

2001 DRAFTING REQUEST

Bill

Received: 11/06/2000

Received By: **kunkemd**

Wanted: **As time permits**

Identical to LRB:

For: **Scott Jensen (608) 266-3387**

By/Representing: **R.J. Pirlot**

This file may be shown to any legislator: **NO**

Drafter: **kunkemd**

May Contact: **Jim Tenuta**

Addl. Drafters:

Subject: **Occupational Reg. - prof lic**

Extra Copies:

Pre Topic:

No specific pre topic given

Topic:

Licensure of perfusionists

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/1	kunkemd 11/17/2000	gilfokm 12/19/2000	pgreensl 12/20/2000	_____	lrb_docadmin 12/20/2000		State
	kunkemd 01/24/2001	jdyer 01/25/2001		_____			
/2			martykr 01/26/2001	_____	gretskl 01/26/2001	lrb_docadminState 03/06/2001	

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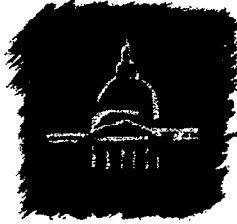
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FE Sent For:

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11/3/00

SCOTT R. JENSEN
ASSEMBLY SPEAKER

- IN RESPONSE TO YOUR RECENT REQUEST.
- I THOUGHT YOU MIGHT BE INTERESTED IN THE ENCLOSED MATERIAL.

Masky

*Would you draft the
attached for introduction
next session?*

R.J.

1-9482

ASSEMBLY SUBSTITUTE AMENDMENT
TO 1993 ASSEMBLY BILL 757

- 0942

1 AN ACT to amend 15.08 (1m) (b), 146.81 (1) (d), 155.01 (7), 252.14 (1)
2 (ar) 4, 448.02 (1), 448.03 (1), 448.03 (2) (b), 448.03 (2) (c), 448.03
3 (2) (d), 448.05 (1) (d), 448.05 (6) (a), 448.07 (1) (d), 448.13 (2)
4 and 448.40 (2) (c); and to create 15.407 (1) (e), 440.08 (2) (a) 54t,
5 448.01 (2d), 448.01 (2x), 448.01 (2y), 448.03 (2) (k), 448.03 (2) (L),
6 448.03 (3) (h), 448.04 (1) (eg), 448.04 (1) (er), 448.05 (4m), 448.05
7 (6) (am) and 448.40 (2) (e) of the statutes, relating to the regula-
8 tion of perfusionists by the medical examining board, creating a
9 perfusionists examining council and granting rule-making authority.

The people of the state of Wisconsin, represented in senate and assembly,
do enact as follows:

10 SECTION 1. 15.08 (1m) (b) of the statutes, as affected by 1991
11 Wisconsin Act 160, is amended to read:
12 15.08 (1m) (b) The public members of the chiropractic examining
13 board, the dentistry examining board, the hearing and speech examining
14 board, the medical examining board and its perfusionists examining
15 council, physical therapists examining council, podiatry examining
16 council, occupational therapy examining council, respiratory care practi-
17 tioners examining council and council on physician's assistants, the board
18 of nursing, the nursing home administrator examining board, the veterinary

1 examining board, the optometry examining board, the pharmacy examining
2 board, the examining board of social workers, marriage and family thera-
3 pists and professional counselors and the psychology examining board shall
4 not be engaged in any profession or occupation concerned with the delivery
5 of physical or mental health care.

6 SECTION 2. 15.407 (1) (e) of the statutes is created to read:

7 15.407 (1) (e) Perfusionists. There is created a perfusionists
8 examining council consisting of 3 licensed perfusionists, one physician
9 and one public member. The physician member shall be a thoracic surgeon
10 or a cardiovascular anesthesiologist. The perfusionist and physician
11 members shall be appointed by the medical examining board. The members of
12 the examining council shall serve 3-year terms.

13 SECTION 3. 146.81 (1) (d) of the statutes, as affected by 1991
14 Wisconsin Act 39, section 2666q, is amended to read:

15 146.81 (1) (d) A physician, podiatrist, perfusionist or physical
16 therapist licensed under ch. 448.

17 SECTION 4. 155.01 (7) of the statutes, as affected by 1993 Wisconsin
18 Act 27, is amended to read:

19 155.01 (7) "Health care provider" means a nurse licensed or permitted
20 under ch. 441, a chiropractor licensed under ch. 446, a dentist licensed
21 under ch. 447, a physician, podiatrist, perfusionist or physical therapist
22 licensed or an occupational therapist or occupational therapy assistant
23 certified under ch. 448, a person practicing Christian Science treatment,
24 an optometrist licensed under ch. 449, a psychologist licensed under ch.
25 455, a partnership thereof, a corporation thereof that provides health
26 care services, an operational cooperative sickness care plan organized
27 under ss. 185.981 to 185.985 that directly provides services through sal-

1 aried employes in its own facility, or a home health agency, as defined in
2 s. 50.49 (1) (a).

3 SECTION 5. 252.14 (1) (ar) 4 of the statutes, as affected by 1993
4 Wisconsin Act 27, is amended to read:

5 252.14 (1) (ar) 4. A physician, podiatrist, perfusionist or physical
6 therapist licensed or an occupational therapist or occupational therapy
7 ~~assistant certified under ch. 448.~~

8 SECTION 6. 440.08 (2) (a) 54t of the statutes is created to read:

9 440.08 (2) (a) 54t. Perfusionist: November 1 of each odd-numbered
10 year; \$36.

11 SECTION 7. 448.01 (2d) of the statutes is created to read:

12 448.01 (2d) "Extracorporeal circulation" means the diversion of a
13 patient's blood through a heart-lung machine or a similar device that
14 ~~assumes~~ the functions of the patient's heart or lungs or both.

15 SECTION 8. 448.01 (2x) of the statutes is created to read:

16 448.01 (2x) "Perfusion" means that branch or system of treating the
17 sick which is limited to the operation and management of extracorporeal
18 circulation to support, temporarily replace, measure, treat or supplement
19 the cardiopulmonary and circulatory system of a patient, including, when
20 necessary to and part of the management and operation of extracorporeal
21 circulation, the use of blood testing and advanced life support techniques
22 and technologies, autotransfusion and the administration of blood, blood
23 products and anesthetic and pharmacological agents.

24 SECTION 9. 448.01 (2y) of the statutes is created to read:

25 448.01 (2y) "Perfusionist" means an individual who meets the
26 requirements of s. 448.05 and is licensed by the board to practice
27 perfusion.

✓ 28 SECTION 10. 448.02 (1) of the statutes is amended to read:

1 448.02 (1) LICENSE. The board may grant licenses, including various
2 classes of temporary licenses, to practice medicine and surgery, to prac-
3 tice podiatric medicine and surgery, to practice perfusion and to practice
4 physical therapy.

5 ✓ SECTION 11. 448.03 (1) of the statutes is amended to read:

6 448.03 (1) LICENSE REQUIRED TO PRACTICE. No person may practice
7 medicine and surgery, podiatry, perfusion or physical therapy, or attempt
8 to do so or make a representation as authorized to do so, without a
9 license granted by the board.

10 ✓ SECTION 12. 448.03 (2) (b) of the statutes is amended to read:

11 448.03 (2) (b) The performance of official duties by a physician or
12 perfusionist of any of the armed services or federal health services of
13 the United States.

14 ✓ SECTION 13. 448.03 (2) (c) of the statutes is amended to read:

15 448.03 (2) (c) The activities of a medical student, podiatry student,
16 perfusion student, physical therapy student, respiratory care student or
17 physician's assistant student required for such student's education and
18 training; or the activities of a medical school graduate required for
19 ~~training as required in s. 448.05 (2).~~

20 ✓ SECTION 14. 448.03 (2) (d) of the statutes is amended to read:

21 448.03 (2) (d) Actual consultation or demonstration by licensed
22 physicians, podiatrists ~~or~~, perfusionists, physical therapists or certi-
23 fied respiratory care practitioners of other states or countries with
24 licensed physicians, podiatrists ~~or~~, perfusionists, physical therapists or
25 certified respiratory care practitioners of this state.

26 ✓ SECTION 15. 448.03 (2) (k) of the statutes is created to read:

1 448.03 (2) (k) A person performing autotransfusion or blood conser-
2 vation techniques under the direction and supervision of a licensed
3 physician.

4 SECTION 16. 448.03 (2) (L) of the statutes is created to read:

5 448.03 (2) (L) A person practicing perfusion for not more than 30
6 days in a year, if the person is certified or eligible to be certified as
7 a clinical perfusionist by the American board of cardiovascular perfusion.

8 SECTION 17. 448.03 (3) (h) of the statutes is created to read:

9 448.03 (3) (h) No person who is not a perfusionist may designate
10 himself or herself as a perfusionist, use or assume the title "licensed
11 perfusionist" or the abbreviation "L.P.", or use any other title, letters
12 or designation that represents or may tend to represent the person as a
13 perfusionist. This paragraph does not apply to:

14 1. Any person employed as a perfusionist by a federal agency, as
15 defined in s. 59.071 (3) (a), if the person provides perfusion services
16 solely under the direction or control of the federal agency by which he or
17 she is employed.

18 2. Any person pursuing a supervised course of study leading to a
19 degree or certificate in perfusion under an accredited or approved educa-
20 tional program, if the person is designated by a title that clearly indi-
21 cates his or her status as a student or trainee.

22 3. Any person practicing perfusion under a temporary license issued
23 under s. 448.04 (1) (er), if the person is designated by a title that
24 clearly indicates that he or she is practicing under a temporary license.

25 SECTION 18. 448.04 (1) (eg) of the statutes is created to read:

26 448.04 (1) (eg) License to practice perfusion. A person holding a
27 license to practice perfusion may practice perfusion under the orders and
28 supervision of a physician.

1 SECTION 19. 448.04 (1) (er) of the statutes is created to read:

2 448.04 (1) (er) Temporary license to practice perfusion. The board
3 may, by rule, provide for a temporary license to practice perfusion for a
4 person who satisfies the requirements of s. 448.05 (4m) but who has not
5 passed an examination under s. 448.05 (6). The board may issue a tempo-
6 rary license for a period not to exceed one year and may renew a temporary
7 license annually for not more than 5 years. A person who holds a tempo-
8 rary license may not practice perfusion unless the person is under the
9 supervision and direction of a licensed perfusionist at all times while
10 the person is performing perfusion. The board may promulgate rules gov-
11 erning supervision by licensed perfusionists, except that those rules may
12 not require the immediate physical presence of the supervising, licensed
13 perfusionist.

14 SECTION 20. 448.05 (1) (d) of the statutes is amended to read:

15 448.05 (1) (d) Be found qualified by three-fourths of the members of
16 the board, except that an applicant for a temporary license under s.
17 448.04 (1) (b) 1 and 3, (d) and, (e) and (er) must be found qualified by 2
18 members of the board.

19 SECTION 21. 448.05 (4m) of the statutes is created to read:

20 448.05 (4m) LICENSE TO PRACTICE PERFUSION. An applicant for a
21 license to practice perfusion must supply evidence satisfactory to the
22 board that he or she has successfully completed an educational program in
23 perfusion recognized by the board and accredited by the accreditation
24 committee for perfusion education and the committee on allied health edu-
25 cation and accreditation of the American medical association or its
26 successor.

27 SECTION 22. 448.05 (6) (a) of the statutes is amended to read:

1 448.05 (6) (a) The Except as provided in par. (am), the board shall
2 examine each applicant it finds eligible under this section in such
3 subject matters as the board deems applicable to the class of license or
4 certificate which the applicant seeks to have granted. Examinations may
5 be both written and oral. In lieu of its own examinations, in whole or in
6 part, the board may make such use as it deems appropriate of examinations
7 prepared, administered, and scored by national examining agencies, or by
8 other licensing jurisdictions of the United States or Canada. The board
9 shall specify passing grades for any and all examinations required.

