

(B)Sec. (1) Title
MODEL LANGUAGE FOR PERFUSION LICENSURE BOARD UNDER
EXISTING MARYLAND BOARD OF PHYSICIANS (B)

(B)Sec. (2) Purpose
Perfusionist Licensure Act

(a) The legislature finds that:

- (1) the citizens of Maryland are entitled to the protection of their health, safety, and welfare from the unqualified or unprofessional practice of perfusion;
- (2) the practice of perfusion by unauthorized, unqualified, unprofessional, or incompetent persons is a threat to the public; and
- (3) the practice of perfusion is a dynamic and changing health care field which is continually evolving to include more sophisticated and demanding patient care activities.

(b) The purpose of this article is to protect the public from the dangers described by Subsection (a) of this section by:

- (1) establishing minimum standards of education, training, and competency for persons engaged in the practice of perfusion and of the performance of perfusion services in a manner that provides for the continued evolution of the practice of perfusion; and
- (2) ensuring that the privilege of practicing in the field of perfusion is entrusted only to those licensed and regulated under this article.

(B) Sec. (3) Definitions

In this article:

- (a) “Board” means the Maryland Board of Physicians.
- (b) “Advisory Committee” means the Perfusion Advisory Committee.
- (c) “Extracorporeal circulation” means the diversion of a patient’s blood through a heart-lung machine or a similar device that assumes the functions of the patient’s heart, lungs, kidney, liver, or other organs.
- (d) “Licensed Perfusionist” means a person licensed under this article.
- (e) “Perfusion” means the functions necessary for the support, treatment, measurement, or supplementation of the cardiovascular, circulatory, respiratory systems or other organs, or a combination of those activities, and to ensure the safe management of physiologic functions by monitoring and analyzing the parameters of the systems under an order and under the supervision of a licensed physician, including:
 - 1.1.0 Extracorporeal Support
 - 1.1.1 Cardiopulmonary bypass for Adult, Pediatric, and Neonatal Patients.
 - 1.1.2 Cardiopulmonary bypass for congenital and acquired cardiovascular disorders.
 - 1.1.3 Extracorporeal circulatory support for renal, neurological, hepatic and vascular surgery.
 - 1.1.4 Extracorporeal resuscitation.
 - 1.1.5 Extracorporeal circulation for long term support of failing respiratory and/or cardiac function.
 - 1.1.5.1 Extracorporeal Membrane Oxygenation (ECMO)
 - 1.1.5.2 Extracorporeal CO2 Removal (ECCOR)
 - 1.2. Associated Extracorporeal Support Functions
 - 1.2.1 Myocardial protection.

- 1.2.1.1 Perfusion Assist Direct Coronary Artery Bypass (PADCAB)
- 1.2.2. Hemofiltration/hemodialysis.
- 1.2.3. Anticoagulation and hemostasis monitoring, analysis, and intervention.
- 1.2.4. Thermal regulation.
- 1.2.5. Blood gas and blood chemistry monitoring, analysis, and intervention.
- 1.2.6. Physiological monitoring, analysis, and intervention.
- 1.2.7. Administration of blood components, pharmaceuticals, and anesthetic agents

- 2.1. Heart Failure Therapy and Support
 - 2.1.1. Ventricular Assist Device/Mechanical Circulatory Support management
 - 2.1.2. Intra-aortic Balloon Counterpulsation
 - 2.1.3. Temporary Pacemaker management
 - 2.1.4. External counterpulsation
 - 2.1.5. Transportation of Extracorporeal Supported Patients
 - 2.1.6. Hemofiltration (i.e. “Aquapheresis”)
 - 2.1.7. Periodic flow augmentation therapy

- 3.1. Blood Management
 - 3.1.1. Autotransfusion
 - 3.1.2. Platelet Gel Production, Autologous Hemocyte Tissue Matrix Production
 - 3.1.3. Non-Differentiated Progenitor Cell Harvest Bone Marrow Aspirate Concentrate
 - 3.1.4. Acute Normovolemic Hemodilution
 - 3.1.5. Phlebotomy
 - 3.1.6. Hemostasis monitoring and analysis

