expired license may be submitted on forms provided by the department, with the appropriate fee required in WAC 246-928-990. The specific requirements and process for reinstatement of an expired license is set forth in WAC 246-12-040.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-450, filed 5/23/01, effective 6/23/01.]

PART II
REQUIREMENTS FOR LICENSURE AS A RESPIRATORY CARE PRACTITIONER

WAC 246-928-510 Overview of the qualifications required for licensure as a respiratory care practitioner. This section provides an overview of the qualifications required for licensure as a respiratory care practitioner.

The requirements for licensure are intended to ensure the minimum level of knowledge, skill and experience necessary to practice safely as a respiratory care practitioner. Licensure requires applicants to submit proof to the department that they have satisfied educational and examination requirements in this chapter.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-510, filed 5/23/01, effective 6/23/01.]

WAC 246-928-520 Minimum educational qualifications for licensure as a respiratory care practitioner. This section provides the minimum educational qualifications for licensure as a respiratory care practitioner.

(1) To meet the educational requirements required by RCW 18.89.090, an applicant must be a graduate of a two-year respiratory therapy educational program. Programs must be:

   Accredited by the Committee On Accreditation for Respiratory Care (COARC) or accredited by the American Medical Association's (AMA) Committee on Allied Health Education and Accreditation (CAHEA), or its successor, the Commission on Accreditation of Allied Health Education Program (CAAHEP).

   (2) An official transcript indicating completion of a two-year program must be provided as evidence of fulfillment of the required education.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-520, filed 5/23/01, effective 6/23/01.]

WAC 246-928-530 How new graduates may qualify for temporary practice and what is required. (1) An individual who has completed an approved program under WAC 246-928-520 is eligible for temporary practice. To meet the requirements for temporary practice under this rule, an individual is required to:

(a) Submit the application and fee as required in WAC 246-928-990;

(b) Sit for the examination within ninety days of graduation as required in WAC 246-928-560; and

(c) Be under the supervision of a licensed respiratory care practitioner.

Temporary practice may begin from the time the application and fee is submitted to the department.

(2) An applicant shall request examination results be submitted directly to the department from National Board for Respiratory Care.

(3) An applicant who receives notification that he or she successfully passed the examination may continue to practice under the supervision of a licensed respiratory care practitioner until the department has issued a license to the applicant.

(4) An applicant who receives notification of failure to pass the examination shall cease practice immediately. Resumption of practice may occur only after successfully passing the examination and becoming licensed as a respiratory care practitioner by the department.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-530, filed 5/23/01, effective 6/23/01.]

WAC 246-928-540 Examination requirements for licensure as a respiratory care practitioner. This section provides the minimum examination requirements for licensure as a respiratory care practitioner.

An applicant who has taken and passed the National Board for Respiratory Care (NBRC) entry level examination, has met the minimum examination requirements of RCW 18.89.090 (1)(b). Applicants shall request the NBRC to verify to the department that the applicant has successfully passed the NBRC examination.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-540, filed 5/23/01, effective 6/23/01.]

(9/16/10)
WAC 246-928-550 Education and training in AIDS prevention is required for licensure as a respiratory care practitioner. This section explains the required education and training in AIDS prevention.

Applicants must complete seven hours of AIDS education as required in chapter 246-12 WAC, Part 8.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-550, filed 5/23/01, effective 6/23/01.]

WAC 246-928-560 How to apply for licensure for persons credentialed out-of-state. This section explains how a person holding a license in another state or jurisdiction may apply for licensure.

1. An applicant who is currently or was previously credentialed in another state or jurisdiction may qualify for licensure in Washington state. Applicants must submit the following documentation to be considered for licensure:
   a. An application fee and forms as specified in WAC 246-928-420 and 246-928-990; and
   b. Written verification directly from all states in which the applicant is or was credentialed, attesting that the applicant has or had a license in good standing and is not subject to charges or disciplinary action for unprofessional conduct or impairment; and
   c. Verification of completion of the required education and examination as specified in WAC 246-928-520.

2. Applicants who have completed a two-year program recognized by the Canadian Society of Respiratory Therapists (CSRT) in their current list, or any previous lists, and are eligible to sit for the CSRT registry examination; or have been issued a registration by the CSRT are considered to have met the educational and examination requirements in this chapter. Canadian applicants are required to submit verification directly from CSRT, as well as all of the information listed above for applicants licensed in another jurisdiction.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-560, filed 5/23/01, effective 6/23/01.]

WAC 246-928-570 How to apply for temporary practice permit for persons credentialed out-of-state. This section explains how a person holding a license in another state or jurisdiction may apply for a temporary practice permit.

