

Effective November 24, 2022, Plc 1500 Interim reads as follows:

CHAPTER Plc 1500 RESPIRATORY CARE PRACTITIONERS

Statutory Authority: RSA 326-E:2

PART Plc 1501 PURPOSE AND APPLICABILITY; SENDING NOTICES AND LICENSES

Plc 1501.01 Purpose. The purpose of this chapter is to implement RSA 326-E relative to regulating respiratory care practitioners, by establishing requirements for:

- (a) Obtaining and renewing a license to practice respiratory care;
- (b) Obtaining the reinstatement of a license to practice respiratory care that has lapsed, expired, or otherwise been rendered inactive or invalid; and
- (c) Regulating the practices of licensed respiratory care practitioners.

Plc 1501.02 Applicability. This chapter shall apply to any individual who intends to practice or who does actually practice respiratory care in New Hampshire, subject to the exceptions in RSA 326-E:6, reprinted in Appendix C.

Plc 1501.03 Notifications; Issuance of Licenses.

- (a) All notifications sent to applicants and licensees and all licenses issued pursuant to this chapter shall be sent to the applicant's or licensee's designated email address.
- (b) All notifications and licenses sent to a designated email address for which the OPLC does not received any indication that the email was not delivered shall be deemed to have been received by the person who designated the email address.

PART Plc 1502 DEFINITIONS

Plc 1502.01 "Active in the profession" means engaging in respiratory care as a direct care provider, an educator, an administrator, or a respiratory care consultant.

Plc 1502.02 "Advisory board" means the advisory board of respiratory care practitioners established pursuant to RSA 326-E:5.

Plc 1502.03 "Certified pulmonary function technician (CPFT)" means "certified pulmonary function technician" as defined in RSA 326-E:1, II, reprinted in Appendix C.

Plc 1502.04 "Contact hour" means a unit of measure of continuing professional education that equals 60 minutes of time unless used as a time-equivalent, such as one contact hour per college credit as in Plc 1507.07(b) or 12 contact hours for passing a specialty exam as in Plc 1507.09(b).

Plc 1502.05 "Continuing professional education" means structured courses, activities, and experiences that are beyond entry-level preparation for professional licensing and designed to provide advanced or enhanced knowledge in the field of respiratory care. The term includes "continuing education".

Plc 1502.06 "Cooperate" means to provide information requested by an investigator during an investigation and to answer any questions posed by the investigator in order to enable the executive director to determine compliance with RSA 326-E and Plc 1500.

Plc 1502.07 "Designated email address" means the email address provided by an applicant or licensee as the address for the OPLC to use when sending notifications and licenses.

Plc 1502.08 “Direct supervision” means supervision through direct and continuous observation of the activities of the person being supervised.

Plc 1502.09 “Executive director” means the executive director of the office of professional licensure and certification (OPLC) or designee.

Plc 1502.10 “Indirect supervision” means supervision through the supervisor’s review of the treatment progress notes made by the individual being supervised, telephone conversations between the supervisor and the individual being supervised, electronic correspondence between the supervisor and the individual being supervised, or any other form of supervision that is not direct supervision.

Plc 1502.11 “Investigator” means an individual authorized by the executive director to conduct an investigation into allegations of potential violations by a practitioner of applicable provisions in RSA 326-E or Plc 1500, or both.

Plc 1502.12 “License” means “license” as defined in RSA 541-A:1, VIII, namely “the whole or part of any agency permit, certificate, approval, registration, charter or similar form of permission required by law.” For purposes of providing information on professional activities in other jurisdictions, the term includes license, certificate, registration, or any other form of approval required to practice respiratory care in that jurisdiction.

Plc 1502.13 “Licensing bureau” means the organizational unit within the OPLC’s division of licensing and board administration that is responsible for accepting and processing applications.

Plc 1502.14 “Live programming” means educational programming presented by an instructor or by a panel of instructors that is available to attendees at the time it is being originally presented. The term includes a program attended remotely using a computer or other audio-visual telecommunications equipment, provided the attendee has an opportunity during the program to ask questions about the material presented that are answered by the instructor(s).

Plc 1502.15 “National Board for Respiratory Care, Inc. (NBRC)” means “National Board for Respiratory Care, Inc.” as defined in RSA 326-E:1, IV, reprinted in Appendix C.

Plc 1502.16 “Plan of correction” means a list of specific actions to be taken with a deadline for taking each action, to reflect how a licensee will correct a violation of, and come into compliance with, Plc 1500 and RSA 326-E.

Plc 1502.17 “Registered polysomnographic technologist (RPSGT)” means “registered polysomnographic technologist” as defined in RSA 326-E:1, VIII, reprinted in Appendix C.

Plc 1502.18 “Registered pulmonary function technologist (RPFT)” means “registered pulmonary function technologist” as defined in RSA 326-E:1, IX, reprinted in Appendix C.

Plc 1502.19 “Respiratory care” means “respiratory care” as defined in RSA 326-E:1, X, reprinted in Appendix C.

Plc 1502.20 “Respiratory care educational program” means “respiratory care educational program” as defined in RSA 326-E:1, XI, reprinted in Appendix C.

Plc 1502.21 “Respiratory care practitioner” means “respiratory care practitioner” as defined in RSA 326-E:1, XII, reprinted in Appendix C.

Plc 1502.22 “Working day” means any Monday through Friday, excluding days on which state offices are closed in observation of holidays.

PART Plc 1503 ADVISORY BOARD

Plc 1503.01 Advisory Board Members Appointment and Qualifications.

(a) As required by RSA 326-E:5, the executive director shall establish an advisory board of respiratory care practitioners consisting of 3 members, who shall be licensed respiratory care practitioners.

(b) As provided in RSA 326-E:5:

(1) Each member shall be appointed to a term of 3 years; and

(2) No member shall serve more than 2 consecutive full terms.

(c) Each of the licensed respiratory care practitioners appointed to the advisory board shall:

(1) Have been certified by the National Board for Respiratory Care, Inc. (NBRC) for at least 3 years preceding the appointment;

(2) Be currently licensed in New Hampshire when appointed and for the duration of the term; and

(3) Have actively practiced in New Hampshire for at least one year immediately preceding appointment to the advisory board.

Plc 1503.02 Meetings and Records of Advisory Board.

(a) The advisory board shall meet at the call of the executive director.

(b) Meetings of the advisory board shall be held at the OPLC's offices in Concord, NH, or in such location as the executive director determines will be most convenient for the largest number of anticipated attendees.

(c) Notice of meetings shall be provided as required by RSA 91-A.

(d) Records of the advisory board shall be maintained by the executive director as required by RSA 91-A.

Plc 1503.03 Responsibilities of Advisory Board.

(a) As provided in RSA 326-E:5, the advisory board shall advise the executive director regarding the implementation of RSA 326-E, including in particular by reviewing and commenting on proposed rules and proposed revisions to rules intended to implement RSA 326-E.

(b) If requested by the executive director based on a determination that the expertise of the advisory board members is needed, members of the advisory board shall sit as part of a panel for an adjudicative hearing conducted pursuant to applicable provisions in Plc 200 and RSA 541-A.

(c) If requested by the executive director based on a determination that the expertise of the advisory board members is needed, the advisory board shall assist with an investigation commenced pursuant to Plc 204 relative to complaints and investigations.

Plc 1503.04 Records of Predecessor Board. The records of the respiratory care practitioners governing board that existed prior to July 19, 2022, the effective date of Laws of 2022, ch. 72, shall be:

(a) Retained by the executive director in accordance with the retention schedule established pursuant RSA 310-A:1-d, II(e); and

(b) Available for public review as provided in Plc 100.

PART Plc 1504 INITIAL LICENSURE

Plc 1504.01 Statutory Qualifications.

(a) As required by RSA 326-E:3, I, to qualify for an initial license to practice respiratory care an applicant shall be of good professional character and:

- (1) Be a graduate of a respiratory care educational program; or
- (2) Have successfully completed and achieved a passing score for the entry level exam administered in English by the NBRC prior to July 31, 1977;

(b) As required by RSA 326-E:3, II and as further explained in Plc 1504.02, an applicant for initial licensure shall also pass a standardized national examination administered in English by the NBRC or by its successor organization.

(c) As required by RSA 326-E:3, III, an applicant for initial licensure shall certify under oath that the applicant is not under investigation by any professional licensing board and that the applicant's credentials have not been suspended or revoked by any professional licensing board.

(d) As required by RSA 326-E:3, IV, an applicant for initial licensure who has not practiced as a respiratory care practitioner for at least 500 hours per year during the 4 years prior to filing the application shall successfully complete continuing education and continuing competence requirements set forth in Plc 1505.01.

Plc 1504.02 Examination Required. To be eligible for licensure in New Hampshire, an individual shall:

(a) Pass the examination(s) administered in English by the NBRC to earn the certified respiratory therapist (CRT) credential or the registered respiratory therapist (RRT) credential; and

(b) Arrange for his or her examination scores to be sent directly to the licensing bureau by the NBRC.

Plc 1504.03 Applying for Initial Licensure.

(a) Any individual who meets the statutory qualifications as reiterated in Plc 1504.01 and wishes to engage in the practice of respiratory care who is not already licensed in New Hampshire shall file an application for an initial license in accordance with this section.

(b) Each applicant for initial licensure shall submit to the licensing bureau:

- (1) An "Application for Initial License to Practice Respiratory Care" dated November 2022, that contains the information specified in Plc 1504.04 and is signed and certified as specified in Plc 1504.06;
- (2) The documentation specified in Plc 1504.05 as applicable; and
- (3) An application processing fee of \$165.