- 4.1. Other Clinical
 - 4.1.1. Isolated Limb/Organ perfusion
 - 4.1.2. Isolated limb/organ delivery of chemotherapeutics, progenitor cells, gene therapy vectors, etc.
 - 4.1.3. Organ Procurement
 - 4.1.4. Thermogenic Lavage
 - 4.1.5. Organ Preservation
 - 4.1.6. Dialysis
 - 4.1.7. Electrophysiological analysis
 - 4.1.8. Therapeutic Hyperthermia
 - 4.1.8.1 Hyperthermic IntraPeritoneal Chemotherapy (HIPEC)
 - 4.1.9. Therapeutic Hypothermia
 - 4.1.10. Intravascular membrane oxygenation
 - 4.1.11. Renal Perfusion

- 5.1. Non-Clinical Responsibilities
 - 5.1.1. Documentation of duties via the official medical record
 - 5.1.2. Education, including the establishment and management of educational programs for new and current clinical perfusionists, other healthcare providers, and consumers.
 - 5.1.3. Administration, including managing all aspects - technical, fiscal, workflow, and human resources - of Clinical Perfusion operations.
 - 5.1.4. Quality Control and Assurance
 - 5.1.5. Regulatory Compliance
 - 5.1.6. Competency/Performance Evaluation

- 6.1. Professional Performance

- 6.1.1. Obtains and maintains appropriate professional credentials.
- 6.1.2. Works in partnership with other health care professionals to provide the best medical care possible for all patients.
- 6.1.3. Adheres to the standards, policies, and procedures adopted by the profession and regulated by law.
- 6.1.4. Stays current with required continuing medical education (CME) in order to stay abreast of changes in the field of extracorporeal technology and to maintain professional credentials.
- 6.1.5. Participates in continuing education activities through professional organizations, to enhance knowledge, skills and performance.
- 6.1.6. Adheres to the accepted professional ethical standards as defined by the Code of Ethics.
- 6.1.7. Acts as a patient advocate supporting patient rights.
- 6.1.8. Design, coordination, and implementation of original investigation.
- 6.1.9. Critical evaluation of published research.

(III) the observation of signs and symptoms related to perfusion services, the determination of whether the signs and symptoms exhibit abnormal characteristics, and the implementation of appropriate reporting, perfusion protocols, or changes in or the initiation of emergency procedures.

(f) “Perfusion protocols” means perfusion related policies and protocols developed or approved by a licensed health facility or a physician through collaboration with administrators, licensed perfusionists, and other health care professionals.

(g) “Provisional licensed perfusionist” means a person provisionally licensed under this article.

(B) Sec. (4) Board Membership

(a) The Perfusion Advisory Committee under the Maryland Board of Physicians is created.

(b) The Perfusion Advisory Committee is composed of five individuals, including three perfusionists who practice in the state of Maryland and one physician that is familiar with perfusion, such as a cardiac surgeon or anesthesiologist, and one member who represents the public.

(c) The Maryland Board of Physicians shall appoint the board members who shall serve staggered terms of 3 years with 1 member’s terms expiring [*insert a day and month of each odd-numbered year*].

(d) A license holder eligible for appointment as a licensed perfusionist board member must have been licensed under this article for at least 2 years before appointment to the Perfusion Advisory Committee, with the exception of the initial Committee in which case the appointee must be a practicing Certified Clinical Perfusionist within the state of Maryland for a minimum of two (2) years on or prior to the enactment of this article.

(e) It is the intent that the membership of the Perfusion Advisory Committee to reflect the historical and cultural diversity of the inhabitants of this state. Appointments to the Perfusion Advisory Committee should be made without discrimination based on race, creed, sex, religion, national origin, or geographical distribution of the appointees.

(f) It is the intent that the perfusionist members of the Perfusion Advisory Committee represent the many varied aspects of the profession. Appointment to the Perfusion Advisory Committee should be made without bias towards perfusionists working in academia, the public sector, or the private sector.

(g) The Chairman of the Perfusion Advisory Committee shall be a perfusionist.