10 SECTION 23. 448.05 (6) (am) of the statutes is created to read:

11 448.05 (6) (am) When examining an applicant for a license to practice
12 perfusion under par. (a), the board shall use an examination at least as
13 stringent and comprehensive as the certification examination used by the
14 American board of cardiovascular perfusion or its successor.

15 SECTION 24. 448.07 (1) (d) of the statutes is amended to read:

16 448.07 (1) (d) No registration may be permitted by the secretary of
17 the board in the case of any physician, perfusionist, occupational thera-
18 pist or occupational therapy assistant who has failed to meet the
19 requirements of s. 448.13 or any person whose license, certificate or
20 limited permit has been suspended or revoked and the registration of any
21 such person shall be deemed automatically annulled upon receipt by the
22 secretary of the board of a verified report of such suspension or
23 revocation, subject to the licensee's or permittee's right of appeal. A
24 person whose license, certificate or limited permit has been suspended or
25 revoked and subsequently restored shall be registered by the board upon
26 tendering a verified report of such restoration of the license, certifi-
27 cate or limited permit, together with an application for registration and
28 the registration fee.

1 SECTION 25. 448.13 (2) of the statutes is amended to read:

2 448.13 (2) Each perfusionist, occupational therapist or occupational
3 therapy assistant shall, in each 2nd year at the time of application for a
4 certificate of registration under s. 448.07, submit proof of completion of
5 continuing education requirements promulgated by rule by the board.

6 SECTION 26. 448.40 (2) (c) of the statutes is amended to read:

7 448.40 (2) (c) Establishing continuing education requirements for
8 license or certificate renewal for an a perfusionist, occupational thera-
9 pist or occupational therapy assistant under s. 448.13 (2).

10 SECTION 27. 448.40 (2) (e) of the statutes is created to read:

11 448.40 (2) (e) Establishing the scope of the practice of perfusion.
12 In promulgating rules under this paragraph, the board shall consult with
13 the perfusionists examining council.

14 SECTION 28. NONSTATUTORY PROVISIONS. (1) PERFUSIONISTS EXAMINING
15 COUNCIL; INITIAL APPOINTMENTS. (a) Notwithstanding section 15.407 (1)
16 (e) of the statutes, as created by this act, the initial perfusionist
17 members of the perfusionists examining council need not be licensed as
18 perfusionists by the medical examining board to be appointed to and serve
19 as members of the examining council.

20 (b) Notwithstanding section 15.407 (1) (e) of the statutes, as
21 created by this act, the initial members of the perfusionists examining
22 council shall be appointed by the first day of the 4th month beginning
23 after the effective date of this paragraph for the following terms:

- 24 1. One perfusionist, for a term expiring on July 1, 1995.
- 25 2. One perfusionist and the public member, for terms expiring on July
26 1, 1996.
- 27 3. One perfusionist and the physician, for terms expiring on July 1,
28 1997.

1 (2) WAIVER OF EXAMINATION REQUIREMENT. The medical examining board
2 may waive the examination requirement for licensure as a perfusionist
3 under section 448.05 (1) (c) of the statutes, section 448.05 ~~(6)~~ (a) of
4 the statutes, as affected by this act, and section 448.05 (6) ~~(am)~~ of the
5 statutes, as created by this act, for any individual who, before January
6 1, 1996, submits an application for licensure that includes evidence that
7 the individual meets at least one of the following requirements:

8 (a) During the period beginning on January 1, 1991, and ending on the
9 effective date of this paragraph, the individual performed perfusion, as
10 defined in section 448.01 (2x) of the statutes, as created by this act,
11 during at least 40 cardiopulmonary surgeries each year in a health care
12 facility licensed in the United States and, on the effective date of this
13 paragraph, his or her primary occupation was performing perfusion, as
14 defined in section 448.01 (2x) of the statutes, as created by this act,
15 during cardiopulmonary surgery in a health care facility licensed in the
16 United States.

17 (b) During the period beginning on January 1, 1988, and ending on the
18 effective date of this paragraph, the individual had 5 or more years of
19 experience performing perfusion, as defined in section 448.01 (2x) of the
20 statutes, as created by this act, during at least 40 cardiopulmonary
21 surgeries each year in a health care facility licensed in the United
22 States.

23 (c) The individual successfully completed, during the period begin-
24 ning on January 1, 1991, and ending on the effective date of this
25 paragraph, an educational program in perfusion approved by the committee
26 on allied health education and accreditation of the American medical
27 association and is certified as a clinical perfusionist by the American
28 board of cardiovascular perfusion.

1 SECTION 29. EFFECTIVE DATES. This act takes effect on January 1,
2 1995, except as follows:

3 (1) The treatment of section 15.407 (1) (e) of the statutes and
4 SECTION 28 (1) of this act take effect on the day after publication.

5

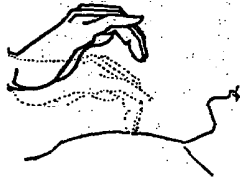
(End)

Amendment to Perfusionist licensure bill: On Page 9, line 1 substitute the following language:

Under the bill, the Medical Examining Board would be authorized to waive the *licensure education and examination requirement* for any applicant whom between January 1, 2003, and ending January 1, 2004, submits evidence that the individual meets at least **one** of the following requirements:

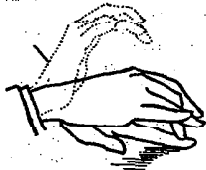
- (1) Between January 1, 1998, and January 1, 2003, the individual performed perfusion, as defined in the substitute amendment, during cardiac surgical cases ~~at least 40 cardiopulmonary surgeries each year~~ at a health care facility licensed by the United States and the individual's primary occupation on January 1, 2003, was performing perfusion during cardiopulmonary surgery in a licensed health care facility.
- (2) Between January 1, 1996, and January 1, 2003, the individual had five or more years of experience performing perfusion, as defined in the substitute amendment, during cardiac surgical cases ~~at least 40 cardiopulmonary surgeries each year~~ in a health care facility licensed by the United State; or
- (1) Between January 1, 1999, and January 1, 2003, the individual successfully completed an educational program in perfusion approved by the Commission for Accreditation of Allied Health Education Programs **and** is certified as a clinical perfusionist by the American Board of Cardiovascular Perfusion.

perceptorium (per'sep-to're-um) sensorium.
perchloride (per-klo'rid) a chloride that contains more chlorine than the ordinary chloride; an organic compound in which all the hydrogen atoms are substituted by chlorine, as in perchloroethylene (tetrachloroethylene), C₂Cl₄.
perchlormethane (per'klör-meth'än) carbon tetrachloride.
perchlormethylformate (per'klor-meth'il-for'mät) diposgene.
percine (per'sin) a protamine from the sperm of yellow perch, *Perca flavescens*.
percipient (per-sip'e-ent) 1. pertaining to perception. 2. an individual who perceives or is capable of perception.
percolate (per'ko-lät) [L. *percolare*] 1. to strain; to submit to percolation. 2. to trickle slowly through a substance. 3. a liquid that has been submitted to percolation.
percolation (per'ko-la'shun) [L. *percolatio*] the extraction of the soluble parts of a drug by causing a liquid solvent to flow slowly through it.
percolator (per'ko-la'tor) a vessel used in percolating drugs.
percomorph (per'ku-mort) pertaining to Percomorphi, an order of fishes whose liver oil is rich in vitamins A and D.
per contiguum (per kon-tig'u-um) [L.] in contiguity: arranged in such a way that the edges touch.
per continuum (per kon-tin'u-um) [L.] in continuity: without separation or break.
Percorten (per-kor'ten) trademark for preparations of desoxycorticosterone.
percuss (per-kus') [L. *percutere*] to subject to percussion.
percussible (per-kus't-b'l) discoverable on percussion.
percussion (per-kush'un) [L. *percussio*] 1. the act of striking a part with short, sharp blows as an aid in diagnosing the condition of the underlying parts by the sound obtained. 2. a method of massage; see *tapotement*. **auscultatory p.**, auscultation of the sound produced by percussion. **bimanual p.**, the usual manner of percussion in which the middle finger of the left hand is placed against the body wall and its nail is struck a quick blow with the end of the bent right middle finger. **coin p.**, see under *tests*. **comparative p.**, percussion of two or more areas in order to compare the sounds obtained. **deep p.**, percussion in which a firm blow is struck in order to obtain a note from a deep-seated tissue. **direct p.**, immediate percussion. **drop p.**, **drop stroke p.**, instrumental percussion in which the plexor is allowed to fall by its own weight on to the pleximeter, the elements considered in the examination being the sound heard, the vibrations felt in the handle of the plexor, and the rebound of the plexor seen. Called also *Lerch's p.* **finger p.**, that in which the fingers of one hand are used as a plexor, and those of the other as a pleximeter. **flat p.**, percussion in which the flat is brought down with a moderate thump over the area to be tested. **Goldscheider's p.**, 1. threshold percussion. 2. orthopercussion. **immediate p.**, that in which no pleximeter is used. **instrumental p.**, that in which a plexor or hammer is used. **Kora'nyi's p.**, see under *auscultation*. **Krönig's p.**, aus-



Immediate percussion (Külbs).

tatory percussion over the apex of the lungs in the diagnosis of tuberculosis. **Lerch's p.**, drop p. **mediate p.**, that in which a pleximeter is employed. **Murphy's p.**, piano p. **palpatory p.**, a combination of palpation and percussion, affording tactile rather than auditory impressions. **paradoxical p.**, resonance of the chest combined with abundant rales as in acute edema of the lungs. **pencil p.**, Plesch's p. **piano p.**, percussion by striking the body by the four fingers one after the other; beginning with the little finger; called also *Murphy's p.* **Plesch's p.**, percussion within the intercostal spaces to avoid



Strong percussion (Külbs).

setting the ribs into vibration, the pleximeter finger with the first interphalangeal joint flexed at a right angle. **pleximetric p.**,

mediate p. **respiratory p.**, percussion during respiration so as to bring out the difference in the percussion notes of inspiration and expiration. **slapping p.**, percussion made by a slapping blow; used in comparing the resonance. **strip p.**, percussion



Weak percussion (Külbs).

which starts from above and progresses downward, thus covering a "strip" of the chest wall. **tangential p.**, percussion with the pleximeter placed vertically on the body; the strokes being applied to the pleximeter in a direction parallel with the surface of the skin. **threshold p.**, percussion performed by tapping lightly with the finger upon a glass rod pleximeter, one end of which, fitted with a rubber cap, rests upon an intercostal space, the rod being held at an angle to the surface of the thorax and parallel to the borders of the organ to be delimited. This method confines the percussion vibrations to a very restricted area. Called also *Goldscheider's p.* **topographic p.**, the demarcation and outlining of a dull area by percussion to determine the boundaries of organs or parts of organs.

percussopunctator (per-kus'o-punk'ta-tor) an instrument for performing multiple acupuncture.

percussor (per-kus'or) [L. "striker"] an instrument for use in performing percussion.

percutaneous (per'ku-ta'ne-us) [per + L. *cutis*] performed through the skin, as injection of radiopaque material in radiological examination, or the removal of tissue for biopsy accomplished by a needle.

per cutem [L.] through the skin.

percuteur (per'koo-tür') [Fr.] an instrument for therapeutic or diagnostic percussion.

perreine (per-e'ir-in) [Port. *perreira*] a white alkaloid; C₁₂H₁₆N₂O, from the bark of *Geissospermum vellosi* Allem. (Apocynaceae), a tree of tropical America; antiperiodic, antipyretic, and tonic.

perencephaly (per'en-sef'ah-le) [Gr. *pēra* pouch + *enkephalos* brain] porencephalia.

perennial (per-en'ē-äl) [L. *perennis*, from *per* through + *annus* year] lasting through the year or for several years.

perethynol (per-eth'in-ol) (obs.) a colloidal suspension prepared from fresh horse heart in chlorethylene and alcohol for Vernes' test for syphilis. See *Vernes' test* (def. 1), under *tests*.