1. An applicant who is currently or was previously credentialed in another state or jurisdiction may qualify for licensure in Washington state. Applicants must submit the following documentation to be considered for a temporary practice permit:
   a. A completed application on forms provided by the department with the request for a temporary practice permit indicated;
   b. An application fee and a temporary practice permit fee as specified in WAC 246-928-990;
   c. Written verification directly from all states or jurisdictions in which the applicant is or was licensed, attesting that the applicant has or had a license in good standing and is not subject to charges or disciplinary action for unprofessional conduct or impairment; and
   d. Verification of completion of the required education and examination as specified in WAC 246-928-520.

2. The department shall issue a one-time-only temporary practice permit unless the department determines a basis for denial of the license or issuance of a conditional license.

3. The temporary permit shall expire upon the issuance of a license by the department, or within three months, whichever occurs first. The permit shall not be extended beyond the expiration date.

4. Issuance of a temporary practice permit does not ensure that the department will grant a full license. Temporary permit holders are subject to the same education and examination requirements as set forth in WAC 246-928-520 and 246-928-550.

5. The following situations are not considered substantially equal for Washington state licensure:
   a. Certification of persons credentialed out-of-state through a state-constructed examination; or
   b. Grandfathering provisions where proof of education and examination was not required.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-570, filed 5/23/01, effective 6/23/01.]

PART III
REQUIREMENTS FOR REPORTING UNPROFESSIONAL CONDUCT

WAC 246-928-710 Mandatory reporting. (1) All reports required by this chapter shall be submitted to the department as soon as possible, but no later than twenty days after a determination is made.

2. A report should contain the following information if known:
   a. The name, address, and telephone number of the person making the report.
   b. The name, address, and telephone numbers of the respiratory care practitioner being reported.
   c. The case number of any patient whose treatment is a subject of the report.
   d. A brief description or summary of the facts which prompted the issuance of the report, including dates of occurrences.
   e. If court action is involved, the name of the court in which the action is filed along with the date of filing and docket number.
   f. Any further information which would aid in the evaluation of the report.

3. Mandatory reports shall be exempt from public inspection and copying to the extent permitted under RCW 42.17.310 or to the extent that public inspection or copying of the report or any portion of the report would invade or violate a person's right to privacy as set forth in RCW 42.17.255.

4. A person is immune from civil liability, whether direct or derivative, for providing information to the department pursuant to RCW 18.130.070.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-710, filed 5/23/01, effective 6/23/01.]

WAC 246-928-720 Health care institutions. The chief administrator, executive officer, or any health care institution shall report to the department when any respiratory care practitioner's services are terminated or are restricted based on a determination that the respiratory care practitioner has either

(9/16/10)
committed an act or acts which may constitute unprofessional conduct or that the respiratory care practitioner may be unable to practice with reasonable skill or safety to clients by reason of any mental or physical condition.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-720, filed 5/23/01, effective 6/23/01.]

WAC 246-928-730 Respiratory care practitioner associations or societies. The president or chief executive officer of any respiratory care practitioner association or society within this state shall report to the department when the association or society determines that a respiratory care practitioner has committed unprofessional conduct or that a respiratory care practitioner may not be able to practice respiratory care with reasonable skill and safety to patients as the result of any mental or physical conditions. The report required by this section shall be made without regard to whether the license holder appeals, accepts, or acts upon the determination made by the association or society. Notification of appeal shall be included.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-730, filed 5/23/01, effective 6/23/01.]

WAC 246-928-740 Professional liability carriers. Every institution or organization providing professional liability insurance directly or indirectly to respiratory care practitioners shall send a complete report to the department of any malpractice settlement, award, or payment in excess of twenty thousand dollars as a result of a claim or action for damages alleged to have been caused by an insured respiratory care practitioner's incompetence or negligence in the practice of respiratory care. Such institution or organization shall also report the award, settlement, or payment of three or more claims during a twelve-month period as a result of the respiratory care practitioner's alleged incompetence or negligence.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-740, filed 5/23/01, effective 6/23/01.]

WAC 246-928-750 Courts. The department requests the assistance of the clerk of trial courts within the state to report all professional malpractice judgments and all convictions of licensed respiratory care practitioners, other than minor traffic violations.

[Statutory Authority: RCW 18.89.050(1). 01-11-165, § 246-928-750, filed 5/23/01, effective 6/23/01.]

WAC 246-928-760 State and federal agencies. The department requests the assistance of executive officers of any state or federal program operating in the state of Washington, under which a respiratory care practitioner is employed to provide patient care services, to report to the department whenever such a respiratory care practitioner has been judged to have demonstrated his/her incompetence or negligence in the practice of respiratory care, or has otherwise committed unprofessional conduct, or has a mental or physical disability that prevents them from practicing competently and professionally. These requirements do not supersede any state or federal law.

[Ch. 246-928 WAC—p. 6]