(h) Members of the public that are not eligible to serve include:

(1) Spouses of any health care professional that lives in or is eligible to practice within Maryland;

(2) Any person or spouse of a person who is associated with or whose income is provided by the health care industry

(B) Sec. (5) Grounds For Removal

(a) It is a ground for removal from the board if a member:

- (1) does not have at the time of appointment the qualifications required for appointment;
- (2) does not maintain during service the qualifications required for appointment;
- (3) violates a prohibition established by this article;
- (4) cannot discharge the member's term for a substantial part of the term for which the member is appointed because of illness or disability; or
- (5) is absent from more than half of the regularly scheduled meetings that the member is eligible to attend during a calendar year unless the absence is excused by majority vote of the Perfusion Advisory Committee.

(b) The validity of an action of the Perfusion Advisory Committee is not affected by the fact that it is taken when grounds for removal of a member exists.

(c) If the secretary of the board has knowledge that a potential grounds for removal exists, the secretary of the board shall notify the presiding officer of the board of the grounds. The presiding officer shall then notify the State Board of Physicians that a potential for removal exists.

(B) Sec. (6) Officers; Meetings; Quorum; Expenses

(a) Not later than the 30th day after the day its new members are appointed, the board shall meet to elect a chairman who shall hold office according to rules adopted by the Perfusion Advisory Committee, or established elsewhere by law.

(b) The Perfusion Advisory Committee shall hold at least 4 regular meetings each year as provided by rules adopted by the Perfusion Advisory Committee, or established elsewhere by law. The rules may not be inconsistent with present rules of the Maryland Board of Physicians.

(c) A majority of the members constitutes a quorum of Perfusion Advisory Committee.

(B) Sec. (7a) Powers And Duties Of The Board

(a) The Perfusion Advisory Committee shall, under the authority of the Maryland Board of Physicians recommend to the Board for its promulgation as regulations the criteria for licensure as a perfusionist and the standards of professional conduct for holders of such licenses.

(b) The Perfusion Advisory Committee shall, under the authority of the Maryland Board of Physicians assist the Board in carrying out the provisions of this chapter regarding the qualifications, examination, registration and regulation, and licensure of perfusionists.

(c) Under the authority of the Maryland Board of Physicians, the Perfusion Advisory Committee shall:

- (1) establish a code of ethics;
- (2) establish the qualifications and fitness of applicants for licenses, renewal of licenses, and reciprocal licenses;
- (3) establish the revocation, suspension, or denial of a license, probate a license suspension, or reprimand a license holder for a violation of this article, the code of ethics, or the rules of the board;
- (4) establish the categories of fees and the amount of fees that may be imposed in connection with a license.
- (5) establish continuing professional education requirements for licensed perfusionists and provisional licensed perfusionists under this chapter, the standards of which shall be at least as

stringent as the didactic requirements established by the American Board of Cardiovascular Perfusion or its successor agency, and shall:

- (A) establish the minimum amount of continuing education required to renew a license under this article;
 - (B) develop a process to evaluate and approve continuing education courses;
 - (C) identify the factors for the competent performance by a license holder of the license holder's professional duties; and
 - (D) develop a procedure to assess a license holder's participation in continuing education programs.
- (6) under the authority of the Maryland Board of Physicians, assist in such other matters dealing with perfusion as the Maryland Board of Physicians may in its discretion direct.
- (7) establish rules regulating the practice of perfusion.

(B) Sec. (7b) Duties Of The Perfusion Advisory Committee

For the purposes of this article, the Perfusion Advisory Committee:

- (a) shall request and receive necessary assistance from state educational institutions or other state agencies;
- (b) shall prepare a registry of licensed perfusionists and provisional licensed perfusionists and make this information available to the general public, license holders, and appropriate state agencies;
- (c) may request the attorney general or the appropriate county or district attorney to institute a suit to enjoin a violation of this article in addition to any other action, proceeding, or remedy authorized by law.

(B) Sec. (8) Applicant Qualifications; Application Review

The Perfusion Advisory Committee shall, under the authority of the Maryland Board of Physicians, establish the qualifications necessary to make application for a perfusion license, and the process the Perfusion Advisory Committee shall follow for reviewing applications.