Perez's sign (pa-räth's') [Jorrie Perez, Spanish physician; died 1920] see under *sign*.

perfectionism (per-fek'shun-izm) a personality trait characterized by the setting of impossible standards, leading to frustration and self-condemnation.

perfilcon A (per-fil'kon) chemical name: 2-methyl-2-propenoic acid 8-hydroxyethyl ester polymer with 1-ethenyl-3-pyrrolidinone and 2-methyl-2-propenoic acid; a hydrophilic contact lens material, (C₂H₅O₂)_x(C₈H₁₁NO)_y(C₄H₇O₂)_z.

perflation (per-fla'shun) [L. *perflatio*] the act of blowing air into a space in order to force out secretions or other substances.

perforans (per'fo-ränz) [L.] penetrating; a term applied to various muscles and nerves. **p. manus**, *musculus flexor digitorum profundus*.

perforated (per'fo-rät'ed) [L. *perforatus*] pierced with holes.

perforation (per'fo-ra'shun) [L. *perforare* to pierce through] 1. the act of boring or piercing through a part. 2. a hole made through a part or substance. **Bezold's p.**, perforation of the inner surface of the mastoid bone. **mechanical p.**, an artificial opening or hole made by boring, piercing, or cutting through a structure or surface, such as the root of a tooth. **pathologic p.**, an opening or hole produced in a tissue surface or structure by a pathologic process, as may occur in internal resorption of a tooth.

perforator (per'fo-ra'tor) an instrument for piercing the bones, and especially for perforating the fetal head.

perforatorium (per'fo-rah-to're-um) acrosome.

perfrication (per'fri-ka'shun) [L. *perfricare* to rub] rubbing with an ointment or embrocation.

perfrigeration (per frij'or a'shun) [per + L. *frigere* to be cold] frostbite.

perfusate (per-fu'zät) a liquid that has been passed over or through the vessels of an organ or tissue.

perfuse (per-fuz) to pour over or through.

perfusion (per-fu'zhun) 1. the act of pouring over or through, especially the passage of a fluid through the vessels of a specific organ. 2. a liquid poured over or through an organ or tissue.

perhexiline maleate (per-heks't-lēn) chemical name: 2-(2,2-dicyclohexylethyl)piperazine (6,6-dihydroperazine 4'-carboxylate) dilator; C₁₈H₃₂N₂·C₄H₄O₄; used in the prophylaxis of angina of effort and has been used to control certain cardiac arrhythmias.

closure of a wound by the use of strands of tissue taken from the flaps of the wound.

autosensitization (aw''to-sen''si-ti-za'shun) sensitization toward one's own tissues; see *autoimmunization*, *erythrocyte a.*, *autoerythrocyte sensitization*; see under *syndrome*.

autosensitized (aw''to-sen''si-tizd) rendered hypersensitive to one's own serum or tissues; see *autoimmunization*.

autosepticemia (aw''to-sep''ti-se'me-ah) septicemia due to poisons developed within the body.

autoserodiagnosis (aw''to-se''ro-di-ag-no'sis) diagnostic use of a serum from the patient's own blood.

autoserosalvarsan (aw''to-se-ro-sal'var-san) Swift-Ellis treatment; see under *treatment*.

autoserous (aw''to-se'rus) accomplished by means of one's own serum.

autoserum (aw''to-se'rum) [*auto* + *serum*] a serum administered to the patient from whom it was derived.

autosexing (aw''to-seks'ing) in avian genetics, the deliberate breeding of an early-appearing sex-linked phenotype to distinguish male from female chicks.

autosite (aw''to-sit) [*auto* + Gr. *sitos* food] the larger, more nearly normal component of asymmetrical conjoined twins, to which the parasite is attached as a dependent growth.

autositic (aw''to-sit'ik) pertaining to or of the nature of an autosite.

autosmia (aw''to-se'me-ah) [*auto* + Gr. *osmē* smell] the smelling of one's own bodily odor.

autosomal (aw''to-so'mal) pertaining to an autosome.

autosomatognosis (aw''to-so'mah-tog-no'sis) [*auto* + Gr. *sōma* body + *gnosis* recognition] the feeling that a part of the body that has been removed, as by amputation, is still present. See *phantom limb*, under *limb*.

autosomatognostic (aw''to-so'mah-tog-nos'tik) pertaining to autosomatognosis.

autosome (aw''to-sōm) [*auto* + Gr. *sōma* body] 1. any ordinary paired chromosome as distinguished from a sex chromosome; in man there are 22 pairs of autosomes. 2. autophagosome.

autospERMOTOXIN (aw''to-sper'mo-tox'in) a substance capable of agglutinating the spermatozoa of the animal in which they are formed.

autosplenectomy (aw''to-splē-nek'to-me) the almost complete disappearance of the spleen through progressive fibrosis and shrinkage, such as may occur in sickle cell anemia.

autospray (aw''to-spra) an apparatus for spraying, to be used by the patient himself.

autosterilization (aw''to-ster'i-li-za'shun) a supposed tendency of certain viruses (e.g., poliovirus) to disappear from the tissues after a short time; a concept found to be erroneous.

autostimulation (aw''to-stim''u-la'shun) stimulation of an animal with antigenic material originating from its own tissues.

autosuggestibility (aw''to-sug-jes'ti-bil'i-te) a peculiar mental state with loss of will, in which suggestion becomes easy.

autosuggestion (aw''to-sug-jes'chun) [*auto* + *suggestion*] the spontaneous occurrence to the mind of ideas produced in the individual himself. Also the peculiar mental state often occurring after accidents, in which suggestions are easily received, so that the slightest injury to a part induces an hysterical paralysis or other disability. Cf. *ectosuggestion*.

autopsynnoia (aw''to-sin-noi'ah) [*auto* + Gr. *synnoia* meditation] (obs.) a mental condition in which the patient is so concentrated in his thoughts and hallucinations that he loses all interest in the outside world.

autosynthesis (aw''to-sin'thē-sis) self-reproduction.

autotemnous (aw''to-tem'nus) [*auto* + Gr. *temnein* to cut] capable of spontaneous division.

autotherapy (aw''to-ther'ah-pe) [*auto* + Gr. *therapeia* treatment] the spontaneous cure of disease. 2. self-cure. 3. treatment of disease by filtrates from the patient's own secretions.

autotomographic (aw''to-tom'o-graf'ik) pertaining to autotomography.

autotomography (aw''to-to-mog'rah-fe) a method of body-section roentgenography involving movement of the patient instead of the x-ray tube.

autotomy (aw''to-to'me) [*auto* + Gr. *tomē* cut] 1. self-division; 2. the spontaneous shedding of an appendage, as in invertebrates.

topagnosia (aw''to-top'ag-no'se-ah) [*auto* + Gr. *topos* place + *gnosis* knowledge] inability to localize or orient to different parts of the body; body image agnosia.

autotoxemia (aw''to-tox-se'me-ah) autotoxiosis.

autotoxic (aw''to-tox'ik) [*auto* + Gr. *toxikon* poison] pertaining to autointoxication.

autotoxins (aw''to-tox'el-ko'sis) [*auto* + Gr. *toxikon* poison + *toxin*] poisons produced by material generated within the body; called *autotoxemia*.

autotoxin (aw''to-tox'in) any pathogenic principle developed within the body from tissue metamorphosis.

autotoxiosis (aw''to-tox'is) autotoxiosis.

autotransfusion (aw''to-trans-fū'zhun) reinfusion of the patient's own blood.

autotransplant (aw''to-trans'plant) autograft.

autotransplantation (aw''to-trans'plan-ta'shun) the operation of taking a piece of tissue from one part of a subject and inserting it in another part of the same individual; called also *autografting*.

autotrépanation (aw''to-trep'ah-na'shun) erosion of the skull by a brain tumor.

autotroph (aw''to-trōf) an autotrophic organism. **facultative a.**, a microorganism which can live as a chemotroph or as a chemoheterotroph; an organism with a flexible requirement for oxidizable substrate. **obligate a.**, a microorganism that can exist only by autotrophic means.

autotrophic (aw''to-trōf'ik) [*auto* + Gr. *trophē* nutrition] self-nourishing; said of organisms that can build their organic constituents from carbon dioxide and inorganic salts. Cf. *heterotrophic*.

autotrophy (aw''tot'ro-fe) the state of being autotrophic; autotrophic nutrition.

autotuberculin (aw''to-tu-ber'ku-lin) tuberculin made from cultures obtained from a patient's own sputum.

autotuberculinization (aw''to-tu-ber'ku-lin-iz-a'shun) absorption of tuberculin or similar products from a patient's own foci of disease.

autovaccination (aw''to-vak'si-na'shun) 1. treatment of a patient with autovaccine. 2. treatment of a patient by causing liberation of antigenic products from some invading microorganism or diseased tissue and thus bringing about the formation of antibodies.

autovaccine (aw''to-vak'sen) a bacterial vaccine prepared from cultures of organisms isolated from the patient's own secretions or tissues.

autovaccinotherapy (aw''to-vak'si-no-ther'ah-pe) autovaccination.

autoxemia (aw''tok-se'me-ah) autotoxiosis.

autoxidation (aw''tok-si-da'shun) spontaneous oxidation of a substance that is in direct contact with oxygen.

autoxidizable (aw''tok-si-diz'ah-bl) spontaneously oxidizable.

autozygous (aw''to-zi'gus) homozygous by virtue of parental descent from a common ancestor.

auxanogram (awks-an'o-gram) the plate culture in auxanography.

auxanographic (awks'an-o-graf'ik) pertaining to auxanography.

auxanography (awks'an-og'rah-fe) [Gr. *auxanein* to increase + *graphein* to write] determination of the most suitable medium for a microbe by placing drops of various solutions on a plate containing a poor medium; the microbe will develop the strongest colonies on the spot that contains the best medium.

auxanology (awks'an-ol'o-je) [Gr. *auxanein* to increase + *-logos* (obs.) the science of growth; applied especially to the study or science of the growth of microorganisms.

auxesis (awk-se'sis) [Gr. *auxesis* increase in the size of an organism; often used specifically to designate increase in volume of an organism as a result of growth of its individual cells, without increase in their number.

auxetic (awk-set'ik) [Gr. *auxētikos* growing] 1. pertaining to auxesis. 2. a substance that stimulates auxesis.

auxiliary (awk-sil'e-a're) [L. *auxiliaris*] 1. affording aid. 2. that which affords aid. **torquing a.**, an accessory arch wire used to apply torsion on a tooth in any of the three planes of space.

auxiliomotor (awk-sil'e-o-mo'tor) aiding or stimulating motion.

auxilyletic (awk-sil'ē-lik) [Gr. *auxein* to increase + *lysis*] increasing the lytic or destructive power.

auximone (awk'si-mōn) [Gr. *auxein* to increase + *hormone*] a hypothetical substance, akin to vitamin, that favors growth in plants.

auxin (awk'sin) [Gr. *auxē* increase] a phytohormone (plant hormone) from sprouts of plants and from human urine that promotes growth in plant cells and tissues by elongation rather than by multiplication of cells; there are two forms, *auxin A*, a cyclopentene derivative of trihydroxyvaleric acid, C₁₁H₂₀O₅, and *auxin B*, which is heteroauxin.

auxilometer (awk'se-om'e-ter) [Gr. *auxein* to increase + *metron* measure] 1. an apparatus for measuring the magnifying powers of lenses; called also *auxometer*. 2. a dynamometer.

auxo- [Gr. *auxē* increase], a combining form denoting relationship to growth, or to stimulation or to acceleration.

auxoaction (awk'or-ak'shun) the accelerating or stimulating action of a substance.