(c) Each applicant shall also complete the process established by the New Hampshire department of safety (NHDOS) for requesting a criminal records check, accessible via the NHDOS website at <https://www.nh.gov/safety/> or directly at <https://services.dos.nh.gov/chri/cpo/>, including paying any required fee and directing that the results be sent to the OPLC.

Plc 1504.04 Information Required for Initial License Application. The applicant for an initial license to practice respiratory care shall provide the following information:

- (a) The applicant's first name, middle name, and last name, and any other name(s) under which the applicant holds or has held a professional license;
- (b) The applicant's date of birth, including the month, day, and year;
- (c) The applicant's social security number as required by RSA 161-B:11, VI-a and 42 U.S.C. 666(a)(13);
- (d) The applicant's home physical address and home mailing address, if different;
- (e) The applicant's home or other personal telephone number;
- (f) The applicant's designated email address;
- (g) Whether the applicant speaks English as his or her primary language and, if not, the applicant's primary language;
- (h) Information about the applicant's relevant education, as follows:
 - (1) The name and address of the educational institution that provided the respiratory care educational program;
 - (2) Whether the program was accredited by the American Medical Association's Committee on Allied Health Education and Accreditation in collaboration with the Joint Review Committee for Respiratory Therapy Education, by the Committee on Accreditation for Respiratory Care, or by the Commission on Accreditation of Allied Health Education Programs, or a successor organization to any of these organizations, if known;
 - (3) The degree earned; and
 - (4) The year the degree was awarded;
- (i) The name of each jurisdiction where the applicant holds or has held any professional license and for each, the following:
 - (1) The applicant's license number;
 - (2) The date the applicant was initially licensed; and
 - (3) The status of the license, including whether a license was denied or is active, suspended, revoked, or expired;
- (j) The name, location, telephone number, website URL if any, and email address if any of the business at which the applicant works or intends to work, if known;
- (k) The date the applicant sat for one of the examinations required by Plc 1504.02(a) and the credential earned;
- (l) The number of hours the applicant has been active in the profession in each of the prior 4 consecutive 12-month periods;
- (m) A "yes" or "no" answer to the following questions relating to background and character:

- (1) Whether the applicant is now or has reason to believe that the applicant will soon be the subject of a disciplinary proceeding, settlement agreement, or consent decree undertaken or issued by a professional licensing board of any jurisdiction;
 - (2) Whether any malpractice claim has been made against the applicant within the past 10 years;
 - (3) Whether the applicant has for disciplinary reasons been put on administrative leave, been fired for cause other than staff reduction from a position at the applicant's place of employment, or had any privileges limited, suspended, or revoked in any professional setting within the past 10 years;
 - (4) Whether the applicant has been denied the privilege of taking an examination required for any professional licensure within the past 10 years;
 - (5) Whether the applicant has committed any act(s) within the past 10 years that would violate the laws or rules that govern the profession for which application is being made;
 - (6) Whether the applicant has ever been found guilty of or entered a plea of no contest to any felony related to professional practice;
 - (7) Whether the applicant has been found guilty of or entered a plea of no contest to, within the past 10 years, any felony that is not related to professional practice, or any misdemeanor;
 - (8) Whether the applicant has been the subject of any disciplinary action by any professional licensing authority within the past 10 years;
 - (9) Whether the applicant has been denied a license or other authorization to practice in any jurisdiction within the past 10 years; and
 - (10) Whether the applicant has, within the past 10 years, surrendered a license or other authorization to practice issued by any jurisdiction in order to avoid or settle disciplinary charges;
- (n) Whether the applicant consents to the disclosure to third parties of any or all of the applicant's personal contact information; and
- (o) Whether the applicant has an ownership interest in any diagnostic or therapeutic service(s) or company(ies), and if so the name and address of each company and the specific diagnostic or therapeutic services provided by the company, to comply with RSA 125:25-c.

Plc 1504.05 Documentation Required for Initial License Application. The applicant shall provide the following with an application for initial licensure, as applicable:

- (a) Documentation of current certification by the NBRC;
- (b) If the applicant is unable to truthfully attest as required by RSA 326-E:3, III, a clear written explanation detailing the circumstances surrounding each such action that includes the date of action, reason(s) for action, and any other information the applicant believes is relevant;
- (c) If the applicant answered "yes" to any question in Plc 1504.04(m) for which an explanation is not being provided pursuant to (a), above, a clear written explanation detailing the circumstances surrounding each answer that includes the date(s), reason(s), and any other information the applicant believes is relevant; and

(d) If the applicant is subject to conditional licensure pursuant to Plc 1504.10(c) based on RSA 326-E:3, IV, both a completed supervision form as described in Plc 1505.04 and the following proofs of having met the competency requirements of Plc 1505.01:

- (1) For the courses described in Plc 1505.01(a) and (b), proofs of attendance showing:
 - a. The name of the applicant;
 - b. The name or main topic of the course;
 - c. The beginning and ending dates of the course;
 - d. The duration of the course in hours; and
 - e. The signature of a representative of the course sponsor or provider; and
- (2) For the NBRC self-assessment examination described in Plc 1505.01(c), the applicant's scores sent directly to the licensing bureau by the NBRC.

Plc 1504.06 Signature and Certification Required for Initial License Application.

(a) The applicant for an initial license to practice respiratory care shall sign and date the application, provided that once the application is available via an on-line portal, submission of the application electronically shall constitute the applicant's signature and the date of submission shall be the date.

(b) The applicant's signature shall constitute the applicant's certification that:

- (1) The applicant is not under investigation by any professional licensing board and the applicant's credentials have not been suspended or revoked by any professional licensing board, unless a written explanation of each such occurrence is submitted pursuant to Plc 1504.05(a) or (b);
- (2) The information and documentation provided are true, complete, and not misleading to the best of the applicant's knowledge and belief;
- (3) The applicant understands that providing false or misleading information constitutes grounds for denial, suspension, or revocation of a license; and
- (4) The applicant understands that knowingly providing false information constitutes a misdemeanor under RSA 641:3, I relative to falsification in official matters.

Plc 1504.07 Initial Review of Applications for Initial Licensure; Abandonment.

(a) Within 30 days of receipt of an application for initial licensure submitted pursuant to Plc 1504.03, the licensing bureau shall review the application and:

- (1) Accept the application as being complete; or
- (2) Determine that the application is incomplete and notify the applicant in writing sent to the applicant's designated email address that the application is incomplete, specifying what the applicant needs to submit to complete the application.

(b) A notice of incompleteness sent pursuant to (a)(2), above, shall inform the applicant that the application will be deemed to have been abandoned if the application is not completed within 60 days.

(c) An applicant who is unable to complete the application by the specified deadline due to circumstances beyond the control of the applicant may request additional time to complete the application in accordance with (d), below.

(d) A request for additional time to complete an application shall:

- (1) Be submitted in writing to the licensing bureau no later than the deadline specified for completing the application;
- (2) Clearly explain why the application cannot be completed by the deadline; and
- (3) Identify the date by which the applicant will complete the application.

(e) The licensing bureau shall grant additional time to complete the application if the applicant is prevented by circumstances beyond the applicant's control from completing the application and requests additional time.

(f) An application shall be deemed abandoned, and no decision shall be made to approve or deny the application, if the applicant submits an incomplete application for initial licensure and either:

- (1) Does not provide the required information and does not request additional time to complete the application by the specified deadline; or
- (2) Requests and receives additional time to complete the application but does not submit the required information by the new deadline.

(g) If the application is abandoned, the application processing fee shall not be refunded.

Plc 1504.08 Withdrawal of Application for Initial Licensure.

(a) An applicant may withdraw his or her application for licensure at any time prior to being notified of a decision under Plc 1504.09.

(b) To withdraw an application, the applicant shall submit written notice to the licensing bureau that clearly states the applicant's intention to withdraw the application and clearly identifies the name in which the application was submitted, the profession for which the application was submitted, and the date the application was submitted.

(c) Upon receipt of a notice of withdrawal, the licensing bureau shall cease processing the application and mark the file to indicate the application was voluntarily withdrawn by the applicant.

(d) If the application is withdrawn, the application processing fee shall not be refunded.

Plc 1504.09 Review of Complete Applications for Initial Licensure; Decisions.

(a) After determining that an application is complete, the licensing bureau shall review the application to determine whether the applicant meets all criteria specified in applicable law for the license being applied for.

(b) Subject to (c), below, the licensing bureau shall approve an application for initial licensure and issue a license if the applicant:

- (1) Has submitted an application that meets the requirements of Plc 1504.03; and
- (2) Meets the statutory requirements for licensure reiterated in Plc 1504.01.

(c) The licensing bureau shall issue a conditional license that is subject to Plc 1505 to an applicant otherwise eligible for initial licensure if the applicant has been:

- (1) Active in the profession fewer than 500 hours during each 12-month period for 4 consecutive 12-month periods and meets the competency requirements of Plc 1505.01; or

- (2) Active in the profession fewer than 1750 hours after passing one of the examinations described in Plc 1504.02.
- (d) The licensing bureau shall notify the applicant of the decision on the application in writing sent to the applicant's designated email address.
- (e) If the licensing bureau determines that the applicant has not demonstrated that all requirements to obtain a license or a conditional license are met, then:
- (1) The licensing bureau shall conditionally deny the application; and
 - (2) The notice sent pursuant to (d), above, shall inform the applicant that the denial shall become final in 30 days unless the applicant requests a hearing in writing within 30 days.
- (f) If the application is denied in accordance with (e), above, the application processing fee shall not be refunded.

