Chapter Med 20

RESPIRATORY CARE PRACTITIONERS

Med 20.01	Authority and purpose.	Med 20.055	Temporary certificates for certified practitioners
Med 20.02	Definitions.	Med 20.06	Examination review by applicant.
Med 20.03	Applications and credentials.	Med 20.07	Board review of examination error claim.
Mod 20.04	Examinations: panal raviage of applications		

Med 20.01 Authority and purpose. The rules in this chapter are adopted by the medical examining board under the authority of ss. 15.08 (5) (b), 227.11 (2), and 448.40 (1), Stats., to govern the certification and regulation of respiratory care practitioners.

History: Cr. Register, December, 1991, No. 432, eff. 1–1–92; CR 18–101: am. Register October 2019 No. 766, eff. 11–1–19.

Med 20.02 Definitions. In this chapter:

- (1) "Board" means the medical examining board.
- (2) "Council" means the respiratory care practitioners examining council.
 - (3) "CRT" means certified respiratory therapist.
 - (4) "RRT" means registered respiratory therapist.
- **(5)** "TMC" means the Therapist Multiple Choice Examination administered by the National Board for Respiratory Care.

Note: "CRT" and "RRT" are registered trademarks of the National Board for Respiratory Care.

History: Cr. Register, December, 1991, No. 432, eff. 1–1–92; CR 18–101: am. (intro.), (3), (4), cr. (5) Register October 2019 No. 766, eff. 11–1–19.

Med 20.03 Applications and credentials. (1) Every applicant for initial certification as a respiratory care practitioner shall submit all of the following:

- (a) A completed application on a form provided by the board.
- (b) The fee specified in s. 440.05, Stats.
- (d) Evidence the applicant has passed the examinations required under s. Med 20.04.
- (f) Evidence the applicant is a graduate of a school with a course of instruction in respiratory care approved by the Commission on Accreditation for Respiratory Care or the Joint Review Committee for Respiratory Care.
- **(3)** An application for certification is not complete until the board has received both the completed application form and written verification of a passing grade directly from the National Board for Respiratory Care.

Note: Application forms are available from the department of safety and professional services at (608) 266–2112 or from the department's website at http://dsps.wi.gov.

History: Cr. Register, December, 1991, No. 432, eff. 1–1–92; am. (1) (f) 1., Register, August, 1994, No. 464, eff. 9–1–94; correction in (1) (b) made under s. 13.93 (2m) (b) 7., Stats., Register, December, 1999, No. 528; CR 18–101: am. (1) (intro.), (a), r. (1) (c), am. (1) (d), r. (1) (e), (f) (intro.), renum. (1) (f) 1. to (1) (f) and am., r. (1) (f) 2., 3., (2), am. (3) Register October 2019 No. 766, eff. 11–1–19.

- Med 20.04 Examinations; panel review of applications. (1) An applicant for certification as a respiratory care practitioner shall pass the TMC. The passing score for the TMC is 88 on the 2-digit scale.
- **(2)** An applicant for certification as a respiratory care practitioner shall pass a state board statutes and rules examination conducted by the council as evidenced by documents submitted directly to the council by the department's office of examinations. The passing score for the examination under this subsection is 85 percent.
- **(4)** An applicant may be required to complete an oral examination if the applicant:

- (a) Has a medical condition which in any way impairs or limits the applicant's ability to practice respiratory care with reasonable skill and safety.
- (b) Uses chemical substances so as to impair in any way the applicant's ability to practice respiratory care with reasonable skill and safety.
- (c) Has been disciplined or had licensure denied by a licensing or regulatory authority in Wisconsin or another jurisdiction.
- (d) Has been convicted of a crime the circumstances of which substantially relate to the practice of respiratory care.
- (e) Has practiced respiratory care for 1,200 hours or less during the last 3 years.
- (f) Has practiced respiratory care over 1,200 hours in the last 3 years, but practice was limited.
- (g) Has been found negligent in the practice of respiratory care or has been a party in a lawsuit in which it was alleged that the applicant has been negligent in the practice of respiratory care.
- (h) Has been diagnosed as suffering from pedophilia, exhibitionism or voyeurism.
- (i) Has within the past 2 years engaged in the illegal use of controlled substances.
- (j) Has been subject to adverse formal action during the course of respiratory care education, postgraduate training, hospital practice, or other respiratory care employment.
- (k) Has been graduated from a respiratory care school not approved by the board.
 - (L) Has violated s. Med 20.06 (5m).
- **(4m)** The board designates the council as its agent for conducting oral examinations. At the request of the council, the board shall provide a medical consultant to assist in evaluating applicants examined under sub. (4) (a) and (b). The passing score for an oral examination is 75 percent.
 - (5) All examinations shall be conducted in English.
- **(6)** Where both written and oral examinations are required, they shall be scored separately and the applicant shall achieve a passing score on all examinations to qualify for a certificate.
- (7) An applicant who fails to receive a passing score on an examination under sub. (2) or (4) may reapply by payment of the fee specified in s. 440.05, Stats. If an applicant fails the examination under sub. (2) 3 times, the applicant may not retake the examination unless the applicant submits evidence of having completed further professional training or education as the board may prescribe. An applicant may reapply for an oral examination twice at not less than 4-month intervals.
- (8) An oral examination concerning the circumstances described in sub. (4) (a) or (b) shall be limited to a determination whether, at the time of application, risk to the health, safety, or welfare of patient or public arises from the applicant's demonstrated inability to safely carry out necessary duties and responsibilities inherent to the practice of respiratory care.