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This website is intended to provide information about certification and recertification to those practicing clinical perfusion. Non-perfusionists may find addition information about the field and about career opportunities by viewing the [Perfusion Links](#) page.

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State of Wisconsin
2001 - 2002 LEGISLATURE

LRB-0942/1

MDK:.....

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D-NOTE

2001 BILL

By 12/22

Due

LPS: Check auto-rgs.

- 1 AN ACT ^{GEN. STAT.} relating to: licensing perfusionists, creating a perfusionists
- 2 examining council, and granting rule-making authority.

Analysis by the Legislative Reference Bureau

This bill requires a person who practices perfusion or represents that he or she is a perfusionist to be licensed by the medical examining board (board). The bill defines "perfusion" as operating and managing extracorporeal circulation to support, temporarily replace, measure, treat, or supplement the cardiopulmonary and circulatory system of a patient. "Perfusion" includes using blood testing and advanced life support techniques and technologies, autotransfusion, and the administration of blood, blood products, and anesthetic and pharmacological agents.

The bill allows a person who is licensed by the board to practice perfusion under the orders and supervision of a physician. In addition, the bill requires the board to promulgate rules that define the scope of practice of perfusion. A person licensed under the bill is subject to the board's authority under current law to take disciplinary action, including limiting, suspending, or revoking the license, for engaging in unprofessional conduct or negligence in treatment. In addition, a person must renew his or her license every 2 years and complete any continuing education requirements established by the board by rule.

The following persons are exempt from the bill's licensure requirement: 1) perfusionists employed in the armed services or federal health services; 2) perfusion students; 3) out-of-state perfusionists who consult with licensed perfusionists; 4) persons who assist physicians, except for physician assistants and perfusionists; 5) persons who perform autotransfusion or blood conservation techniques under the

who are

the

BILL

direction and supervision of physicians; 6) persons ^{who are} certified or eligible to be certified by the American Board of Cardiovascular Perfusion ^{and} who practice perfusion no more than 30 days in a year; and 7) federal agency employees who provide perfusion services solely under the direction or control of their employer.

To qualify for licensure under the bill, a person must have completed an educational program in perfusion recognized by the board and accredited by the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs. In addition, the person must also pass an examination administered by the board that is at least as stringent and comprehensive as the certification examination used by the American Board of Cardiovascular Perfusion.

The bill also allows the following persons to be licensed without completing the education program described above or passing the examination: 1) a person whose primary occupation on January 1, 2003, is performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States; 2) a person ^{of} who, between January 1, 1996, and January 1, 2003, had 5 years or more experience ⁱⁿ performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States; and 3) a person ^{who is} certified as a clinical perfusionist by the American Board of Cardiovascular Perfusion and who, between January 1, 1999, and January 1, 2003, completed an education program in perfusion approved by the Commission on Accreditation of Allied Health Education Programs. To qualify for a license under these provisions, a person must apply by January 1, 2004.

Additionally, the bill allows the board to issue a temporary license ^{who} to practice perfusion to a person who has completed the education program but ^{who} has not yet passed the examination. A temporary license is valid for one year and may be renewed each year for not more than 5 years. A person holding a temporary license may practice perfusion only under the supervision and direction of a person who is licensed under the bill.

The bill establishes a perfusionists examining council ^{who are} that serves the board in an advisory capacity. The council consists of 3 members ^{who} licensed under the bill ^{and} ^{who} appointed by the board, one physician member appointed by the board, and one public member appointed by the governor. The physician must be either a thoracic surgeon or a cardiovascular anesthesiologist. The council members serve ^{who is} 3-year terms.

Finally, the bill specifies that a person ^{who is} licensed under the bill is a health care provider for purposes of state laws regarding patient health care records, prohibiting discrimination based on acquired immunodeficiency syndrome, and protecting health care providers who report violations of state laws.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

BILL

1 **SECTION 1.** 15.08 (1m) (b) of the statutes is amended to read:

2 15.08 (1m) (b) The public members of the chiropractic examining board, the
3 dentistry examining board, the hearing and speech examining board, the medical
4 examining board, perfusionists examining council, respiratory care practitioners
5 examining council and council on physician assistants, the board of nursing, the
6 nursing home administrator examining board, the veterinary examining board, the
7 optometry examining board, the pharmacy examining board, the examining board
8 of social workers, marriage and family therapists and professional counselors, and
9 the psychology examining board shall not be engaged in any profession or occupation
10 concerned with the delivery of physical or mental health care.

History: 1971 c. 40; 1975 c. 86, 199; 1977 c. 418; 1979 c. 32; 1979 c. 34 ss. 32e to 32s, 2102 (45) (a); 1979 c. 221; 1981 c. 94; 1983 a. 403, 524; 1985 a. 332, 340; 1987 a. 399; 1989 a. 229, 316, 359; 1991 a. 39, 160, 316; 1993 a. 105, 107, 184, 490; 1995 a. 245; 1997 a. 175; 1999 a. 180.

11 **SECTION 2.** 15.407 (2m) of the statutes is created to read:

12 15.407 (2m) **PERFUSIONISTS EXAMINING COUNCIL.** There is created a perfusionists
13 examining council in the department of regulation and licensing and serving the
14 medical examining board in an advisory capacity. The council shall consist of the
15 following members appointed for 3-year terms:

16 (a) Three licensed perfusionists appointed by the medical examining board.

17 (b) One physician who is a thoracic surgeon or a cardiovascular
18 anesthesiologist and who is appointed by the medical examining board.

19 (c) One public member appointed by the governor.

20 **SECTION 3.** 146.81 (1) (d) of the statutes is amended to read:

21 146.81 (1) (d) A physician, physician assistant, perfusionist, or respiratory care
22 practitioner licensed or certified under subch. II of ch. 448.

History: 1979 c. 221; 1981 c. 39 s. 22; 1983 a. 27; 1983 a. 189 s. 329 (1); 1983 a. 535; 1985 a. 315; 1987 a. 27, 70, 264; 1987 a. 399 ss. 403br, 491r; 1987 a. 403; 1989 a. 31, 168, 199, 200, 229, 316, 359; 1991 a. 39, 160, 269; 1993 a. 27, 32, 105, 112, 183, 385, 443, 496; 1995 a. 27 s. 9145 (1); 1995 a. 77, 98, 352; 1997 a. 27, 67, 75, 156, 175; 1999 a. 9, 32, 151, 180, 188; s. 13.93 (2) (c).

23 **SECTION 4.** 146.997 (1) (d) 4. of the statutes is amended to read:

BILL

1 146.997 (1) (d) 4. A physician, podiatrist, perfusionist, or physical therapist
2 licensed under ch. 448.

3 History: 1999 a. 176, 186.

3 **SECTION 5.** 155.01 (7) of the statutes is amended to read:

4 155.01 (7) "Health care provider" means a nurse licensed or permitted under
5 ch. 441, a chiropractor licensed under ch. 446, a dentist licensed under ch. 447, a
6 physician, physician assistant, perfusionist, podiatrist, physical therapist,
7 occupational therapist, or occupational therapy assistant licensed under ch. 448, a
8 person practicing Christian Science treatment, an optometrist licensed under ch.
9 449, a psychologist licensed under ch. 455, a partnership thereof, a corporation or
10 limited liability company thereof that provides health care services, an operational
11 cooperative sickness care plan organized under ss. 185.981 to 185.985 that directly
12 provides services through salaried employees in its own facility, or a home health
13 agency, as defined in s. 50.49 (1) (a).

14 History: 1989 a. 200; 1991 a. 281; 1993 a. 27, 105, 112, 490; 1995 a. 27 ss. 4395, 9126 (19); 1997 a. 35, 67; 1999 a. 9, 180.

14 **SECTION 6.** 252.14 (1) (ar) 4c. of the statutes is created to read:

15 252.14 (1) (ar) 4c. A perfusionist licensed under subch. II of ch. 448.

16 **SECTION 7.** 440.08 (2) (a) 54m. of the statutes is created to read:

17 440.08 (2) (a) 54m. Perfusionist: November 1st of each odd-numbered year; \$56.

18 **SECTION 8.** 448.015 (1e) of the statutes is created to read:

19 448.015 (1e) "Extracorporeal circulation" means the diversion of a patient's
20 blood through a heart-lung machine or a similar device that assumes the functions
21 of the patient's heart or lungs or both.

22 **SECTION 9.** 448.015 (1m) of the statutes is created to read:

23 448.015 (1m) "Perfusion" means that branch or system of treating the sick
24 which is limited to the operation and management of extracorporeal circulation to

BILL

1 support, temporarily replace, measure, treat, or supplement the cardiopulmonary
2 and circulatory system of a patient, including, when necessary to and part of the
3 management and operation of extracorporeal circulation, the use of blood testing and
4 advanced life support techniques and technologies, autotransfusion, and the
5 administration of blood, blood products, and anesthetic and pharmacological agents.

6 **SECTION 10.** 448.015 (1s) of the statutes is created to read:

7 448.015 (1s) "Perfusionist" means an individual who practices perfusion.

8 **SECTION 11.** 448.02 (1) of the statutes is amended to read:

9 448.02 (1) LICENSE. The board may grant licenses, including various classes
10 of temporary licenses, to practice medicine and surgery, to practice perfusion, and to
11 practice as a physician assistant.

History: 1975 c. 383, 421; 1977 c. 418; 1981 c. 135, 375, 391; 1983 a. 188 s. 10; 1983 a. 189 s. 329 (5); 1983 a. 253, 538; 1985 a. 29; 1985 a. 146 s. 8; 1985 a. 315, 332, 340; 1987 a. 27, 399, 403; 1989 a. 229; 1991 a. 186; 1993 a. 105, 107; 1995 a. 309; 1997 a. 67, 175, 191, 311; 1999 a. 32, 180.

12 **SECTION 12.** 448.03 (1) (c) of the statutes is created to read:

13 448.03 (1) (c) No person may practice perfusion, attempt to do so, or make a
14 representation as authorized to do so, without a license to practice perfusion granted
15 by the board.

16 **SECTION 13.** 448.03 (2) (b) of the statutes is amended to read:

17 448.03 (2) (b) The performance of official duties by a physician or perfusionist
18 of any of the armed services or federal health services of the United States.

History: 1975 c. 383, 421; 1977 c. 164; 1979 c. 317; 1985 a. 29; 1987 a. 40, 399; 1989 a. 31, 229; 1991 a. 23; 1993 a. 105, 107, 490; 1995 a. 27, 201; 1997 a. 67, 175, 311; 1999 a. 32, 180.

19 **SECTION 14.** 448.03 (2) (c) of the statutes is amended to read:

20 448.03 (2) (c) The activities of a medical student, respiratory care student,
21 perfusion student, or physician assistant student required for such student's

BILL**SECTION 14**

1 education and training, or the activities of a medical school graduate required for
2 training as required in s. 448.05 (2).

History: 1975 c. 383, 421; 1977 c. 164; 1979 c. 317; 1985 a. 29; 1987 a. 40, 399; 1989 a. 31, 229; 1991 a. 23; 1993 a. 105, 107, 490; 1995 a. 27, 201; 1997 a. 67, 175, 311; 1999 a. 32, 180.

3 **SECTION 15.** 448.03 (2) (d) of the statutes is amended to read:

4 448.03 (2) (d) Actual consultation or demonstration by licensed physicians or
5 perfusionists or certified respiratory care practitioners of other states or countries
6 with licensed physicians or perfusionists or certified respiratory care practitioners
7 of this state.