Plc 1504.10 Initial Licenses: Issuance and Duration.

- (a) Each initial license to practice respiratory care issued by the OPLC shall specify:
- (1) The name of the licensee;
 - (2) The effective date of the license; and
 - (3) The license number.
- (b) An initial license that is not conditional shall:
- (1) Be valid for 2 years, provided that the timely filing of a complete renewal application shall continue the validity of the license being renewed until final action is taken on the renewal application;
 - (2) Expire on the last day of the month in which the license was issued unless a timely and complete renewal application is filed or the license is sooner suspended or revoked in accordance with Plc 1510; and
 - (3) Be subject to renewal.
- (c) A conditional license shall be valid as provided in Plc 1505.02(b).
- (d) A conditional licensee shall at all times be subject to the same disciplinary sanctions as are holders of full licenses.

PART Plc 1505 CONDITIONAL LICENSES

Plc 1505.01 Competence Requirements for Conditional Licenses. To obtain a conditional license under Plc 1504.09(b)(1), the applicant shall, within the calendar year immediately preceding the submission of his or her application:

- (a) Complete 12 contact hours of professional respiratory care courses that are:
- (1) Described by the course sponsors or providers as review courses; and
 - (2) Approved by:

- a. The American Medical Association’s Committee on Allied Health Education and Accreditation in collaboration with the Joint Review Committee for Respiratory Therapy Education or its successor organization;
 - b. The Committee on Accreditation for Respiratory Care or its successor organization;
 - c. The Commission on Accreditation of Allied Health Education Programs or its successor organization; or
 - d. The American Association for Respiratory Care (AARC) or its successor organization;
- (b) Complete an additional 6 contact hours of continuing education in:
- (1) Current treatment or management of infectious diseases;
 - (2) Advances in the pharmacologic treatment of the cardio-pulmonary system;
 - (3) New modes of respiratory care; or
 - (4) Any other current topics in respiratory care; and
- (c) Take and score in the passing range on all parts of the NBRC self-assessment examination designed for the highest NBRC credential the applicant has obtained.

Plc 1505.02 Conditional Licenses; Supervision.

- (a) A conditional license shall limit the licensee to practicing under the following supervision by one or more individuals who are licensed to practice respiratory care in New Hampshire without conditions or limitations:
- (1) Direct supervision, as defined in Plc 1502.07, for not less than 10 percent of the hours worked each week; and
 - (2) Indirect supervision, as defined in Plc 1502.09, for not less than 10 percent of the hours worked each week.
- (b) A conditional license shall remain valid for no more than 26 weeks unless:
- (1) Its validity is extended pursuant to Plc 1505.07 or Plc 1505.08; or
 - (2) It is sooner suspended or revoked in accordance with Plc 1505.09 or Plc 1510.

Plc 1505.03 Supervision Form.

- (a) The supervision form required by Plc 1504.05(c) shall be the “Supervision of Respiratory Care Conditional Licensee” form dated September 2022, as further described in (e), below.
- (b) The individual to be supervised shall:
- (1) Legibly complete part I of the form, entitled “To be completed by the Applicant/Conditional Licensee (individual to be supervised)”; and
 - (2) Give the form to the individual who will provide supervision.
- (c) The individual who intends to provide supervision shall:
- (1) Legibly complete part II of the form, entitled “To be completed by the Supervisor”;

- (2) Sign and date the form; and
- (3) Return the form to the licensing bureau.

(d) The signature required on the form by (c), above, shall constitute the supervisor's certification that the supervisor:

- (1) Is licensed to practice respiratory care in New Hampshire without limitation or restriction;
- (2) Has read and understands Plc 1505 governing the supervision;
- (3) Agrees to undertake the duties of supervision;
- (4) Agrees to take responsibility for the acts and omissions of any individual to whom the signer delegates the duties of supervision under Plc 1505.04; and
- (5) Understands that the failure of the signer or the signer's delegate to follow the rules governing the supervision has the potential to subject the signer to disciplinary sanctions.

(e) The "Supervision of Respiratory Care Conditional Licensee" form dated September 2022 shall comprise 2 parts, as follows:

(1) Part I, entitled "To be completed by the Applicant/Conditional Licensee (individual to be supervised)", shall require the applicant or conditional licensee to provide the following information:

- a. The individual's full legal name;
- b. The date the application is being submitted; and
- c. If the individual's place of employment is known, the name, address, and telephone number of the place of employment; and

(2) Part II, entitled "To be completed by the Supervisor", shall require the supervisor to provide the following information:

- a. The supervisor's full legal name and New Hampshire license number;
- b. The name, address, and telephone number of the supervisor's employer;
- c. The name, location, and telephone number of the site where the supervision will occur; and
- d. The date the supervision is anticipated to start and the date the supervision is anticipated to end.

(f) If the identified supervisor becomes unable to serve as the supervisor for any reason that is not temporary as provided in Plc 1505.04, the conditional licensee shall complete the steps in (b) through (d), above, with a new supervisor.

Plc 1505.04 Temporary Delegation of Supervisory Responsibilities.

(a) If a supervisor is unable for any reason to perform the responsibilities of supervision, the supervisor shall:

- (1) Delegate the responsibilities on a temporary basis to an individual who is licensed to practice respiratory care in New Hampshire without conditions or limitations, if the

circumstances causing the need for the delegation are expected to exist for 5 or fewer days on which direct supervision or indirect supervision of the conditional licensee is scheduled; or

(2) Inform the conditional licensee that a new supervisor will be needed, if the circumstances causing the need for the delegation are expected to exist, or actually do exist, for more than 5 days on which direct supervision or indirect supervision of the conditional licensee is scheduled and the schedule cannot be changed to accommodate the circumstances.

(b) A supervisor shall retain the ultimate responsibility for the conditional licensee's supervision even if supervision is delegated pursuant to (a)(1), above.

(c) A licensee to whom responsibility has been delegated pursuant to (a)(1), above, shall not further delegate any supervisory responsibilities.

Plc 1505.05 Requirements for Full Initial Licensure of Conditional Licensees.

(a) In order to achieve full licensure, a conditional licensee shall, within the period of validity of his or her conditional license:

(1) Practice under the supervision required by Plc 1505.03(a) for at least 12 weeks if practicing 32 hours or more each week or for at least 24 weeks if practicing fewer than 32 hours each week; and

(2) Demonstrate competency as documented by at least one supervisory letter that complies with (b), below.

(b) Each supervisory letter demonstrating competency shall:

(1) Be on business stationery, dated and signed by the supervisor;

(2) Be submitted directly to the licensing bureau by the supervisor;

(3) Include the statement that the requirements of Plc 1505.05(a)(1) were met; and

(4) Include the statement that, in the opinion of the supervisor, the conditional licensee is competent to practice under full licensure.

Plc 1505.06 Administrative Obligations of Conditional Licensees.

(a) Before the beginning of supervision by each individual who will provide some or all of the supervision, a conditional licensee shall:

(1) Give the individual a copy of Plc 1505 and the supervision form specified in Plc 1505.04;

(2) Discuss the required supervision with the individual; and

(3) Request the supervisor to complete the form and submit it to the licensing bureau.

(b) Whenever an individual providing supervision is replaced by another individual on other than a temporary basis as provided in Plc 1505.04(a)(1), a conditional licensee shall:

(1) Notify the licensing bureau of the replacement; and

(2) Take the actions required by (a), above.

Plc 1505.07 Extension of Conditional License When Supervised Practice is Incomplete or Supervisory Letter is Unavailable. The licensing bureau shall extend a conditional license for an additional period of no more than 26 weeks when:

- (a) The conditional license is currently valid;
- (b) The conditional licensee:
 - (1) Is unable to complete the practice required by Plc 1505.05(a)(1) due to loss of employment for any reason other than being terminated for cause or terminated during probationary employment because of incompetence; or
 - (2) Is unable to submit the supervisory letter required by Plc 1505.05(a)(2) for a reason unrelated to the supervisor's belief that the licensee is not competent to practice under full licensure; and
- (c) The conditional licensee submits to the executive director a written request for the extension explaining the details of the reason for the request as provided in (b), above.

Plc 1505.08 Extension of Conditional License Pursuant to Supervisor's Request. The licensing bureau shall extend a conditional license for an additional period of not more than 12 weeks when:

- (a) The conditional license is currently valid; and
- (b) The individual supervising the conditional licensee requests the extension to allow the conditional licensee to establish competence sufficient for full licensure.

Plc 1505.09 Expiration, Suspension, and Emergency Suspension of Conditional Licenses.

- (a) A conditional license not expired by the passage of time without fulfillment of the requirements to obtain full initial licensure shall expire when a final decision on full initial licensure is made.
- (b) The conditional licensee shall have the right to challenge the denial of full licensure through an adjudicative hearing.
- (c) The executive director shall suspend a conditional license after complying with (d), below, if it is demonstrated that the conditional licensee:
 - (1) Practiced respiratory care without supervision;
 - (2) Was terminated for cause from employment as a respiratory care practitioner;
 - (3) Was terminated from employment as a respiratory care practitioner for incompetence during a probationary period; or
 - (4) Violated RSA 326-E or Plc 1500.
- (d) The executive director shall suspend a conditional license on one or more of the bases set forth in (c), above, only after:
 - (1) Giving the conditional licensee notice containing:
 - a. A statement of the executive directors intent to suspend the conditional license;
 - b. The facts on which the proposed suspension is based;
 - c. The date the proposed suspension will take effect; and
 - d. A statement that the conditional licensee has the right to request an adjudicative hearing to challenge the proposed suspension; and

(2) Providing the conditional licensee the opportunity to challenge the proposed suspension at an adjudicative hearing.