- (a) An applicant for a perfusionist license must submit a sworn application accompanied by an application fee.
- (b) The Perfusion Advisory Committee shall prescribe the form of the application and by rule may establish dates by which applications and fees must be received.
- (c) To qualify for the licensing examination, the applicant must have successfully completed a perfusion education program approved by the Perfusion Advisory Committee and the Maryland Board of Physicians.
- (d) In approving perfusion education programs necessary for qualification for licensing examination, the Perfusion Advisory Committee shall approve only a program that was approved by the Committee on Allied Health Education and Accreditation (CAHEA) of the American Medical Association (AMA) prior to June of 1994, or that has educational standards that are at least as stringent as those established by the Accreditation Committee for Perfusion Education and approved by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or its successor.

(B) Sec. (9) Examination

The Perfusion Advisory Committee shall, under the authority of the Maryland Board of Physicians, establish the examination and process to be used to judge the qualifications for the granting of a perfusion license.

- (a) To qualify for a license, an applicant must pass a competency examination. Examinations shall be prepared or approved by the Perfusion Advisory Committee and administered to qualified applicants at least once each calendar year.
- (b) An examination prescribed by the Perfusion Advisory Committee may be or may include the complete certification examinations given by the American Board of Cardiovascular Perfusion (ABCP) or its successor agency, or by a state testing service in lieu of an examination prepared by the board. The Perfusion Advisory Committee may have the examination validated by an independent testing professional.
- (c) Not later than 45 days after the date on which a licensing examination is administered under this article, the approved testing service or Maryland Board of Physicians shall notify each examinee of the results of the examination.
- (d) If requested in writing by a person who fails the licensing examination, the approved testing service or the Maryland Board of Physicians shall furnish the person with an analysis of the person's performances on the examination.
- (e) A Provisional License (PL) will be available for a new graduate for one year, with one renewal opportunity consecutive to the initial issuance. This will allow the PL holder an opportunity to sit and pass the boards on four separate occasions prior to not being allowed to hold a license in the State of Maryland.

(B) Sec. (10) License

- (a) A person who meets the licensing qualifications under this article is entitled to receive a license as a licensed perfusionist.
- (b) The license holder must:
 - (1) display the license in an appropriate and public manner; or
 - (2) maintain on file at all times during which the license holder provides services in a health care facility a true and correct copy of the license certificate in the appropriate records of the facility; and
 - (3) keep the Maryland Board of Physicians informed of any change of address.
- (c) A license certificate issued by the Maryland Board of Physicians is the property of the board and shall be surrendered on demand.

(B) Sec. (11) License Expiration; Renewal

- (a) A license is valid for two years from the date it is issued and may be renewed.
- (b) The Perfusion Advisory Committee may by rule adopt a system under which licenses expire on various dates.
- (c) A person may renew an unexpired license by submitting proof satisfactory to the Perfusion Advisory Committee of compliance with the continuing professional education requirements prescribed by the Perfusion Advisory Committee and paying the required renewal fee to the board before the expiration date of the license.
- (d) If a person's license has been expired for not more than ninety days, the person may renew the license by submitting proof satisfactory to the Perfusion Advisory Committee of compliance with the continuing professional education requirements prescribed by the Perfusion Advisory Committee and paying to the board the required renewal fee.
- (e) If a person's license has been expired for more than ninety days but less than two years, the person may renew the license by submitting proof satisfactory to the Perfusion Advisory Committee of compliance with the continuing professional education requirements prescribed by the Perfusion Advisory Committee and paying to the board the required renewal fee.

(f) If a person's license has been expired two years or more, the person may not renew the license. The person may obtain a new license by submitting to reexamination and complying with the current requirements and procedures for obtaining a license.

(g) The Perfusion Advisory Committee may renew without reexamination an expired license of a person who was licensed in this state, moved to another state(s), and is currently appropriately licensed or certified and has been in practice in other states for the two years preceding application. The person must pay a fee to the board.

(h) The board shall notify each license holder in writing of the license expiration date before the 30th day before that date by notice to the license holder at the license holder's last known address according to the records of the board.