History: 1975 c. 383, 421; 1977 c. 164; 1979 c. 317; 1985 a. 29; 1987 a. 40, 399; 1989 a. 31, 229; 1991 a. 23; 1993 a. 105, 107, 490; 1995 a. 27, 201; 1997 a. 67, 175, 311; 1999 a. 32, 180.

8 **SECTION 16.** 448.03 (2) (k) of the statutes is amended to read:

9 448.03 (2) (k) Any persons² other than physician assistants or perfusionists² who
10 assist physicians.

History: 1975 c. 383, 421; 1977 c. 164; 1979 c. 317; 1985 a. 29; 1987 a. 40, 399; 1989 a. 31, 229; 1991 a. 23; 1993 a. 105, 107, 490; 1995 a. 27, 201; 1997 a. 67, 175, 311; 1999 a. 32, 180.

11 **SECTION 17.** 448.03 (2) (L) of the statutes is created to read:

12 448.03 (2) (L) A person performing autotransfusion or blood conservation
13 techniques under the direction and supervision of a licensed physician.

14 **SECTION 18.** 448.03 (2) (m) of the statutes is created to read:

15 448.03 (2) (m) A person practicing perfusion for not more than 30 days in a year,
16 if the person is certified or eligible to be certified as a clinical perfusionist by the
17 American Board of Cardiovascular Perfusion.

18 **SECTION 19.** 448.03 (2) (n) of the statutes is created to read:

19 448.03 (2) (n) A person employed as a perfusionist by a federal agency, as
20 defined in s. 59.57 (2) (c) 1., if the person provides perfusion services solely under the
21 direction or control of the federal agency by which he or she is employed.

22 **SECTION 20.** 448.03 (3) (f) of the statutes is created to read:

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1 448.03 (3) (f) A person who is not licensed to practice perfusion by the board
2 may not designate himself or herself as a perfusionist, use or assume the title
3 "licensed perfusionist" or the abbreviation "L.P." or use any other title, letters, or
4 designation that represents or may tend to represent the person as a perfusionist.

5 This paragraph does not apply to any of the following:

6 1. Any person employed as a perfusionist by a federal agency, as defined in s.
7 59.57 (2) (c) 1., if the person provides perfusion services solely under the direction or
8 control of the federal agency by which he or she is employed.

9 2. Any person pursuing a supervised course of study leading to a degree or
10 certificate in perfusion under an accredited or approved educational program, if the
11 person is designated by a title that clearly indicates his or her status as a student or
12 trainee.

13 3. Any person practicing perfusion under a temporary license issued under s.
14 448.04 (1) (e), if the person is designated by a title that clearly indicates that he or
15 she is practicing under a temporary license.

16 **SECTION 21.** 448.04 (1) (d) of the statutes is created to read:

17 448.04 (1) (d) *License to practice perfusion.* A person holding a license to
18 practice perfusion may practice perfusion under the orders and supervision of a
19 physician.

20 **SECTION 22.** 448.04 (1) (e) of the statutes is created to read:

21 448.04 (1) (e) *Temporary license to practice perfusion.* The board may, by rule,
22 provide for a temporary license to practice perfusion for a person who satisfies the
23 requirements of s. 448.05 (3) but who has not passed an examination under s. 448.05
24 (6). The board may issue a temporary license for a period not to exceed one year and
25 may renew a temporary license annually for not more than 5 years. A person who

BILL

1 holds a temporary license may not practice perfusion unless the person is under the
2 supervision and direction of a licensed perfusionist at all times while the person is
3 performing perfusion. The board may promulgate rules governing supervision by
4 licensed perfusionists, except that those rules may not require the immediate
5 physical presence of the supervising, licensed perfusionist.

6 **SECTION 23.** 448.05 (1) (d) of the statutes is amended to read:

7 448.05 (1) (d) Be found qualified by three-fourths of the members of the board,
8 except that an applicant for a temporary license under s. 448.04 (1) (b) 1. and 3. and
9 (e) must be found qualified by 2 members of the board.

History: 1975 c. 383, 421; 1979 c. 221; 1981 c. 380; 1981 c. 391 s. 211; 1987 a. 399; 1989 a. 229; 1991 a. 180; 1993 a. 105, 107; 1995 a. 27 s. 9126 (19); 1995 a. 171, 172, 245; 1997 a. 27, 67, 175; 1999 a. 180.

10 **SECTION 24.** 448.05 (3) of the statutes is created to read:

11 448.05 (3) LICENSE TO PRACTICE PERFUSION. An applicant for a license to practice
12 perfusion must supply evidence satisfactory to the board that he or she has
13 successfully completed an educational program in perfusion recognized by the board
14 and accredited by the Accreditation Committee for Perfusion Education of the
15 Commission on Accreditation of Allied Health Education Programs or its successor.

16 **SECTION 25.** 448.05 (6) (a) of the statutes is amended to read:

17 448.05 (6) (a) ~~The~~ Except as provided in par. (am), the board shall examine each
18 applicant it finds eligible under this section in such subject matters as the board
19 deems applicable to the class of license or certificate which the applicant seeks to
20 have granted. Examinations may be both written and oral. In lieu of its own
21 examinations, in whole or in part, the board may make such use as it deems
22 appropriate of examinations prepared, administered, and scored by national
23 examining agencies, or by other licensing jurisdictions of the United States or

BILL

1 Canada. The board shall specify passing grades for any and all examinations
2 required.

History: 1975 c. 383, 421; 1979 c. 221; 1981 c. 380; 1981 c. 391 s. 211; 1987 a. 399; 1989 a. 229; 1991 a. 180; 1993 a. 105, 107; 1995 a. 27 s. 9126 (19); 1995 a. 171, 172, 245; 1997 a. 27, 67, 175; 1999 a. 180.

3 **SECTION 26.** 448.05 (6) (am) of the statutes is created to read:

4 448.05 (6) (am) When examining an applicant for a license to practice perfusion
5 under par. (a), the board shall use an examination at least as stringent and
6 comprehensive as the certification examination used by the American Board of
7 Cardiovascular Perfusion or its successor.

8 **SECTION 27.** 448.07 (1) (d) of the statutes is amended to read:

9 448.07 (1) (d) No registration may be permitted by the secretary of the board
10 in the case of any physician or perfusionist who has failed to meet the requirements
11 of s. 448.13 or any person whose license, certificate[✓] or limited permit has been
12 suspended or revoked and the registration of any such person shall be deemed
13 automatically annulled upon receipt by the secretary of the board of a verified report
14 of such suspension or revocation, subject to the licensee's or permittee's right of
15 appeal. A person whose license, certificate[✓] or limited permit has been suspended or
16 revoked and subsequently restored shall be registered by the board upon tendering
17 a verified report of such restoration of the license, certificate, or limited permit,
18 together with an application for registration and the registration fee.

History: 1975 c. 383, 421; 1977 c. 29, 131, 418; 1979 c. 162; 1987 a. 27, 264, 399; 1991 a. 39; 1995 a. 245; 1997 a. 175; 1999 a. 180.

19 **SECTION 28.** 448.13 (2) of the statutes is created to read:

20 448.13 (2) Each person licensed as a perfusionist shall, in each 2nd year at the
21 time of application for a certificate of registration under s. 448.07[✓], submit proof of
22 completion of continuing education requirements promulgated by rule by the board.

23 **SECTION 29.** 448.40 (2) (b) of the statutes is created to read:

BILL**SECTION 29**

1 448.40 (2) (b) Establishing the scope of the practice of perfusion. In
2 promulgating rules under this paragraph, the board shall consult with the
3 perfusionists examining council.

4 **SECTION 30.** 448.40 (2) (c) of the statutes is created to read:

5 448.40 (2) (c) Establishing continuing education requirements for renewal of
6 a license to practice perfusion under s. 448.13 (2). ✓

7 **SECTION 31. Nonstatutory provisions.**

8 (1) PERFUSIONISTS EXAMINING COUNCIL; INITIAL APPOINTMENTS. Notwithstanding
9 section 15.407 (2m) ✓ of the statutes, as created by this act:

10 (a) The initial perfusionist members of the perfusionists examining council
11 need not be licensed to practice perfusion by the medical examining board, to be
12 appointed to and serve as members of the examining council. *in order*

13 (b) The initial members of the perfusionists examining council shall be
14 appointed by the first day of the 4th month beginning after the effective date of this
15 paragraph for the following terms:

- 16 1. One perfusionist, for a term expiring on July 1, 2004.
- 17 2. One perfusionist and the public member, for terms expiring on July 1, 2005.
- 18 3. One perfusionist and the physician, for terms expiring on July 1, 2006.

19 (2) WAIVER OF LICENSURE REQUIREMENTS.

20 (a) In this subsection, "perfusion" has the meaning given in section 448.015
21 (1m) ✓ of the statutes, as created by this act.

22 (b) Notwithstanding section 448.05 (1) (intro.), (a), (b), and (c) of the statutes,
23 section 448.05 (1) (d) ✓ of the statutes, as affected by this act, section 448.05 (3) ✓ of the
24 statutes, as created by this act, 448.05 (6) (a) ✓ of the statutes, as affected by this act,
25 section 448.05 (6) (am) ✓ of the statutes, as created by this act, section 448.05 (7) ✓ of the

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1 statutes, and section 448.06 (1) of the statutes, the medical examining board shall
2 grant a license to practice perfusion to any individual who, before January 1, 2004,
3 submits an application for licensure that includes evidence satisfactory to the board
4 that the individual meets at least one of the following requirements:

5 1. On January 1, 2003, the individual's primary occupation is performing
6 perfusion during cardiopulmonary surgery at a health care facility licensed in the
7 United States.

8 2. During the period beginning on January 1, 1996, and ending on January 1,
9 2003, the individual has had 5 or more years of experience performing perfusion
10 during cardiopulmonary surgeries at a health care facility licensed in the United
11 States.

12 3. The individual is certified as a clinical perfusionist by the American Board
13 of Cardiovascular Perfusion and, during the period beginning on January 1, 1999,
14 and ending on January 1, 2003, the individual has successfully completed an
15 educational program in perfusion approved by the Commission on Accreditation of
16 Allied Health Education Programs.

17 (3) INITIAL LICENSE RENEWAL. Notwithstanding section 440.08 (2) (a) 54m. of the
18 statutes, as created by this act, and section 448.07 (2) of the statutes, if the length
19 of time between the effective date of this subsection and November 1, 2003, is less
20 than 2 years, the department of regulation and licensing may reduce the renewal fee
21 for licenses to practice perfusion that expire on November 1, 2003, by an amount
22 that, as determined by the department, reflects such length of time.

23 **SECTION 32. Effective dates.** This act takes effect on the first day of the 8th
24 month beginning after publication, except as follows:

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1 (1) The treatment of section 15.407 (2m) of the statutes and SECTION 31 (1) and
2 (2) take effect on the day after publication.

3 (END)

of this act

a.r.

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/1dn

MDK: f...
fmj

Representative Jensen:

Please review this bill, which is based on 1993 LRBs0399/2, very carefully to make sure that it achieves your intent. In particular, please note the following:

1. The \$56 renewal fee is based on DORL's most recent fee study for the upcoming budget.

2. The bill includes licensed perfusionists under s. 146.997 (1) (d) 4., stats. As a result, a licensed perfusionist has the same protections as other health care professionals regarding the reporting of violations of state law. Is this okay?

3. Is the amendment of s. 448.03 (2) (k), stats., okay?

4. "Perfusionist" is defined as a person who practices perfusion, rather than a person who is licensed by the board to practice perfusion. Without this change, other provisions of subch. II of ch. 448 would not make sense (see, for example, the exemption from licensure for a "perfusionist" of the armed services).