(e) The executive director shall suspend a conditional license on an emergency basis in the circumstances, and according to the procedures, set forth in RSA 541-A:30, III.

PART Plc 1506 TEMPORARY LICENSES

Plc 1506.01 Availability of Temporary Licenses. A temporary license shall:

(a) Be available pursuant to RSA 310-A:1-f and Plc 801, or successor rules in Plc 300, to individuals currently licensed in good standing as a respiratory care practitioner in a U.S. jurisdiction whose requirements for licensure are equivalent to or greater than those of New Hampshire; and

(b) Remain valid for no more than 120 days.

Plc 1506.02 No More Than One Temporary License. An individual who previously received a temporary license to practice respiratory care in New Hampshire shall be ineligible for any subsequent temporary license to practice respiratory care in New Hampshire.

Plc 1506.03 Requirements for Temporary Licenses.

(a) An applicant for temporary licensure as respiratory care practitioner shall:

(1) Submit, or have already submitted, a completed application for full licensure as provided in Plc 1504.03;

(2) Hold an active, unencumbered license from a U.S. jurisdiction whose requirements for licensure are equivalent to or greater than those of New Hampshire, in the form of the URL of an official government website that identifies the requirements for licensure and an official verification of licensure or a printout from an online license verification system submitted with the application;

(3) Have committed no acts or omissions that are grounds for disciplinary action in another jurisdiction, provided that if such acts have been committed, the applicant submits a clear written explanation of each such act, including the date and circumstances and whether any disciplinary or non-disciplinary action was taken based on the act;

(4) Complete and submit an "Application for Temporary License to Practice Respiratory Care" dated November 2022, as set forth in Plc 1506.04; and

(5) Pay the temporary license fee specified in Plc 1001.

(b) An applicant shall sign and date the application, provided that when the application is available on-line, the act of submitting the application shall be the signature and the date it is submitted shall be the date.

(c) The applicant's signature shall constitute the applicant's certification that:

(1) The applicant has read and agrees to abide by the applicable New Hampshire statutes and administrative rules;

(2) The information and documentation provided are true, complete, and not misleading to the best of the applicant's knowledge and belief;

(3) The applicant understands that providing false or misleading information constitutes grounds for denial, suspension, or revocation of a license; and

(4) The applicant understands that knowingly providing false information constitutes a misdemeanor under RSA 641:3, I relative to falsification in official matters.

Plc 1506.04 Information Required on Application for Temporary License. An applicant for a temporary license shall provide the following information on an “Application for Temporary License to Practice Respiratory Care” dated November 2022:

(a) The date the applicant submitted an application for initial licensure under Plc 1504.03 or, if the application has not yet been filed, the anticipated date of filing;

(b) The applicant’s full legal name and any other name(s) in which the applicant holds or has held a professional license;

(c) The applicant’s date of birth, including the month, day, and year;

(d) The applicant’s social security number, as required by RSA 161-B:11, VI-a and 42 U.S.C. 666(a)(13);

(e) The applicant’s home physical address and home mailing address, if different, including the city, state, zip code, and country if not the U.S.;

(f) The applicant’s home or other personal telephone number;

(g) The applicant’s designated email address;

(h) The credentials held by the applicant from the NBRC and the date of the applicant’s most recent certification;

(i) Identification of each U.S. jurisdiction in which the applicant holds an active license to practice respiratory care and for each, the license number, date of most recent licensure, and whether the license is in good standing;

(j) An answer to the question “Have you committed any acts or omissions that are grounds for disciplinary action in any jurisdiction?”;

(k) If the answer to the question in (j) is in the affirmative, a detailed letter of explanation explaining the circumstances and any disciplinary or non-disciplinary action taken;

(l) Whether the applicant consents to the disclosure to third parties of any or all of the applicant’s personal contact information; and

(m) Verification of licensure from a jurisdiction listed pursuant to (i), above, that has licensure requirements for respiratory care that are equivalent to or greater than those of New Hampshire, in the form of the URL of an official government website that identifies the requirements for licensure and an official verification of licensure or a printout from an online license verification system.

Plc 1506.05 Issuance and Expiration of Temporary Licenses; Obligations of Temporary Licensees.

(a) The licensing bureau shall issue a temporary license to each applicant who files a complete application that demonstrates the applicant meets the eligibility requirements stated in Plc 1506.03.

(b) As provided in RSA 310-A:1-f, II, a temporary license shall expire on the earlier of 120 days after issuance or the date final action is taken on the temporary licensee’s application for full licensure.

(c) The holder of a temporary license shall comply with:

- (1) All ethical and professional standards that apply to full licensees; and
- (2) Plc 1507.01 relative to required notifications.

PART Plc 1507 LICENSEE OBLIGATIONS; CONTINUING COMPETENCE

Plc 1507.01 Licensee Obligations for Notifications and Updates.

(a) Each licensee shall notify the licensing bureau within 10 working days when a change of name occurs.

(b) Each licensee shall update the OPLC's records within 10 working days when a change of home or business address, personal telephone number, or designated email address occurs.

(c) Each licensee shall notify the licensing bureau within 10 working days of:

- (1) Any disciplinary action, including the imposition of fines or penalties, taken or in process of being taken against the licensee by another jurisdiction in which the licensee is licensed; and
- (2) The commencement of any civil action or insurance claim filed against the licensee that alleges malpractice and any decision(s) made in such civil actions or insurance claims.

(d) Each licensee shall know, and have available in his or her office or other place of business, information regarding how complaints can be filed with the OPLC.

Plc 1507.02 Licensee Responsibilities for Renewal. Each licensee shall:

- (a) Know when his or her license is due to expire; and
- (b) Except for holders of a temporary license or conditional license, file an application for renewal prior to the expiration of the current license in accordance with Plc 1508 if he or she wishes to continue to practice in New Hampshire.

Plc 1507.03 Maintenance of NBRC Credential(s) Required.

- (a) Each licensee shall comply with the requirements for maintaining his or her NBRC credential(s).
- (b) Each licensee shall maintain continuous NBRC credentials during a licensure period.
- (c) Any continuing education meeting the requirements of the NBRC shall qualify as meeting the continuing competence requirements in Plc 1507.04.
- (d) If a licensee's NBRC credential(s) is or are revoked or suspended by the NBRC, or if the credential(s) expire(s), the licensee shall:
 - (1) Notify the licensing bureau within 10 working days; and
 - (2) Not engage in respiratory care practice for compensation in New Hampshire unless and until reobtaining NBRC credential(s) and a license under RSA 326-E and Plc 1500.

Plc 1507.04 Continuing Professional Competence Requirements.

(a) Unless receiving a waiver pursuant to Plc 1507.06 based on active military service, a licensee intending to renew his or her licensure shall engage in continuing professional education by completing

24 contact hours of continuing competence activities for the 2-year license period in accordance with (b) through (d), below.

(b) At least half of the contact hours required by (a), above, shall relate directly and primarily to the clinical application of respiratory care.

(c) The balance of the contact hours required by (a), above, shall relate to:

- (1) How to teach respiratory care;
- (2) Respiratory care supervision and consultation skills;
- (3) Respiratory care curriculum development;
- (4) Trans-disciplinary issues or skills applicable to respiratory care;
- (5) Respiratory care administration and management;
- (6) Respiratory care research; and
- (7) Other continuing professional education similarly not related directly and primarily to the clinical application of respiratory care.

(d) Continuing competence credit shall be accumulated through participating in the following activities:

- (1) Successful completion of a college-level course related to respiratory care, as further described in Plc 1507.07;
- (2) Successful completion of live programming such as courses, programs, workshops and seminars, as further described in Plc 1507.08;
- (3) Passing specialty examinations, as further described in Plc 1507.09;
- (4) Public professional presentations relating to respiratory care, as further described in Plc 1507.10;
- (5) Participation in a respiratory care research project, as further described in Plc 1507.11;
- (6) Taking and passing courses for initial or renewal certification, as further described in Plc 1507.12;
- (7) Participation as an instructor or instructor trainee in one of the courses for initial or renewal certification that qualify under (6), above, as further described in Plc 1507.13;
- (8) Teaching a college-level course relating to respiratory care, as further described in Plc 1507.14;
- (9) Facility-based respiratory care in-service training, as further described in Plc 1507.15;
- (10) Publication of writing related to respiratory care, as further described in Plc 1507.16; and
- (11) Participation in the work of professional boards and committees, as further described in Plc 1507.17.

Plc 1507.05 Documentation Requirements; Audits.

(a) Upon being notified by the OPLC that a third-party organization is under contract to manage continuing competence compliance through an on-line system, each licensee shall use the on-line system to track and report the completion of continuing competence activities.

(b) Until an on-line system becomes available, each licensee shall retain documentation of his or her participation in continuing competence activities as described for the specific course or activity for not less than 3 years.

(c) Until an on-line system becomes available, the executive director shall audit licensee participation in continuing competence activities by:

(1) Randomly selecting 10% of licensees each year to be audited; and

(2) Notifying each selected licensee of the audit by email sent to the licensee's designated email address.

(c) The notice sent pursuant to (b)(2), above, shall direct the licensee to submit his or her documentation for the preceding 3 years to the executive director by a specified date, which shall be no sooner than 30 days from the date of the notice.

