

Hundredth Legislature - First Session - 2007 Committee Statement LB 399

Hearing Date: February 8, 2007

Committee On: Health and Human Services

Introducer(s): (Johnson)

Title: Adopt the Perfusion Practice Act

Roll Call Vote – Final Committee Action:

Advanced to General File

X Advanced to General File with Amendments

Indefinitely Postponed

Vote Results:

7 Yes Senator(s): Johnson, Erdman, Hansen, Howard, Gay, Pankonin,

Stuthman

No

Present, not voting

Absent

Proponents: Representing:

Senator Joel Johnson Introducer

Benjamin L. Greenfield Nebraska Perfusion Society

Bruce Campbell Nebraska Society for Respiratory Care

Joe Deptula Self

Opponents: Representing:

Neutral: Representing:

Summary of purpose and/or changes:

LB 399 adopts the Perfusion Practice Act (act). The bill was introduced to implement recommendations of a "407" review under the Nebraska Regulation of Health Professions Act (LB 407, 1985; Neb. Rev. Stat. §§ 71-6201 to 71-6229).

The bill includes the new act within provisions of the Uniform Licensing Law (ULL). The bill creates a Board of Perfusion (board), provides finding and declares intent, and defines terms.

Perfusion is defined as "the functions necessary for the support, treatment, measurement, or supplementation of the cardiovascular, circulatory, and respiratory systems or other organs, or a combination of such activities, and to ensure the safe management of physiologic functions by

monitoring and analyzing the parameters of the systems under an order and under the supervision of a licensed physician, including:

- (a) The use of extracorporeal circulation, long-term cardiopulmonary support techniques including extracorporeal carbon dioxide removal and extracorporeal membrane oxygenation, and associated therapeutic and diagnostic technologies;
- (b) Counterpulsation, ventricular assistance, autotransfusion, blood conservation techniques, myocardial and organ preservation, extracorporeal life support, and isolated limb perfusion;
- (c) The use of techniques involving blood management, advanced life support, and other related functions; and
- (d) In the performance of the acts described in subdivisions (a) through (c) of this subdivision: (i) The administration of: (A) Pharmacological and therapeutic agents; and (B) Blood products or anesthetic agents through the extracorporeal circuit or through an intravenous line as ordered by a physician; (ii) The performance and use of: (A) Anticoagulation monitoring and analysis; (B) Physiologic monitoring and analysis; (C) Blood gas and chemistry monitoring and analysis; (D) Hematologic monitoring and analysis; (E) Hypothermia and hyperthermia; (F) Hemoconcentration and hemodilution; and (G) Hemodialysis; and (iii) The observation of signs and symptoms related to perfusion services, the determination of whether the signs and symptoms exhibit abnormal characteristics, and the implementation of appropriate reporting, clinical perfusion protocols, or changes in, or the initiation of, emergency procedures."

The bill requires perfusionists to be licensed, and provides qualifications for licensure. The bill provides for licensure without examination, and provides for issuance of a temporary perfusionist license. The bill requires the completion of continuing competency activities on an annual basis and provides title protection for licensed perfusionists. The bill requires the department, with the recommendation of the board, to adopt and promulgate rules and regulations to carry out the act. The bill also requires the board to adopt and publish a code of ethics for perfusionists and maintain a record of every licensed perfusionist in the state.

Explanation of amendments, if any:

The committee amendment (AM 936) replaces the bill as introduced, but retains virtually all of its substantive content. The bill replaces the Board of Perfusion with a Perfusionist Committee under the Board of Medicine and Surgery. The committee would consist of two perfusionists and one physician who has clinical experience with perfusionists. The physician may or may not be a member of the Board of Medicine and Surgery. The perfusionist committee is modeled after the Physician Assistance Committee, which also functions under the Board of Medicine and Surgery.

Senator Joel Johnson, Chairperson