5. Proposed s. 448.05 (3) refers to the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs or its successor. Are the names correct? Note also that I assume that the Accreditation Committee for Perfusion Education is a lesser-included entity of the Commission on Accreditation of Allied Health Education Programs. Is this correct? On a related point, please check the reference to the Commission in the waiver-of-licensure requirements in the nonstatutory provisions of the bill. ^ ^

6. The general effective date of the bill is delayed until the first day of the 8th month after publication. I selected 8 months because it is twice the 4 months required for initial appointments to the examining council. Please contact me if you want any changes to the delayed effective date.

7. I changed the first alternative under the waiver-of-licensure requirements so that an individual need only submit evidence that, on January 1, 2003, his or her primary occupation was performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States. I eliminated the requirement that the individual also submit evidence that he or she performed perfusion at a licensed health care facility at any time during the period beginning on January 1, 1998, and ending on January 1, 2003. I don't think that the eliminated requirement makes much of a

substantive difference. For example, an individual who performed perfusion on only a single occasion during this time period would satisfy the requirement. Please contact me if you want any changes.

8. A person who is issued a license under the bill will be required to renew the license and pay a renewal fee every 2 years. The first renewal fee is due on November 1, 2003. I created a nonstatutory provision that requires DORL to reduce the amount of the first renewal fee if the bill has not been in effect for 2 years prior to November 1, 2003. The reason for the reduction is that it doesn't seem appropriate to require a person to pay the full amount of the renewal fee if the bill has not been in effect for 2 years. Is this okay?

9. You might want to consider changing the name of the council from "perfusionists examining council" to "council on perfusionists". The reason is that the council's role is not limited to advising the medical examining board on the examination of perfusionists. (However, other councils are called examining councils even though they consult on more than examinations.) Also, please make sure that the council's role is correctly stated in the bill. Proposed s. 15.407 (2m) states that the council serves the medical examining board in an advisory capacity and proposed s. 448.40 (2) (b) requires the medical examining board to consult with the council in promulgating rules on scope of practice. However, note that proposed s. 448.40 (2) (c) does not require the medical examining board to consult with the council in promulgating continuing education rules. Are these provisions okay?

Mark D. Kunkel
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DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/1dn
MDK:kmg:pg

December 20, 2000

Representative Jensen:

Please review this bill, which is based on 1993 LRBs0399/2, very carefully to make sure that it achieves your intent. In particular, please note the following:

1. The \$56 renewal fee is based on DORL's most recent fee study for the upcoming budget.
2. The bill includes licensed perfusionists under s. 146.997 (1) (d) 4., stats. As a result, a licensed perfusionist has the same protections as other health care professionals regarding the reporting of violations of state law. Is this okay?
3. Is the amendment of s. 448.03 (2) (k), stats., okay?
4. "Perfusionist" is defined as a person who practices perfusion, rather than a person who is licensed by the board to practice perfusion. Without this change, other provisions of subch. II of ch. 448 would not make sense (see, for example, the exemption from licensure for a "perfusionist" of the armed services).
5. Proposed s. 448.05 (3) refers to the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs or its successor. Are the names correct? Note also that I assume that the Accreditation Committee for Perfusion Education is a lesser-included entity of the Commission on Accreditation of Allied Health Education Programs. Is this correct? On a related point, please check the reference to the commission in the waiver-of-licensure requirements in the nonstatutory provisions of the bill.
6. The general effective date of the bill is delayed until the first day of the 8th month after publication. I selected 8 months because it is twice the 4 months required for initial appointments to the examining council. Please contact me if you want any changes to the delayed effective date.
7. I changed the first alternative under the waiver-of-licensure requirements so that an individual need only submit evidence that, on January 1, 2003, his or her primary occupation was performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States. I eliminated the requirement that the individual also submit evidence that he or she performed perfusion at a licensed health care facility at any time during the period beginning on January 1, 1998, and ending on January 1, 2003. I don't think that the eliminated requirement makes much of a

substantive difference. For example, an individual who performed perfusion on only a single occasion during this time period would satisfy the requirement. Please contact me if you want any changes.

8. A person who is issued a license under the bill will be required to renew the license and pay a renewal fee every 2 years. The first renewal fee is due on November 1, 2003. I created a nonstatutory provision that requires DORL to reduce the amount of the first renewal fee if the bill has not been in effect for 2 years prior to November 1, 2003. The reason for the reduction is that it doesn't seem appropriate to require a person to pay the full amount of the renewal fee if the bill has not been in effect for 2 years. Is this okay?

9. You might want to consider changing the name of the council from "perfusionists examining council" to "council on perfusionists". The reason is that the council's role is not limited to advising the medical examining board on the examination of perfusionists. (However, other councils are called examining councils even though they consult on more than examinations.) Also, please make sure that the council's role is correctly stated in the bill. Proposed s. 15.407 (2m) states that the council serves the medical examining board in an advisory capacity and proposed s. 448.40 (2) (b) requires the medical examining board to consult with the council in promulgating rules on scope of practice. However, note that proposed s. 448.40 (2) (c) does not require the medical examining board to consult with the council in promulgating continuing education rules. Are these provisions okay?

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Drafters Questions Perfusion Licensing Bill

Jim-

01/09/01

Here is a list of Mark's questions and my responses. There are couple of issues that do need attention. Let me know how I can help communicate these brief thoughts in the best manner.

Thank you,
Michael Gough

1. The \$56 renewal fee is based on DORL's most recent fee study for the upcoming budget.

Acceptable

2. The bill includes licensed perfusionists under s.146.997(1)(d)4., stats. As a result, a licensed perfusionist has the same protections as other health care professionals regarding the reporting of violations of state law. Is this okay?

Acceptable

3. Is the amendment of s448.03(2)(k), stats., okay?

No. I am unsure why that particular phrase is included in the bill. In the analysis portion of the bill, it grants exemption to "4) persons who assist physicians, except for physician assistants and perfusionists;". My understanding of that clause is extremely ambiguous and would provide a substantial loop hole for unqualified individuals to practice perfusion.

4. "Perfusionists" is defined as a person who practices perfusion, rather than a person who is licensed by the board to practice perfusion. Without this change, other provisions of subch.11 of ch. 448 would not make sense (see, for example, the exemption from licensure for a "perfusionist" of the armed services).

Acceptable

5. Proposed s.448.05 (3) refers to the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs or its successor. Are the names correct? Note also that I assume that the Accreditation Committee for Perfusion Education is a lesser – included entity of the Commission on Accreditation of Allied Health Education Programs. Is this correct? On a related point, please check the reference to the commission in the waiver – of – licensure requirements in the nonstatutory provisions of the bill.

Optimally the bill should reflect the AC-PE **accrediting** educational programs and not **approving** them.

check whether included in 93 bill or stats.

6. The general effective date of the bill is delayed until the first day of the 8th month after publication. I selected 8 months because it is twice the 4 months required for initial appointments to the examining council. Please contact me if you want any changes to the delayed effective date.

Acceptable

7. I changed the first alternative under the waiver-of-licensure requirements so that an individual need only submit evidence that, on January 1, 2003, his or her primary occupation was performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States. I eliminated the requirement that the individual also submit evidence that he or she performed perfusion at a licensed health care facility at any time during the period beginning on January 1, 1998, and ending on January 1, 2003. I don't think that the eliminated requirement makes much of a substantive difference. For example, an individual who performed perfusion on only a single occasion during this time period would satisfy the requirement. Please contact me if you want any changes.

No. This is an area that needs considerable conversation. If the first waiver requirement was to be written as stated above, that would allow any perfusionist who was practicing perfusion on one day's experience to become "grandfathered". Our intention is to create waiver requirements illustrating that the applicant, who would not meet the standard requirement, is clinically competent. Predicated on the fact that he or she has been working as a clinical perfusionist for a minimum of three years.

8. A person who is issued a license under the bill will be required to renew the license and pay a renewal fee every 2 years. The first renewal fee is due on November 1, 2003. I created a nonstatutory provision that requires DORL to reduce the amount of the first renewal fee if the bill has not been in effect for 2 years prior to November 1, 2003. The reason for the reduction is that it doesn't seem appropriate to require a person to pay the full amount of the renewal fee if the bill has not been in effect for 2 years. Is this okay?

Acceptable

9. You might want to consider changing the name of the council from "perfusionists examining council" to "council on Perfusionists". The reason is that the council's role is not limited to advising the medical examining board on the examination of perfusionists. (However, other councils are called examining councils even though they consult on more than examinations.) Also, please make sure that the council's role is correctly stated in the bill. Proposed s15.407(2m) states that the council serves the medical examining board in an advisory capacity and proposed s.448.40(2)(b) requires the medical examining board to consult with the council in promulgating rules on scope of practice. However, note that proposed s.448.40(2)(c) does not require the medical examining board to consult with the council in promulgating continuing education rules. Are these provisions okay?

No. It is our intention that the board would have to consult with the council in promulgating rules on the scope of practice AND continuing education.

Other issues:

1. There is an issue that was brought to my attention about an amendment to the previous bill that is not present in this draft. It pertains to the identification of the "WAIVER OF EXAMINATION REQUIREMENT". It was requested that we amend that phrase in 1993 to read "WAIVER OF EDUCATION AND EXAMINATION REQUIREMENTS". I do not see that specific phrase in the text of the bill and want to make certain we have that previous request properly covered.

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/1dn
MDK:king.pg

December 20, 2000

Representative Jensen:

Please review this bill, which is based on 1993 LRBs0399/2, very carefully to make sure that it achieves your intent. In particular, please note the following:

- OK 1. The \$56 renewal fee is based on DORL's most recent fee study for the upcoming budget.
- OK 2. The bill includes licensed perfusionists under s. 146.997 (1) (d) 4., stats. As a result, a licensed perfusionist has the same protections as other health care professionals regarding the reporting of violations of state law. Is this okay?
3. Is the amendment of s. 448.03 (2) (k), stats., okay? → *see change to analysis*
- OK 4. "Perfusionist" is defined as a person who practices perfusion, rather than a person who is licensed by the board to practice perfusion. Without this change, other provisions of subch. II of ch. 448 would not make sense (see, for example, the exemption from licensure for a "perfusionist" of the armed services).
- OK 5. Proposed s. 448.05 (3) refers to the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs or its successor. Are the names correct? Note also that I assume that the Accreditation Committee for Perfusion Education is a lesser-included entity of the Commission on Accreditation of Allied Health Education Programs. Is this correct? On a related point, please check the reference to the commission in the waiver-of-licensure requirements in the nonstatutory provisions of the bill.
- OK 6. The general effective date of the bill is delayed until the first day of the 8th month after publication. I selected 8 months because it is twice the 4 months required for initial appointments to the examining council. Please contact me if you want any changes to the delayed effective date.
- See Change 7. I changed the first alternative under the waiver-of-licensure requirements so that an individual need only submit evidence that, on January 1, 2003, his or her primary occupation was performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States. I eliminated the requirement that the individual also submit evidence that he or she performed perfusion at a licensed health care facility at any time during the period beginning on January 1, 1998, and ending on January 1, 2003. I don't think that the eliminated requirement makes much of a
-3 yrs experience

substantive difference. For example, an individual who performed perfusion on only a single occasion during this time period would satisfy the requirement. Please contact me if you want any changes.

6/8. A person who is issued a license under the bill will be required to renew the license and pay a renewal fee every 2 years. The first renewal fee is due on November 1, 2003. I created a nonstatutory provision that requires DORL to reduce the amount of the first renewal fee if the bill has not been in effect for 2 years prior to November 1, 2003. The reason for the reduction is that it doesn't seem appropriate to require a person to pay the full amount of the renewal fee if the bill has not been in effect for 2 years. Is this okay?