(d) A licensee selected for audit shall submit the original documentation for each course or activity to the executive director no later than the date specified in the notice.

(e) Failure to submit documentation when directed to do so shall constitute a violation of these rules for which disciplinary action can be taken.

Plc 1507.06 Waivers of Continuing Professional Education Requirements for Active Military Service. The executive director shall issue the following waivers of the requirements of Plc 1507.04 for licensees on active military duty:

(a) A full waiver of all obligation set forth in Plc 1507.04 for a licensee who:

(1) Is or will be on active military duty for 80% or more of the licensing period; and

(2) Submits a request for the waiver and proof of the obligation to serve active military duty in the form of verification from the Defense Finance and Accounting Service at <https://www.dfas.mil/garnishment/verifyservice/>; and

(b) A waiver of half of the obligation set forth in Plc 1507.04 for a licensee who:

(1) Is or will be on active military duty for more than 50% but less than 80% of the license period; and

(2) Submits a request for the waiver and proof of the obligation to serve active military duty in the form of verification from the Defense Finance and Accounting Service at <https://www.dfas.mil/garnishment/verifyservice/>.

Plc 1507.07 College-Level Courses Relating to Respiratory Care.

(a) A licensee may claim credit towards the continuing competence requirement for successfully completing a college-level course relating to respiratory care, provided that:

(1) The course is given as part of a program or curriculum with the potential to lead to an academic degree higher than that held by the licensee at the time of first eligibility for initial licensure;

- (2) The course adds to the professional knowledge or skill of the licensee as shown in a written summary of the new information or skill the licensee acquired during the course; and
 - (3) The licensee achieves in the course a letter grade of C or better or a numerical grade of 2.00 or better on a 4-point scale, or the equivalent on any other point scale.
- (b) The licensee may claim one contact hour for each course credit awarded by the college or university.
- (c) Documentation of successful completion of a college-level course relating to respiratory care shall be:
- (1) An official transcript showing:
 - a. The name of the course;
 - b. The date of the course; and
 - c. The grade assigned to the licensee;
 - (2) One of the following descriptions of the course:
 - a. The description of the course copied from the college or university catalogue; or
 - b. The course syllabus; and
 - (3) The licensee's written summary of the new information or skill that the licensee acquired by taking the course.

Plc 1507.08 Courses, Programs, Workshops, and Seminars.

- (a) A licensee may claim credit towards the continuing competence requirement for successfully completing live programming such as courses, programs, workshops, and seminars that are:
- (1) Courses and other programs approved or sponsored by AARC;
 - (2) Non-AARC courses, workshops and seminars that are:
 - a. Related to respiratory care or related to diseases and conditions calling for respiratory care; and
 - b. Sponsored or provided by any statewide professional respiratory care organization; or
 - (3) Non-AARC courses that are:
 - a. Related to respiratory care or related to diseases and conditions calling for respiratory care; and
 - b. Approved by the accreditation council for continuing education of the American Medical Association.
- (b) The licensee may claim as credit for completing a course, program, workshop, or seminar described in (a), above, the same number of contact hours attributed to it by the provider or sponsor.
- (c) Documentation of successful completion of a course or program described in (a), above, shall be a document showing:
- (1) The licensee's name;

- (2) The name and location of the course or program;
- (3) The name of the provider or sponsoring entity;
- (4) The beginning and ending date(s) of the course or program;
- (5) The name of each speaker or instructor;
- (6) The number of hours credited by the provider or sponsoring entity; and
- (7) The printed name and signature of the speaker, instructor, or representative of the provider or sponsoring entity.

(d) Documentation of successful completion of a workshop or seminar described in (a), above, shall be the licensee's certificate of completion.

Plc 1507.09 Specialty Examinations.

(a) A licensee may claim credit towards the continuing competence requirement for passing any of the following specialty examinations that the licensee has not previously passed, provided the examination is for credentials that are a more advanced category than the licensee currently holds:

- (1) Registered respiratory therapist examination;
- (2) Pulmonary function technologist examination;
- (3) Neonatal and pediatric respiratory care specialty examination;
- (4) Sleep disorders testing and therapeutic intervention respiratory care specialist examination; and
- (5) Adult critical care specialist examination.

(b) The licensee may claim 12 contact hours for each specialty examination passed.

(c) Documentation of passing one of the NBRC specialty examination described in (a), above, shall be the NBRC notification stating that the licensee passed the examination.

Plc 1507.10 Public Professional Presentations Relating to Respiratory Care.

(a) A licensee may claim credit towards the continuing competence requirement for public professional presentations relating to respiratory care, including at workshops, lectures, and in-service trainings.

(b) The licensee may claim 2 contact hours for each clock hour of a public presentation, to a maximum of 8 contact hours per renewal period, provided that if the licensee gives substantially the same public presentation more than once, the licensee shall claim credit for a single presentation only.

(c) Documentation of a public professional presentation relating to respiratory care shall be:

- (a) A copy of the official program of the presentation; or
- (b) Written verification signed by a representative of the program's sponsor showing:
 - (1) The title of the presentation;
 - (2) The name of the licensee as presenter;

- (3) The name of the sponsor's representative who signed the verification;
- (4) The date of the presentation;
- (5) The hours during which the presentation took place; and
- (6) The type of audience attending the presentation.

Plc 1507.11 Participation in a Respiratory Care Research Project.

- (a) A licensee may claim credit towards the continuing competence requirement for the licensee's participation in a respiratory care research project.
- (b) The licensee may claim one contact hour for every 4 clock hours spent on a research project, to a maximum of 8 contact hours per renewal cycle.
- (c) Documentation of a licensee's participation in a respiratory care research project shall be a statement signed by either the principal investigator or a representative of the grant sponsor showing:
 - (1) The name of the research project;
 - (2) The name of the principal investigator;
 - (3) The name of the grant sponsor;
 - (4) The licensee's role in the research project;
 - (5) The beginning and ending dates of the licensee's participation; and
 - (6) The number of hours spent by the licensee in project participation.

Plc 1507.12 Taking and Passing Courses for Initial or Renewal Certification.

- (a) A licensee may claim credit towards the continuing competence requirement for taking and passing one or more courses for initial or renewal certification in:
 - (1) Basic life support for health care providers (BLS), comprising a course for health care providers sponsored by the American Heart Association in the techniques of cardio pulmonary resuscitation;
 - (2) Advanced cardiac life support (ACLS), comprising a course sponsored by the American Heart Association in the therapeutic interventions used in cases of cardiac arrest;
 - (3) "Pediatric advanced life support (PALS)", comprising a course in advanced techniques in the resuscitation of children sponsored by the American Academy of Pediatrics; or
 - (4) Neonatal resuscitation program (NRP), comprising a course sponsored by the American Academy of Pediatrics in the techniques of resuscitation of newborn babies.
- (b) The licensee may claim the following:
 - (1) For taking and passing a BLS initial certification course, 8 contact hours;
 - (2) For taking and passing a BLS renewal certification course, 4 contact hours;
 - (3) For taking and passing an ACLS initial certification course, 16 contact hours;
 - (4) For taking and passing an ACLS renewal certification course, 8 contact hours;

- (5) For taking and passing a PALS initial certification course, 16 contact hours;
 - (6) For taking and passing a PALS renewal certification course, 8 contact hours;
 - (7) For taking and passing an NRP initial certification course, 8 contact hours; and
 - (8) For taking and passing an NRP renewal certification course, 4 contact hours.
- (c) Documentation of taking and passing one of the courses listed in (a), above, shall be:
- (1) The certification card showing that the licensee has taken and passed the course; or
 - (2) A certificate of course completion issued by the course sponsor.

Plc 1507.13 Participation as an Instructor or Instructor Trainee in Courses for Initial or Renewal Certification.

(a) A licensee may claim credit towards the continuing competence requirement for participation as an instructor or instructor trainee in courses for initial or renewal certification in:

- (1) BLS;
 - (2) ACLS;
 - (3) PALS; or
 - (4) NRP.
- (b) The licensee may claim the following:
- (1) For participation as an instructor or instructor trainee in a BLS initial certification course, 8 contact hours;
 - (2) For participation as an instructor or instructor trainee in a BLS renewal certification course, 4 contact hours;
 - (3) For participation as an instructor or instructor trainee in an ACLS initial certification course, 16 contact hours;
 - (4) For participation as an instructor or instructor trainee in an ACLS renewal certification course, 8 contact hours;
 - (5) For participation as an instructor or instructor trainee in a PALS initial certification course, 16 contact hours;
 - (6) For participation as an instructor or instructor trainee in a PALS renewal certification course, 8 contact hours;
 - (7) For participation as an instructor or instructor trainee in an NRP initial certification course, 8 contact hours; and
 - (8) For participation as an instructor or instructor trainee in an NRP renewal certification course, 4 contact hours.

(c) Documentation of participation as an instructor in one of the courses listed in (a), above, shall be the course roster showing:

- (1) The dates the course was given;

- (2) Total number of hours of the course;
- (3) The name of each student participant;
- (4) The name of the sponsoring organization; and
- (5) The instructor's printed name and signature.

(d) Documentation of participation as an instructor trainee in one of the courses listed in (a), above, shall be:

- (1) The materials described in (c), above; and
- (2) One of the following documents issued by the sponsoring organization:
 - a. The certification card; or
 - b. The certificate of completion as a trainee.

Plc 1507.14 Teaching a College-Level Course Relating to Respiratory Care.

(a) A licensee may claim credit towards the continuing competence requirement for preparing to teach and teaching a college-level course relating to respiratory care as continuing professional education.