(B) Sec. (12) Provisional License

(a) A license as a provisional licensed perfusionist may be issued by the board to a person who has successfully completed an approved perfusion education program and the filing of an application, payment of an application fee, and the submission of evidence satisfactory to the Perfusion Advisory Committee of the successful completion of the education requirement set forth in Section 8 of this article.

(b) A provisional licensed perfusionist shall be under the supervision and direction of a licensed perfusionist at all times during which the provisional licensed perfusionist performs perfusion. Rules adopted by the Perfusion Advisory Committee governing such supervision and direction may not require the immediate physical presence of the supervising licensed perfusionist.

(c) A provisional license is valid for one year from the date it is issued and may be renewed no more than one time. The application for extension must be signed by a supervising licensed perfusionist.

(d) If any portion of the examination has not been passed, the provisional license will be automatically revoked and surrendered to the Maryland Board of Physicians.

(B) Sec. (13) Endorsement

The Perfusion Advisory Committee shall, under the authority of the Maryland Board of Physicians, on receipt of an application and application fee, waive the examination requirement for an applicant who at the time of application:

(a) is appropriately licensed or certified by another state, territory, or possession of the United States if the requirements of that state, territory, or possession for the license or certificate are the substantial equivalent of the requirements of this article as determined by the Perfusion Advisory Committee; or

(b) holds a current certificate as a certified clinical perfusionist issued by the American Board of Cardiovascular Perfusion (ABCP), or its successor prior to *[insert date that the proposed law is to take effect]*.

(B) Sec.(14) Prohibited Acts And Penalties

(a) A person may not engage or offer to engage in perfusion, as defined in this article, for compensation or use the title or represent or imply that the person has the title of "Licensed Perfusionist" or "Provisional Licensed Perfusionist" or use the letters "LP" or "PLP" and may not use any facsimile of these titles in any manner to indicate or imply that the person is a licensed perfusionist or provisional licensed perfusionist unless the person holds an appropriate license issued under this article.

(b) A person may not use the title or represent or imply that the person has the title of "certified clinical perfusionist" or use the letters "CCP" and may not use any facsimile of those titles in any

manner to indicate or imply that the person is a certified clinical perfusionist by the American Board of Cardiovascular Perfusion unless the person holds a certificate as a certified clinical perfusionist issued by the American Board of Cardiovascular Perfusion.

(c) A person commits an offense if the person knowingly or intentionally violates Subsection (a) or (b) of this section. An offense under this section is a Class B misdemeanor.

(B) Sec. (15) Exemptions

This article does not apply to:

(a) a person licensed by another health professional licensing board if:

(1) the person does not represent to the public, directly or indirectly, that the person is licensed under this article, and does not use any name, title, or designation indicating that the person is licensed under this article; and

(2) the person confines the person's acts or practice to the scope of practice authorized by the other health professional licensing laws;

(b) a student enrolled in an accredited perfusion education program if perfusion services performed by the student:

(1) are an integral part of the student's course of study; and

(2) are performed under the direct supervision of a licensed perfusionist assigned to supervise the student and who is on duty and immediately available in the assigned patient care area;

(c) the practice of any legally qualified perfusionist employed by the United States government while in the discharge of official duties.

(B) Sec. (16) Complaint Procedure In General

(a) The Perfusion Advisory Committee shall keep an information file about each complaint filed with the Perfusion Advisory Committee. The board's information file shall be kept current and contain a record for each complaint of:

(1) all persons contacted in relation to the complaint;

(2) a summary of findings made at each step of the complaint process;

(3) an explanation of the legal basis and reason for a complaint that is dismissed; and

(4) other relevant information.

(b) If a written complaint is filed with the Perfusion Advisory Committee that the Perfusion Advisory Committee has authority to resolve, the Perfusion Advisory Committee, at least as frequently as quarterly and until final disposition of the complaint, shall notify the parties to the complaint of the status of the complaint unless the notice would jeopardize an undercover investigation.

(c) The Perfusion Advisory Committee by rule shall adopt a form to standardize information concerning complaints made to the Perfusion Advisory Committee and shall prescribe information to be provided to a person when the person files a complaint with the board.