9. You might want to consider changing the name of the council from "perfusionists examining council" to "council on perfusionists". The reason is that the council's role is not limited to advising the medical examining board on the examination of perfusionists. (However, other councils are called examining councils even though they consult on more than examinations.) Also, please make sure that the council's role is correctly stated in the bill. Proposed s. 15.407 (2m) states that the council serves the medical examining board in an advisory capacity and proposed s. 448.40 (2) (b) requires the medical examining board to consult with the council in promulgating rules on scope of practice. However, note that proposed s. 448.40 (2) (c) does not require the medical examining board to consult with the council in promulgating continuing education rules. Are these provisions okay?

↙
revise

448.40

(2)(c)

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By Friday 1/26, PM if possible

O-NOTE

2001 BILL

jld 2 RM NOT RUN

Regen

1 AN ACT to amend 15.08 (1m) (b), 146.81 (1) (d), 146.997 (1) (d) 4., 155.01 (7),
2 448.02 (1), 448.03 (2) (b), 448.03 (2) (c), 448.03 (2) (d), 448.03 (2) (k), 448.05 (1)
3 (d), 448.05 (6) (a) and 448.07 (1) (d); and to create 15.407 (2m), 252.14 (1) (ar)
4 4c., 440.08 (2) (a) 54m., 448.015 (1e), 448.015 (1m), 448.015 (1s), 448.03 (1) (c),
5 448.03 (2) (L), 448.03 (2) (m), 448.03 (2) (n), 448.03 (3) (f), 448.04 (1) (d), 448.04
6 (1) (e), 448.05 (3), 448.05 (6) (am), 448.13 (2), 448.40 (2) (b) and 448.40 (2) (c) of
7 the statutes; relating to: licensing perfusionists, creating a perfusionists
8 examining council, and granting rule-making authority.

Analysis by the Legislative Reference Bureau

This bill requires a person who practices perfusion or represents that he or she is a perfusionist to be licensed by the medical examining board (board). The bill defines "perfusion" as operating and managing extracorporeal circulation to support, temporarily replace, measure, treat, or supplement the cardiopulmonary and circulatory system of a patient. "Perfusion" includes using blood testing and advanced life support techniques and technologies, autotransfusion, and the administration of blood, blood products, and anesthetic and pharmacological agents.

The bill allows a person who is licensed by the board to practice perfusion under the orders and supervision of a physician. In addition, the bill requires the board to

BILL

promulgate rules that define the scope of the practice of perfusion. A person licensed under the bill is subject to the board's authority under current law to take disciplinary action, including limiting, suspending, or revoking the license, for engaging in unprofessional conduct or negligence in treatment. In addition, a person must renew his or her license every 2 years and complete any continuing education requirements established by the board by rule.

The following persons are exempt from the bill's licensure requirement: 1) perfusionists who are employed in the armed services or federal health services; 2) perfusion students; 3) out-of-state perfusionists who consult with licensed perfusionists; ~~4) persons who assist physicians, except for physician assistants and perfusionists;~~ 5) persons who perform autotransfusion or blood conservation techniques under the direction and supervision of physicians; 6) persons who are certified or eligible to be certified by the American Board of Cardiovascular Perfusion and who practice perfusion no more than 30 days in a year; and 7) federal agency employees who provide perfusion services solely under the direction or control of their employer. INSERT 2A ✓

4

5

6

To qualify for licensure under the bill, a person must have completed an educational program in perfusion recognized by the board and accredited by the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Education Programs. In addition, the person must also pass an examination administered by the board that is at least as stringent and comprehensive as the certification examination used by the American Board of Cardiovascular Perfusion.

The bill also allows the following persons to be licensed without completing the education program described above or passing the examination: 1) a person whose primary occupation on January 1, 2003, is performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States; 2) a person who, between January 1, 1996, and January 1, 2003, had 5 years or more of experience in performing perfusion during cardiopulmonary surgery at a health care facility licensed in the United States; and 3) a person who is certified as a clinical perfusionist by the American Board of Cardiovascular Perfusion and who, between January 1, 1999, and January 1, 2003, completed an education program in perfusion approved by the Commission on Accreditation of Allied Health Education Programs. To qualify for a license under these provisions, a person must apply by January 1, 2004.

Additionally, the bill allows the board to issue a temporary license to practice perfusion to a person who has completed the education program but who has not yet passed the examination. A temporary license is valid for one year and may be renewed each year for not more than 5 years. A person holding a temporary license may practice perfusion only under the supervision and direction of a person who is licensed under the bill.

The bill establishes a perfusionists examining council that serves the board in an advisory capacity. The council consists of 3 members who are licensed under the bill and appointed by the board, one physician member appointed by the board, and one public member appointed by the governor. The physician must be either a

becomes law

who, in the 3-year period before the bill's effective date, had 3 years' experience in

date on which the

BILL

thoracic surgeon or a cardiovascular anesthesiologist. The council members serve 3-year terms.

Finally, the bill specifies that a person who is licensed under the bill is a health care provider for purposes of state laws regarding patient health care records, prohibiting discrimination based on acquired immunodeficiency syndrome, and protecting health care providers who report violations of state laws.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 15.08 (1m) (b) of the statutes is amended to read:

2 15.08 (1m) (b) The public members of the chiropractic examining board, the
3 dentistry examining board, the hearing and speech examining board, the medical
4 examining board, perfusionists examining council, respiratory care practitioners
5 examining council and council on physician assistants, the board of nursing, the
6 nursing home administrator examining board, the veterinary examining board, the
7 optometry examining board, the pharmacy examining board, the examining board
8 of social workers, marriage and family therapists and professional counselors, and
9 the psychology examining board shall not be engaged in any profession or occupation
10 concerned with the delivery of physical or mental health care.

11 **SECTION 2.** 15.407 (2m) of the statutes is created to read:

12 15.407 (2m) **PERFUSIONISTS EXAMINING COUNCIL.** There is created a perfusionists
13 examining council in the department of regulation and licensing and serving the
14 medical examining board in an advisory capacity. The council shall consist of the
15 following members appointed for 3-year terms:

16 (a) Three licensed perfusionists appointed by the medical examining board.

17 (b) One physician who is a thoracic surgeon or a cardiovascular
18 anesthesiologist and who is appointed by the medical examining board.

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1 (c) One public member appointed by the governor.

2 **SECTION 3.** 146.81 (1) (d) of the statutes is amended to read:

3 146.81 (1) (d) A physician, physician assistant, perfusionist, or respiratory care
4 practitioner licensed or certified under subch. II of ch. 448.

5 **SECTION 4.** 146.997 (1) (d) 4. of the statutes is amended to read:

6 146.997 (1) (d) 4. A physician, podiatrist, perfusionist, or physical therapist
7 licensed under ch. 448.

8 **SECTION 5.** 155.01 (7) of the statutes is amended to read:

9 155.01 (7) “Health care provider” means a nurse licensed or permitted under
10 ch. 441, a chiropractor licensed under ch. 446, a dentist licensed under ch. 447, a
11 physician, physician assistant, perfusionist, podiatrist, physical therapist,
12 occupational therapist, or occupational therapy assistant licensed under ch. 448, a
13 person practicing Christian Science treatment, an optometrist licensed under ch.
14 449, a psychologist licensed under ch. 455, a partnership thereof, a corporation or
15 limited liability company thereof that provides health care services, an operational
16 cooperative sickness care plan organized under ss. 185.981 to 185.985 that directly
17 provides services through salaried employees in its own facility, or a home health
18 agency, as defined in s. 50.49 (1) (a).

19 **SECTION 6.** 252.14 (1) (ar) 4c. of the statutes is created to read:

20 252.14 (1) (ar) 4c. A perfusionist licensed under subch. II of ch. 448.

21 **SECTION 7.** 440.08 (2) (a) 54m. of the statutes is created to read:

22 440.08 (2) (a) 54m. Perfusionist: November 1 of each odd-numbered year; \$56.

23 **SECTION 8.** 448.015 (1e) of the statutes is created to read:

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1 448.015 (1e) “Extracorporeal circulation” means the diversion of a patient’s
2 blood through a heart–lung machine or a similar device that assumes the functions
3 of the patient’s heart or lungs or both.

4 **SECTION 9.** 448.015 (1m) of the statutes is created to read:

5 448.015 (1m) “Perfusion” means that branch or system of treating the sick
6 which is limited to the operation and management of extracorporeal circulation to
7 support, temporarily replace, measure, treat, or supplement the cardiopulmonary
8 and circulatory system of a patient, including, when necessary to and part of the
9 management and operation of extracorporeal circulation, the use of blood testing and
10 advanced life support techniques and technologies, autotransfusion, and the
11 administration of blood, blood products, and anesthetic and pharmacological agents.

12 **SECTION 10.** 448.015 (1s) of the statutes is created to read:

13 448.015 (1s) “Perfusionist” means an individual who practices perfusion.

14 **SECTION 11.** 448.02 (1) of the statutes is amended to read:

15 448.02 (1) LICENSE. The board may grant licenses, including various classes
16 of temporary licenses, to practice medicine and surgery, to practice perfusion, and to
17 practice as a physician assistant.

18 **SECTION 12.** 448.03 (1) (c) of the statutes is created to read:

19 448.03 (1) (c) No person may practice perfusion, attempt to do so, or make a
20 representation as authorized to do so, without a license to practice perfusion granted
21 by the board.

22 **SECTION 13.** 448.03 (2) (b) of the statutes is amended to read:

23 448.03 (2) (b) The performance of official duties by a physician or perfusionist
24 of any of the armed services or federal health services of the United States.

25 **SECTION 14.** 448.03 (2) (c) of the statutes is amended to read:

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1 448.03 (2) (c) The activities of a medical student, respiratory care student,
2 perfusion student, or physician assistant student required for such student's
3 education and training, or the activities of a medical school graduate required for
4 training as required in s. 448.05 (2).

5 **SECTION 15.** 448.03 (2) (d) of the statutes is amended to read:

6 448.03 (2) (d) Actual consultation or demonstration by licensed physicians or
7 perfusionists or certified respiratory care practitioners of other states or countries
8 with licensed physicians or perfusionists or certified respiratory care practitioners
9 of this state.

10 **SECTION 16.** 448.03 (2) (k) of the statutes is amended to read:

11 448.03 (2) (k) Any persons, other than physician assistants or perfusionists,
12 who assist physicians.

13 **SECTION 17.** 448.03 (2) (L) of the statutes is created to read:

14 448.03 (2) (L) A person performing autotransfusion or blood conservation
15 techniques under the direction and supervision of a licensed physician.

16 **SECTION 18.** 448.03 (2) (m) of the statutes is created to read:

17 448.03 (2) (m) A person practicing perfusion for not more than 30 days in a year,
18 if the person is certified or eligible to be certified as a clinical perfusionist by the
19 American Board of Cardiovascular Perfusion.

20 **SECTION 19.** 448.03 (2) (n) of the statutes is created to read:

21 448.03 (2) (n) A person employed as a perfusionist by a federal agency, as
22 defined in s. 59.57 (2) (c) 1., if the person provides perfusion services solely under the
23 direction or control of the federal agency by which he or she is employed.

24 **SECTION 20.** 448.03 (3) (f) of the statutes is created to read:

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1 448.03 (3) (f) A person who is not licensed to practice perfusion by the board
2 may not designate himself or herself as a perfusionist, use or assume the title
3 “licensed perfusionist” or the abbreviation “L.P.,” or use any other title, letters, or
4 designation that represents or may tend to represent the person as a perfusionist.