(b) The licensee may claim 2 contact hours for each hour of credit that would be awarded to a licensee taking the course for continuing professional education credit pursuant to Plc 1507.07, provided that the licensee shall claim credit only once for preparing and teaching the course unless the licensee substantially revises the course for later presentations.

(c) Documentation of teaching a college-level course relating to respiratory care shall be:

(c) A statement signed by an administrative official of the college or university that reports:

- (1) The name of the course;
- (2) Verification that the course was prepared and taught by the licensee; and
- (3) The credit hours given by the college or university to students successfully completing the course; and

(d) One of the following descriptions of the course:

- (1) The description of the course copied from the college or university catalogue; or
- (2) The course syllabus.

Plc 1507.15 Facility-Based Respiratory Care In-Service Training.

(a) A licensee may claim credit towards the continuing competence requirement for participation in, or attendance at, a facility-based respiratory care in-service training consisting of a presentation or exchange of information at a meeting specifically scheduled as in-service training.

(b) The licensee may claim one contact hour for each clock hour of participation or attendance, to a maximum of 4 contact hours per renewal cycle.

(c) Documentation of participation in facility-based respiratory care in-service training shall be a memo signed by the respiratory care supervisor or general supervisor of the facility showing:

- (1) The licensee's name;

- (2) The name of the facility and the topic of the in-service training;
- (3) The name of the primary speaker or instructor; and
- (4) The date of the in-service training and the licensee's hours of attendance.

Plc 1507.16 Publication of Writing Related to Respiratory Care.

(a) A licensee may claim credit towards the continuing competence requirement for publication of writing related to respiratory care, including books, peer-reviewed and non-peer-reviewed chapters of books, and peer-reviewed and non-peer-reviewed articles.

(b) The licensee may claim no more than 12 contact hours per renewal cycle in accordance with the following:

- (1) For a book:
 - a. If the licensee was the sole or primary author, 12 contact hours; and
 - b. If the licensee was a co-author or secondary author, 6 contact hours;
- (2) For a peer-reviewed chapter of a book or a peer-reviewed article:
 - a. If the licensee was the sole or primary author, 6 contact hours; and
 - b. If the licensee was a co-author or secondary author, 3 contact hours; and
- (3) For a non-peer reviewed chapter or article:
 - a. If the licensee was the sole or primary author, 4 contact hours; and
 - b. If the licensee was a co-author or secondary author, 2 contact hours.

(c) Documentation of the publication of a writing related to respiratory care shall be any item showing:

- (1) The title of the writing;
- (2) The date of publication;
- (3) A statement of whether the writing was peer-reviewed; and
- (4) Whether the licensee was a sole or primary author of the published writing.

Plc 1507.17 Participation in the Work of Professional Respiratory Care Boards and Committees.

(a) A licensee may claim credit towards the continuing competence requirement for participating as a member of a board or committee of a professional respiratory care organization or government agency.

(b) The licensee may claim 2 contact hours per renewal cycle for each board or committee on which the licensee served for more than half of the renewal cycle, to a maximum of 6 hours per renewal cycle.

(c) Documentation of participation in the work of a professional respiratory care board or committee shall be a letter conforming to (d), below, that was issued by:

- (1) The authority appointing the licensee to the board or committee; or

- (2) The chair or chair-equivalent of the board or committee, provided that if the licensee is the chair or chair-equivalent, the letter shall be signed by not less than 2 other members of the board or committee.
- (d) The letter shall:
- (1) State the date the licensee was appointed to the board or committee;
 - (2) Describe the purpose and function of the board or committee;
 - (3) Describe the extent of the licensee's participation in the meetings and activities of the board or committee;
 - (4) If the licensee's appointment has ended, state the ending date of the licensee's service; and
 - (5) Show the printed name of each individual who signs the letter.

PART Plc 1508 LICENSE RENEWAL AND REINSTATEMENT

Plc 1508.01 Eligibility for License Renewal. To be eligible for renewal of a license to practice respiratory care, an individual shall have:

- (a) Maintained his or her NBRC credential(s);
- (b) Accrued 24 hours of continuing education as provided in Plc 1507.04;
- (c) Not violated this chapter or the licensure requirements of any other jurisdiction in which the licensee is currently licensed; and
- (d) Not been convicted of any misdemeanor or felony arising from circumstances that demonstrate poor professional character.

Plc 1508.02 Notification of Pending License Expiration.

(a) At least 60 days prior to the expiration of a license issued pursuant to RSA 326-E and Plc 1500 or rules of the predecessor board, the licensing bureau shall:

- (1) Notify, in writing to the email address on file, each licensee whose license is expiring that:
 - a. The license is due to expire; and
 - b. Failure to file a complete and timely application for renewal shall result in the license lapsing; and
 - (2) Include with the notice a copy of the renewal application identified in Plc 1508.03(a) or, when the application becomes available on-line, a registration code for the licensee to use to renew on-line.
- (b) A licensee who wishes to renew his or her license who does not receive an application or registration code shall contact OPLC customer support at CustomerSupport@oplc.nh.gov to obtain an application or code, as applicable.
- (c) As provided in RSA 541-A:30, I, if a timely and complete renewal application has been filed then the license shall continue as valid until final action is taken on the application for renewal.

(d) A licensee whose license has expired shall not practice respiratory care in New Hampshire until his or her license has been reinstated.

Plc 1508.03 Application for License Renewal. A licensee who wishes to renew his or her license shall submit to the licensing bureau:

(a) A completed “Application to Renew License to Practice Respiratory Care” dated November 2022 that provides the information required by Plc 1508.04 and is signed and certified as specified in Plc 1508.07;

(b) The documentation required by Plc 1508.05;

(c) The information and certification relative to meeting continuing competence requirements, as specified in Plc 1508.06; and

(d) An application processing fee of \$165.

Plc 1508.04 Information Required for Renewal Application. An applicant for renewal of a license to practice respiratory care shall provide the following information:

(a) The applicant’s license number and expiration date;

(b) The applicant’s first name, middle name, and last name, and any other name(s) in which the applicant holds or has held a professional license;

(c) The applicant’s date of birth, including month, day, and year;

(d) The applicant’s social security number, as required by RSA 161-B:11, VI-a and 42 U.S.C. 666(a)(13);

(e) The applicant’s home physical address and home mailing address, if different;

(f) The applicant’s home or other personal telephone number;

(g) The applicant’s designated email address;

(h) Relative to the business where the applicant works, the name and location of the business, its telephone number, the URL of the business’s website, if any, and the business email address, if any;

(i) If the information the applicant has previously provided relative to professional licensing in other jurisdictions has changed, an update of that information;

(j) A “yes” or “no” answer to the following questions regarding the applicant’s background and character:

(1) During the past 27 months or not previously reported, have you been found guilty or entered a plea of no contest to any felony or misdemeanor?;

(2) During the past 27 months or not previously reported, have you been the subject of any disciplinary action by any professional licensing authority?;

(3) During the past 27 months or not previously reported, have you been denied a license or other authorization to practice in any jurisdiction?;

(4) During the past 27 months or not previously reported, have you surrendered a license or other authorization to practice issued by any jurisdiction in order to avoid or settle disciplinary charges?;

- (5) Do you have any reason to believe that you are or will soon be the subject of a disciplinary proceeding, settlement agreement, or consent decree undertaken or issued by a professional licensing board of any jurisdiction?;
- (6) During the past 27 months or not previously reported, has any malpractice claim been made against you?;
- (7) During the past 27 months or not previously reported, have you, for disciplinary reasons, been put on administrative leave, been fired for cause other than staff reductions from a position at your place of employment, or had any privileges limited, suspended or revoked in any hospital, health care setting, home health care agency, educational institution, or other professional setting?;
- (8) During the past 27 months, or not previously reported, have you been denied the privilege of taking an examination required for any professional licensure?; and
- (9) During the past 27 months, or not previously reported, have you committed any act(s) that would violate the laws and/or rules that govern the practice of respiratory care?; and
- (k) Whether the applicant consents to the disclosure to third parties of any or all of the applicant's personal contact information; and
- (l) Whether the applicant has an ownership interest in any diagnostic or therapeutic service(s) or company(ies), and if so the name and address of each company and the specific diagnostic or therapeutic services provided by the company, to comply with RSA 125:25-c.

Plc 1508.05 Documentation Required for Renewal Application. The applicant shall submit the following documentation with a renewal application:

- (a) Documentation of current NBRC credential(s);
- (b) If the applicant has provided updated information about professional licensing in other states that has been denied or for which other disciplinary action, including but not limited to suspension or revocation, has been taken or is pending, a written explanation detailing the circumstances surrounding each such action that includes the date of the action, reason(s) for action, and any other information the applicant believes is relevant; and
- (c) If the answer to any of the questions listed in Plc 1508.04(j) is "yes", an explanation of the situation to the extent not covered in (b), above.

Plc 1508.06 Information Relative to Continuing Competence.

- (a) An applicant for renewal of a respiratory care practitioner license shall provide the following information relative to continuing competence:
- (1) The total number of hours achieved by the applicant in continuing professional education courses or professional activities since the beginning of the current license term; and
- (2) The following information for each continuing professional education course and professional activity for which credit is claimed:
- a. The name of the course or activity;
 - b. The beginning and ending date(s) of the course or activity;
 - c. The name of the sponsor or provider of the course or activity;

- d. The number of clinical hours claimed for the course or activity;
- e. The number of non-clinical hours claimed for the course or activity; and
- f. The total number of hours claimed for the course or activity.