(d) The Perfusion Advisory Committee shall provide reasonable assistance to a person who wishes to file a complaint.

(B) Sec. (17) Complaint Investigation And Disposition

(a) The Perfusion Advisory Committee shall adopt rules concerning the investigation of a complaint filed with the Perfusion Advisory Committee. The rules adopted under this subsection shall:

(1) require that complaints filed with the Perfusion Advisory Committee be reported to the Maryland Board of Physicians;

(2) distinguish between categories of complaints;

- (3) ensure that complaints are not dismissed without appropriate consideration;
 - (4) require that the Maryland Board of Physicians be advised of a complaint that is dismissed and that a letter be sent to the person who filed the complaint explaining the action taken on the dismissed complaint;
 - (5) ensure that the person who filed the complaint has an opportunity to explain the allegations made in the complaint; and
 - (6) prescribe guidelines concerning the categories of complaints that require the use of a private investigator and the procedures for the board to obtain the services of a private investigator.
- (b) The Perfusion Advisory Committee shall dispose of all complaints in a timely manner. The Perfusion Advisory Committee shall establish a schedule for conducting each phase of a complaint that is under the control of the Perfusion Advisory Committee not later than the 30th day after the date the complaint is received by the board. The schedule shall be kept in the information file for the complaint and all parties shall be notified of the projected time requirements for pursuing the complaint. A change in the schedule must be noted in the complaint information file and all parties to the complaint must be notified not later than seven [7] days after the date the change is made.
- (c) The Perfusion Advisory Committee shall notify the Maryland Board of Physicians of a complaint that extends beyond the time prescribed for resolving the complaint so that the Maryland Board of Physicians may take necessary action on the complaint.

(B) Sec. (18) Monitoring Of A License Holder

The Perfusion Advisory Committee by rule shall develop a system for monitoring license holder's compliance with the requirements of this article. Rules adopted under this section shall include procedures for monitoring a license holder who is ordered by the board to perform certain acts to ascertain that the license holder performs the required acts and to identify and monitor license holders who represent a risk to the public.

(B) Sec. (19) Revocation And Suspension

- (a) The Perfusion Advisory Committee shall revoke or suspend a license, place on probation a person whose license has been suspended, or reprimand a license holder on proof of:
- (1) any violation of this article; or
 - (2) any violation of a rule or code of ethics adopted by the Perfusion Advisory Committee.
 - (3) unprofessional conduct, which includes, but is not limited to, the following:
 - (A) Incompetence, or gross negligence in carrying out usual perfusion functions.
 - (B) A conviction of practicing perfusion without a license or a provisional license.
 - (C) The use of advertising relating to perfusion in a way that violates state statutes.
 - (D) Procuring a License or Provisional License by fraud, misrepresentation, or mistake.
 - (E) Making or giving any false statement or information in connection with the application for a License or Provisional License.
 - (F) Conviction of a felony or of any offense substantially related to the qualifications, functions, and duties of a perfusionist, in which event the record of the conviction shall be conclusive evidence thereof.
 - (G) Impersonating an applicant or acting as proxy for an applicant in any examination required under this chapter for the issuance of a license.

(B) Sec. (20) Grandfather

(a) Prior to but not beyond 90 days a person is eligible to make application to the board and receive a license notwithstanding the requirements of Sections 10 and 11 if the person was actively engaged in the practice of perfusion consistent with applicable law, and if the person meets one of the following requirements:

(1) the person was operating cardiopulmonary bypass systems during cardiac surgical cases in a licensed health care facility as the person's primary function and had been operating the system since 2003.

(2) the person has at least five years' experience operating cardiopulmonary bypass systems during cardiac surgical cases in a licensed health care facility as the person's primary function since 2003.

(b) Notwithstanding Section 4, a perfusionist member of the Perfusion Advisory Committee ~~is~~ not required to be licensed if the member was appointed to the board before the effective date of this Act. Within 90 days after the board has issued its first license, a perfusionist member of the board must apply and receive a license.

(B)Sec. (21) Effective Date

This Act takes effect on [*enter a specified date*].