History: Cr. Register, December, 1991, No. 432, eff. 1–1–92; am. (3), (4) (c) to (f) and (6), r. and recr. (4) (a) and (b), cr. (4) (h) to (k) and (8), Register, February, 1997, No. 494, eff. 3–1–97; correction in (7) made under s. 13.93 (2m) (b) 7., Stats., Regis-

ter, December, 1999, No. 528; CR 18–101: am. (1), (2), renum. (3) to (4m), am. (4) (e), (f), cr. (4) (L), am. (6), (7), (8) Register October 2019 No. 766, eff. 11–1–19.

Med 20.055 Temporary certificates for certified practitioners. (1) An applicant for certification who is certified to practice respiratory care in another state may apply to the board for a temporary certificate to practice respiratory care if the applicant submits all of the following:

- (a) A completed application on a form provided by the board.
- (b) The fee specified in s. 440.05 (1) (a), Stats.
- (c) Evidence the applicant has passed the TMC.
- (d) Evidence satisfactory to the board that the applicant meets the requirements of s. 448.05 (5r), Stats.
- (e) Evidence satisfactory to the board that the applicant is certified to practice respiratory care in another state.
- **(2)** If an applicant for a temporary certificate has been subjected to professional discipline as a result of the applicant's practice of respiratory care in another state, the applicant shall submit to the board a description of the circumstances of the discipline and a copy of the disciplinary order.
- **(3)** The board may not issue a temporary certificate to an individual who has been previously issued a temporary certificate under this section.
- **(4)** A temporary certificate under this section may be issued for a period not to exceed 3 months and may not be renewed.

Note: Application forms are available from the department of safety and professional services at (608) 266–2112 or from the department's website at http://dsps.wi.gov.

History: CR 09–005: cr. Register August 2009 No. 644, eff. 9–1–09; CR 18–101: am. (1) (a), (c) Register October 2019 No. 766, eff. 11–1–19.

Med 20.06 Examination review by applicant. (1) An applicant who fails the oral or statutes and rules examination may request a review of that examination by filing a written request and required fee with the board within 30 days of the date on which examination results were received by the applicant.

- (2) Examination reviews shall be by appointment only.
- (3) An applicant may not review the statutes and rules examination for more than one hour.
- **(4)** An applicant may not review the oral examination for more than 2 hours.
- **(5)** An applicant shall review an examination in the presence of a board–assigned proctor. No other person may accompany an applicant during a review.
- **(5m)** (a) An applicant may not use any device capable of recording audio, photographic, or video content, or capable of viewing or playing back such content, during a review. A violation of this subsection shall void the applicant's application and require the applicant to reapply for licensure.

- (b) A violation of this subsection constitutes knowingly engaging in fraud, misrepresentation, or dishonesty in applying for or procuring a license.
- **(6)** At the beginning of a review, the proctor shall provide the applicant with all of the following:
 - (a) A copy of the examination questions.
- (b) A copy of or, if the applicant is reviewing an oral examination, audio recording of the applicant's answers to the examination questions
- (c) If an applicant is reviewing the statutes and rules examination, a copy of the master answer sheet.
- (d) A form on which the applicant may write comments, questions, or claims of error regarding the examination.
- (7) An applicant may consult bound reference materials during a review. The form under sub. (6) (d) and any other notes taken by an applicant during a review shall be retained by the proctor and, if requested by an applicant, made available for use at a hearing. A proctor may not defend the examination or attempt to refute claims of error during a review.
- **(8)** An applicant may not review an examination more than once.

History: Cr. Register, February, 1997, No. 494, eff. 3–1–97; CR 18–101: am. (1) to (5), cr. (5m), renum. (6) to (6) (intro.) and am., cr. (6) (a) to (d), am. (7), (8) Register October 2019 No. 766, eff. 11–1–19.

Med 20.07 Board review of examination error claim.

- (1) An applicant claiming examination error shall file a written request for board review in the board office within 30 days of the date the examination was reviewed. The request shall include all of the following:
 - (a) The applicant's name and address.
 - (b) The type of license for which the applicant applied.
- (c) A description of the mistakes the applicant believes were made in the examination content, procedures, or scoring, including the specific questions or procedures claimed to be in error.
- (d) The facts which the applicant intends to prove, including reference text citations or other supporting evidence for the applicant's claim.
- (2) The board shall review the claim, make a determination of the validity of the objections, and notify the applicant in writing of the board's decision and any resulting changes to the applicant's exam score.
- (3) If the decision does not result in the applicant passing the examination, a notice of denial of license shall be issued. If the board issues a notice of denial following its review, the applicant may request a hearing under s. SPS 1.05.

History: Cr. Register, February, 1997, No. 494, eff. 3–1–97; correction in (3) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671; CR 18–101: am. (2) Register October 2019 No. 766, eff. 11–1–19.