(b) Submission of the information shall constitute the applicant's certification that the applicant has met all continuing competence requirements.

Plc 1508.07 Signature and Certification Required for Renewal Application.

(a) The applicant shall sign and date the application, provided that when the application is available via an on-line portal, the submission of the application shall constitute the signature and the date of submission shall be the date.

(b) The applicant's signature shall constitute the applicant's certification that:

- (1) The applicant is in full compliance with RSA 326-E and all corresponding New Hampshire rules;
- (2) The applicant's credentials have not been suspended or revoked by any professional licensing board, or an explanation of each such occurrence has been attached;
- (3) The information and documentation provided are true, complete, and not misleading to the best of the applicant's knowledge and belief;
- (4) The applicant understands that providing false or misleading information constitutes grounds for denial, suspension, or revocation of a license; and
- (5) The applicant understands that knowingly providing false information constitutes a misdemeanor under RSA 641:3, I relative to falsification in official matters.

Plc 1508.08 Initial Review of Renewal Applications; Abandonment.

(a) Within 30 days of receipt of an application for license renewal submitted pursuant to Plc 1508.03, the licensing bureau shall review the application and:

- (1) Accept the application as being complete; or
- (2) Determine that the application is incomplete and notify the applicant in writing sent to the applicant's designated email address that the application is incomplete, specifying what the applicant needs to submit to complete the application.

(b) A notice of incompleteness sent pursuant to (a)(2), above, shall clearly inform the applicant that, as provided in RSA 310-A:1-h, if the application is not completed by the end of the month in which the license expires, then:

- (1) The applicant's NH license will expire and the applicant will not be able to work legally in New Hampshire unless and until the license is reinstated;
- (2) The application for reinstatement will require a new application fee; and
- (3) The application processing fee paid with the renewal application shall not be refunded.

Plc 1508.09 Withdrawal of Renewal Applications.

(a) An applicant may withdraw his or her application for license renewal at any time prior to being notified of a decision under Plc 1508.10.

(b) To withdraw an application, the applicant shall submit written notice to the licensing bureau that clearly states the applicant's intention to withdraw the application and clearly identifies the name in which the application was submitted, the profession for which the application was submitted, and the date the application was submitted.

(c) Upon receipt of a notice of withdrawal, the licensing bureau shall cease processing the application and mark the file to indicate the application was voluntarily withdrawn by the applicant.

(d) If the application is withdrawn, the application processing fee shall not be refunded.

Plc 1508.10 Review of Complete Applications for Renewal Licensure; Decisions.

(a) After determining that an application is complete, the licensing bureau shall review the application to determine whether the applicant meets all criteria specified in applicable law for the license renewal being applied for.

(b) The licensing bureau shall approve an application for renewal if the applicant:

(1) Has submitted a renewal application in accordance with Plc 1508.03 that shows that the applicant meets the requirements for renewal stated in Plc 1508.01; and

(2) Is in compliance with all provisions of RSA 326-E and Plc 1500.

(c) The licensing bureau shall notify the applicant of the decision on the renewal application in writing sent to the applicant's designated email address.

(d) If the licensing bureau determines that the applicant has not demonstrated that all requirements to renew a license are met, then:

(1) The licensing bureau shall conditionally deny the application; and

(2) The notice sent pursuant to (c), above, shall inform the applicant that the denial shall become final in 30 days unless the applicant requests a hearing in writing within 30 days.

(e) If the application is denied, the license renewal application processing fee shall not be refunded.

Plc 1508.11 Renewal Licenses: Issuance and Duration.

(a) Each renewal license to practice respiratory care issued by the OPLC shall specify:

(1) The name of the licensee;

(2) The effective dates of the license; and

(3) The license number.

(b) Renewal licenses shall be:

(1) Valid through the end of the licensee's birth month in the second year after issuance unless sooner suspended or revoked pursuant to Plc 1510; and

(2) Subject to renewal biennially.

Plc 1508.12 Reinstatement of a License After Expiration.

(a) If a complete application for renewal is not received prior to the expiration date of the license, the license shall be expired pursuant to RSA 310-A:1-h, IV.

(b) An individual whose license has expired in accordance with (a), above, shall not practice in New Hampshire unless and until he or she has obtained a license in accordance with RSA 326-E and Plc 1500.

(c) An individual whose license has expired in accordance with (a), above, who wishes to obtain a license in New Hampshire shall apply for a renewal license in accordance with Plc 1508, including demonstrating that the applicant has met the requirements for continuing competence specified in Plc 1507.

Plc 1508.13 Reinstatement of a License Previously Revoked.

(a) An individual whose license was revoked pursuant to Plc 1510, or whose license was revoked by the New Hampshire respiratory care practitioners governing board prior to July 19, 2022, who wishes to have his or her license reinstated shall:

- (1) Submit an application for renewal licensure in accordance with Plc 1508.03, including demonstrating that the applicant has met the requirements for continuing competence; and
- (2) Demonstrate that all conditions imposed in the revocation order have been met.

(b) If the executive director makes a preliminary determination that the applicant does not qualify for a license or does not qualify for an unrestricted license, the executive director shall initiate an adjudicative proceeding pursuant to Plc 200 to determine whether to deny the application or to reinstate the license with conditions.

(c) A license shall not be granted to an individual who previously held a license whose license was revoked unless and until the individual has:

- (1) Complied with any requirements that are part of the revocation order;
- (2) Paid the costs associated with the revocation, if imposed pursuant to RSA 310-A:1-m, VI or other applicable law; and
- (3) Demonstrated that he or she meets all other requirements for a renewal license.

PART Plc 1509 ETHICAL AND PROFESSIONAL STANDARDS

Plc 1509.01 Applicability of Standards.

(a) The standards in this part shall apply to each individual who applies to be licensed under RSA 326-E or who is licensed under RSA 326-E.

(b) Violations of these standards shall constitute unprofessional conduct that subjects the violator to disciplinary proceedings pursuant to Plc 1510.

Plc 1509.02 AARC Statement of Ethics and Professional Conduct. Respiratory care practitioners licensed to practice in New Hampshire shall adhere to the AARC Statement of Ethics and Professional Conduct revised 04/15, reprinted in Appendix B.

Plc 1509.03 Additional Licensee Obligations. Each person to whom these standards apply shall:

- (a) Comply with RSA 326-E and Plc 1500;

(b) Obey in good faith, and within any time periods specified, any disciplinary or remedial orders issued by the executive director;

(c) Interact with colleagues and patients with honesty and integrity;

(d) Not misrepresent professional qualifications or credentials;

(e) Cooperate with inspections and with lawful investigations by the OPLC;

(f) Treat all individuals with whom the person interacts in his or her professional capacity with respect and civility;

(g) Maintain sexual boundaries by:

(1) Refraining from any behavior that exploits the practitioner-patient relationship in a sexual way; and

(2) Avoiding any behavior that is sexual or sexually demeaning, or that could be reasonably interpreted as such, even when initiated by or consented to by the patient or a colleague;

(h) Not engage in hazing or sexual, verbal, or physical harassment of any individual when interacting in a professional capacity; and

(i) Not discriminate based on age, sex, gender identity, race, creed, color, marital status, familial status, physical or mental disability, or national origin.

PART Plc 1510 PROCEDURES; DISCIPLINARY PROCEEDINGS

Plc 151001 Rules of Practice and Procedure. The rules in Plc 200 shall govern:

(a) The receipt of misconduct complaints and the investigation thereof;

(b) The conduct of disciplinary proceedings, including emergency proceedings;

(c) Waivers of rules;

(d) Voluntary surrender of licenses; and

(e) Any other procedures not included in this chapter.

Plc 1510.02 Procedures for License Suspension or Revocation.

(a) If the executive director, after investigation conducted pursuant to Plc 200, determines that credible evidence exists that a licensee has violated a requirement of RSA 326-E or Plc 1500, the executive director shall initiate a disciplinary proceeding pursuant to Plc 200.

(b) After notice and an opportunity for a hearing, the executive director shall:

(1) Require the licensee to participate in a program of continuing education in the area or areas in which the licensee was found to be deficient if, for each violation, the violation was committed unknowingly, the licensee has no prior history of violations, and no harm was threatened or caused by the violation;

(2) Issue a reprimand and require the licensee to submit a plan of correction if, for each violation, the violation was committed negligently, the licensee has no prior history of violations, and no harm was threatened or caused by the violation;

(3) Suspend the license, if any violation was committed negligently, no serious harm was threatened or caused by the violation, and the licensee has been found to have committed one or more additional violations within the preceding 2 years; or

(4) Revoke the license, if:

- a. Any violation was committed recklessly or knowingly;
- b. Serious harm was caused by any violation; or
- c. The licensee fails to comply with the conditions for the removal of a suspension within the time period specified in the suspension order.

Plc 1510.03 Conditions of License Suspension or Revocation.

(a) If a license is suspended, the licensee shall prepare and submit a plan of correction to address each violation that provided a basis for the disciplinary proceeding.

(b) The executive director shall review the submitted plan of correction and:

(1) Approve the plan, if it:

- a. Addresses each violation that provided a basis for the disciplinary proceeding; and
- b. Identifies one or more specific actions that the licensee will take and specifies a deadline for taking the action(s); or

(2) Return the plan to the licensee for revision and resubmission if the plan does not meet the requirements for approval specified in (1), above.

(c) A licensee whose license was suspended may request the license to be reactivated after the conditions specified in the suspension order have been met by submitting a written request to the executive director that demonstrates compliance with the plan of correction as approved by the executive director.