5 This paragraph does not apply to any of the following:

6 1. Any person employed as a perfusionist by a federal agency, as defined in s.
7 59.57 (2) (c) 1., if the person provides perfusion services solely under the direction or
8 control of the federal agency by which he or she is employed.

9 2. Any person pursuing a supervised course of study leading to a degree or
10 certificate in perfusion under an accredited or approved educational program, if the
11 person is designated by a title that clearly indicates his or her status as a student or
12 trainee.

13 3. Any person practicing perfusion under a temporary license issued under s.
14 448.04 (1) (e), if the person is designated by a title that clearly indicates that he or
15 she is practicing under a temporary license.

16 **SECTION 21.** 448.04 (1) (d) of the statutes is created to read:

17 448.04 (1) (d) *License to practice perfusion.* A person holding a license to
18 practice perfusion may practice perfusion under the orders and supervision of a
19 physician.

20 **SECTION 22.** 448.04 (1) (e) of the statutes is created to read:

21 448.04 (1) (e) *Temporary license to practice perfusion.* The board may, by rule,
22 provide for a temporary license to practice perfusion for a person who satisfies the
23 requirements of s. 448.05 (3) but who has not passed an examination under s. 448.05
24 (6). The board may issue a temporary license for a period not to exceed one year and
25 may renew a temporary license annually for not more than 5 years. A person who

BILL

1 holds a temporary license may not practice perfusion unless the person is under the
2 supervision and direction of a licensed perfusionist at all times while the person is
3 performing perfusion. The board may promulgate rules governing supervision by
4 licensed perfusionists, except that those rules may not require the immediate
5 physical presence of the supervising, licensed perfusionist.

6 **SECTION 23.** 448.05 (1) (d) of the statutes is amended to read:

7 448.05 (1) (d) Be found qualified by three-fourths of the members of the board,
8 except that an applicant for a temporary license under s. 448.04 (1) (b) 1. and 3. and
9 (e) must be found qualified by 2 members of the board.

10 **SECTION 24.** 448.05 (3) of the statutes is created to read:

11 448.05 (3) LICENSE TO PRACTICE PERFUSION. An applicant for a license to practice
12 perfusion must supply evidence satisfactory to the board that he or she has
13 successfully completed an educational program in perfusion recognized by the board
14 and accredited by the Accreditation Committee for Perfusion Education of the
15 Commission on Accreditation of Allied Health Education Programs or its successor.

16 **SECTION 25.** 448.05 (6) (a) of the statutes is amended to read:

17 448.05 (6) (a) ~~The~~ Except as provided in par. (am), the board shall examine each
18 applicant it finds eligible under this section in such subject matters as the board
19 deems applicable to the class of license or certificate which the applicant seeks to
20 have granted. Examinations may be both written and oral. In lieu of its own
21 examinations, in whole or in part, the board may make such use as it deems
22 appropriate of examinations prepared, administered, and scored by national
23 examining agencies, or by other licensing jurisdictions of the United States or
24 Canada. The board shall specify passing grades for any and all examinations
25 required.

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1 **SECTION 26.** 448.05 (6) (am) of the statutes is created to read:

2 448.05 (6) (am) When examining an applicant for a license to practice perfusion
3 under par. (a), the board shall use an examination at least as stringent and
4 comprehensive as the certification examination used by the American Board of
5 Cardiovascular Perfusion or its successor.

6 **SECTION 27.** 448.07 (1) (d) of the statutes is amended to read:

7 448.07 (1) (d) No registration may be permitted by the secretary of the board
8 in the case of any physician or perfusionist who has failed to meet the requirements
9 of s. 448.13 or any person whose license, certificate, or limited permit has been
10 suspended or revoked and the registration of any such person shall be deemed
11 automatically annulled upon receipt by the secretary of the board of a verified report
12 of such suspension or revocation, subject to the licensee's or permittee's right of
13 appeal. A person whose license, certificate, or limited permit has been suspended or
14 revoked and subsequently restored shall be registered by the board upon tendering
15 a verified report of such restoration of the license, certificate, or limited permit,
16 together with an application for registration and the registration fee.

17 **SECTION 28.** 448.13 (2) of the statutes is created to read:

18 448.13 (2) Each person licensed as a perfusionist shall, in each 2nd year at the
19 time of application for a certificate of registration under s. 448.07, submit proof of
20 completion of continuing education requirements promulgated by rule by the board.

21 **SECTION 29.** 448.40 (2) (b) of the statutes is created to read:

22 448.40 (2) (b) Establishing the scope of the practice of perfusion. In
23 promulgating rules under this paragraph, the board shall consult with the
24 perfusionists examining council.

25 **SECTION 30.** 448.40 (2) (c) of the statutes is created to read:

BILL

1 448.40 (2) (c) Establishing continuing education requirements for renewal of
2 a license to practice perfusion under s. 448.13 (2). INSERT 10-2 ✓

SECTION 31. Nonstatutory provisions.

3
4 (1) PERFUSIONISTS EXAMINING COUNCIL; INITIAL APPOINTMENTS. Notwithstanding
5 section 15.407 (2m) of the statutes, as created by this act:

6 (a) The initial perfusionist members of the perfusionists examining council
7 need not be licensed to practice perfusion by the medical examining board in order
8 to be appointed to and serve as members of the examining council.

9 (b) The initial members of the perfusionists examining council shall be
10 appointed by the first day of the 4th month beginning after the effective date of this
11 paragraph for the following terms:

- 12 1. One perfusionist, for a term expiring on July 1, 2004.
- 13 2. One perfusionist and the public member, for terms expiring on July 1, 2005.
- 14 3. One perfusionist and the physician, for terms expiring on July 1, 2006.

15 (2) WAIVER OF LICENSURE REQUIREMENTS.

16 (a) In this subsection, “perfusion” has the meaning given in section 448.015
17 (1m) of the statutes, as created by this act.

18 (b) Notwithstanding section 448.05 (1) (intro.), (a), (b), and (c) of the statutes,
19 section 448.05 (1) (d) of the statutes, as affected by this act, section 448.05 (3) of the
20 statutes, as created by this act, 448.05 (6) (a) of the statutes, as affected by this act,
21 section 448.05 (6) (am) of the statutes, as created by this act, section 448.05 (7) of the
22 statutes, and section 448.06 (1) of the statutes, the medical examining board shall
23 grant a license to practice perfusion to any individual who, before January 1, 2004,
24 submits an application for licensure that includes evidence satisfactory to the board
25 that the individual meets at least one of the following requirements:

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INSERT 11-1 ✓

1 1. On January 1, 2003, the individual's primary occupation is performing
2 perfusion during cardiopulmonary surgery at a health care facility licensed in the
3 United States.

4 2. During the period beginning on January 1, 1996, and ending on January 1,
5 2003, the individual has had 5 or more years of experience performing perfusion
6 during cardiopulmonary surgeries at a health care facility licensed in the United
7 States.

8 3. The individual is certified as a clinical perfusionist by the American Board
9 of Cardiovascular Perfusion and, during the period beginning on January 1, 1999,
10 and ending on January 1, 2003, the individual has successfully completed an
11 educational program in perfusion approved by the Commission on Accreditation of
12 Allied Health Education Programs.

13 (3) INITIAL LICENSE RENEWAL. Notwithstanding section 440.08 (2) (a) 54m. of the
14 statutes, as created by this act, and section 448.07 (2) of the statutes, if the length
15 of time between the effective date of this subsection and November 1, 2003, is less
16 than 2 years, the department of regulation and licensing may reduce the renewal fee
17 for licenses to practice perfusion that expire on November 1, 2003, by an amount
18 that, as determined by the department, reflects such length of time.

19 **SECTION 32. Effective dates.** This act takes effect on the first day of the 8th
20 month beginning after publication, except as follows:

21 (1) The treatment of section 15.407 (2m) of the statutes and SECTION 31 (1) and
22 (2) of this act take effect on the day after publication.

23 (END)

2001-2002 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/2ins
MDK:.....

1

INSERT 2A:

2 (NO) Also exempt are persons who assist physicians, unless such a person practices
3 perfusion.

4

INSERT 10-2:

5 (NO) In promulgating rules under this paragraph, the board shall consult with the
6 perfusionists examining council.

7

INSERT 11-1:

8 nonstat 1. During the 3-year period ending on the effective date of this subdivision,
9 the individual had 3 years_A of experience performing perfusion during
10 cardiopulmonary surgeries at a health care facility licensed in the United States.

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/2dn

MDK.....

JLD

Representative Jensen:

This bill is identical to the previous version except for the following changes requested by Jim Tenuta:

1. I revised the ^{third}~~end~~ paragraph of the analysis so that [✓] physician assistants aren't mentioned because I decided that it was confusing to mention them. Also, the bill does not affect current law regarding physician assistants, except to prohibit them, like everybody else who isn't covered by an exemption, from practicing perfusion. However, it is necessary to mention that persons, other than physician assistants, who assist physicians are exempt, unless, of course, they practice perfusion. Also note that the reason physician assistants weren't mentioned in the LRB analysis or any report by the Legislative Fiscal Bureau concerning 1993 AB 757 is that physician assistants ^{Wisconsin} were not required to be licensed until the passage of 1997 Act 67, which created, among other provisions, s. 448.03 (2) (k), stats. *
2. The first option under the "grandfather" provision is changed to require ^{three}~~2~~ years of the specified experience.
3. Proposed s. 448.40 (2) (c) [✓] is revised to require the medical examining board to consult with the perfusionists examining council when promulgating rules on continuing education.

Mark D. Kunkel
Legislative Attorney
Phone: (608) 266-0131
E-mail: mark.kunkel@legis.state.wi.us

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0942/2dn
MDK:jld:km

January 26, 2001

Representative Jensen:

This bill is identical to the previous version except for the following changes requested by Jim Tenuta:

1. I revised the third paragraph of the analysis so that physician assistants aren't mentioned because I decided that it was confusing to mention them. Also, the bill does not affect current law regarding physician assistants, except to prohibit them, like everybody else who isn't covered by an exemption, from practicing perfusion. However, it is necessary to mention that persons, other than physician assistants, who assist physicians are exempt, unless, of course, they practice perfusion. Also note that the reason physician assistants weren't mentioned in the LRB analysis or any report by the Legislative Fiscal Bureau concerning 1993 AB-757 is that physician assistants were not required to be licensed until the passage of 1997 Wisconsin Act 67, which created, among other provisions, s. 448.03 (2) (k), stats.
2. The first option under the "grandfather" provision is changed to require three years of the specified experience.
3. Proposed s. 448.40 (2) (c) is revised to require the medical examining board to consult with the perfusionists examining council when promulgating rules on continuing education.

Mark D. Kunkel
Legislative Attorney
Phone: (608) 266-0131
E-mail: mark.kunkel@legis.state.wi.us

Smith, Irma

From: Pirlot, R.J.
Sent: Tuesday, March 06, 2001 8:45 AM
To: Smith, Irma
Subject: RE: LRB-0942

Irma,

It should be jacketed as an Assembly bill, authored by Rep. Skindrud. The jacket should be sent to Rep. Skindrud's office.

R.J. Pirlot

Policy Director and Legal Counsel
Office of Assembly Speaker Scott R. Jensen

Direct: 608-261-9482

Fax: 608-266-5123

-----Original Message-----

From: Smith, Irma
Sent: Tuesday, March 06, 2001 8:42 AM
To: Pirlot, R.J.
Cc: Kunkel, Mark
Subject: LRB-0942

R.J.:

Mark Kunkel received a telephone call from Alan Colvin in Rep. Skindrud's office requesting that LRB-0942/2 be jacketed for the Assembly and sent to Rep. Skindrud.

Because this draft comes from your office, please reply to this e-mail indicating which house it should be jacketed for and to whom it should be sent.

If you have any questions, please call me at 6-3561.

Thank you, Irma