(d) Upon reactivation of a suspended license, the licensee shall not be required to pay an additional fee, and the expiration date of the license shall remain the same.

(e) If a license is revoked, any subsequent application for licensure shall include a plan of correction that addresses each violation that provided a basis for the disciplinary proceeding.

(f) An individual whose license has been revoked and who wishes to reapply for a license shall apply as for license reinstatement in accordance with Plc 1508.13.

(g) A license shall not be granted to an individual who previously held a license but whose license was revoked unless and until the individual has complied with the requirements on which the revocation was based and has paid the costs associated with the revocation, if imposed pursuant to RSA 310-A:1-m, VI or other applicable law.

PART Plc 1511 MANAGEMENT OF RESPIRATORY CARE EQUIPMENT

Plc 1511.01 Assignment of Routine Tasks; No Delegation of Authority.

(a) Activities that a licensed respiratory care practitioner may delegate to individuals employed as respiratory assistants, respiratory aides, or equipment technicians shall be limited to the following routine tasks relating to the assembly, cleaning, and maintenance of equipment:

(1) Assembling equipment, subject to (b), below;

- (2) Disassembling equipment;
- (3) Cleaning equipment;
- (4) Preparing equipment for sterilization; and
- (5) Maintaining oxygen cylinders and other specialty gas cylinders.

(b) A New Hampshire licensed respiratory care practitioner may authorize or allow equipment to be assembled and tested, or repaired and tested, by a respiratory assistant, respiratory aide, or equipment technician, but the licensee shall inspect and approve the equipment prior to its use by a patient or client.

(c) Individuals engaging in the activities set forth in (a), above, may use titles such as “respiratory aide” and “equipment technician.”

(d) A licensee shall not authorize or allow an unlicensed person to engage in respiratory care as defined in RSA 326-E:1, X, reprinted in Appendix C, except for those tasks stated in (a)(1) through (a)(5), above.

Plc 1511.02 Delivery of Respiratory Care Equipment. Respiratory care equipment may be delivered to a recipient by an individual who is not a licensed respiratory care practitioner so long as the unlicensed individual delivering the equipment leaves the equipment at the point of delivery and does not set up the equipment or provide calibration or instruction.

PART Plc 1512 POLYSOMNOGRAPHIC TECHNOLOGISTS

Plc 1512.01 Practice Locations. Pursuant to RSA 326-E:6, I(e) a registered polysomnographic technologist shall engage in the limited scope of practice described in Plc 1511.02 only in a diagnostic laboratory or research setting.

Plc 1512.02 Registered Polysomnographic Technologist Limited Scope of Practice.

(a) Registered polysomnographic technologists shall monitor and record physiologic data during the evaluation of sleep-related disorders only in a diagnostic laboratory or research setting for the tasks described in paragraph (b), below.

(b) Registered polysomnographic technologists shall monitor and record physiologic data using the following tasks under the direct or indirect supervision of a New Hampshire licensed physician:

- (1) Supplemental oxygen therapy, less than 10 liters per minute utilizing nasal cannula, positive airway pressure (PAP), or bi-level positive airway pressure (BiPAP) during a polysomnogram;
- (2) Capnography or other measures of carbon dioxide during a polysomnogram;
- (3) Cardiopulmonary resuscitation;
- (4) Pulse oximetry;
- (5) Gastroesophageal pH monitoring;
- (6) Esophageal pressure monitoring;
- (7) Sleep staging, including surface electroencephalography, surface electrooculography, and surface submental electromyography;
- (8) Surface electromyography;

- (9) Electrocardiography;
- (10) Respiratory effort monitoring, including thoracic and abdominal movement;
- (11) Plethysmography blood flow;
- (12) Snore monitoring;
- (13) Audio or video monitoring of movement and behavior during sleep;
- (15) Nasal and oral airflow monitoring;
- (15) Body temperature monitoring;
- (16) Monitoring the effects that a mask or oral appliance used to treat sleep disorders has on sleep patterns, provided that the mask or oral appliance does not extend into the trachea or attach to an artificial airway;
- (17) Observing and monitoring physical signs and symptoms, general behavior, and general physical response to polysomnographic evaluation and determining whether initiation, modification, or discontinuation of a treatment regimen is warranted;
- (18) Analyzing and scoring data collected during the monitoring described in (17), above, for the purpose of assisting a licensed physician in the diagnosis and treatment of sleep and wake disorders that result from developmental defects, the aging process, physical injury, disease, or actual or anticipated somatic dysfunction;
- (19) Implementing a written or verbal order from a licensed physician in a sleep lab or sleep center which requires the practice of polysomnography; and
- (20) Educating and training a patient regarding the treatment regimen to assist the patient in improving the patient's sleep.

APPENDIX A: STATE STATUTES IMPLEMENTED

Rule	State Statute(s) Implemented
Plc 1500 (see below for additional/specific provisions)	RSA 326-E
Plc 1503	RSA 326-E:5
Plc 1504	RSA 326-E:3
Plc 1505	RSA 326-E:3, IV
Plc 1506	RSA 310-A:1-f
Plc 1507	RSA 326-E:10; RSA 326-E:11
Plc 1508	RSA 326-E:10
Plc 1509	RSA 326-E:2, VI
Plc 1510	RSA 326-E:2, VI

Plc 1511	RSA 326-E:9
Plc 1512	RSA 326-E:2, I

**APPENDIX B: AARC STATEMENT OF ETHICS AND PROFESSIONAL CONDUCT
REVISED 04/15**

In the conduct of professional activities the Respiratory Therapist shall be bound by the following ethical and professional principles. Respiratory Therapists shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- Promote and practice evidence-based medicine.
- Seek continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.
- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family, or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.
- Promote health care delivery through improvement of the access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the American Association of Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

APPENDIX C: STATUTORY DEFINITIONS AND OTHER PROVISIONS

326-E:1 Definitions

II. "Certified pulmonary function technician" or "CPFT" means a person having successfully completed and achieved a passing score on the entry level examination in pulmonary function and maintained the related credential issued by the National Board for Respiratory Care, Inc.

III. "Consultation by telecommunication" means that a respiratory care practitioner renders professional or expert opinion or advice via telecommunications or computer technology from another location. It

includes the transfer of data or exchange of educational or related information by any means of audio, video, or data communications.

IV. "National Board for Respiratory Care, Inc." or "NBRC" means the national voluntary health certifying board that evaluates the professional competence of respiratory therapists and pulmonary function technicians, or its successor organization.

VIII. "Registered polysomnographic technologist" or "RPSGT" means a person having successfully completed and achieved a passing score on the comprehensive registry examination for polysomnographic technologists administered by the Board of Registered Polysomnographic Technologists or its successor organization.

IX. "Registered pulmonary function technologist" or "RPFT" means a person having successfully completed and achieved a passing score on the advanced level examination in pulmonary function and maintained the related credential issued by the National Board for Respiratory Care, Inc.

X. "Respiratory care" means the treatment, management, diagnostic testing and evaluation of responses to respiratory or medical treatment and care of individuals or groups of individuals either having deficiencies or abnormalities of the cardiopulmonary system or requiring support of the cardiopulmonary system. Respiratory care is given in accordance with the prescription of a physician, nurse practitioner, or physician assistant. Respiratory care includes the implementation of respiratory care strategies and modalities, and the administration of pharmacological, diagnostic, and therapeutic agents necessary to implement a treatment, disease or injury prevention, rehabilitative or diagnostic regimen. Respiratory care includes, but is not limited to: initiating emergency procedures; providing health counseling and teaching; assembly, repair, testing and maintenance of respiratory equipment; and those respiratory care activities that require a substantial amount of scientific knowledge or technical skill.

XI. "Respiratory care educational program" means a program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation in collaboration with the Joint Review Committee for Respiratory Therapy Education, by the Committee on Accreditation for Respiratory Care, or by the Commission on Accreditation of Allied Health Education Programs, or their successor organizations.

XII. "Respiratory care practitioner" means a person who is:

- (a) Licensed in the practice or performance of respiratory care who has the knowledge and skill necessary to administer the functions defined in paragraph X of this section.
- (b) Capable of serving as a resource in relation to the clinical and technical aspects of respiratory care as to the safe and effective methods for administering respiratory care modalities.
- (c) Able to function in situations of unsupervised patient contact requiring individual judgment.
- (d) Capable of supervising, directing, and teaching less skilled personnel in the provision of respiratory care services.

Source. 2003, 310:2. 2005, 293:9. 2009, 54:5, eff. July 21, 2009. 2022, 72:15, eff. July 19, 2022.

RSA 326-E:6 Exemptions From Licensure. –

I. This chapter shall not prohibit:

- (a) A person matriculated in an education program approved by the board who is pursuing a degree in respiratory care or respiratory therapy from satisfying supervised clinical education requirements related to the person's respiratory care education while under direct supervision of a respiratory care practitioner or physician.
- (b) A respiratory care practitioner from practicing in the Armed Forces, federal public health services, or the Department of Veterans Affairs, pursuant to federal regulations of health care providers.
- (c) A respiratory care practitioner who is licensed in another jurisdiction of the United States from providing consultation by telecommunication.

(d) A respiratory care practitioner who is licensed in another jurisdiction of the United States or foreign educated respiratory care practitioner credentialed in another country from practicing respiratory care in conjunction with teaching or participating in an educational seminar of no more than 60 days in a calendar year.

(e) Respiratory care performed as part of a limited scope of practice, as defined by the executive director, in consultation with the advisory board, by certified pulmonary function technicians (CPFT), registered pulmonary function technologists (RPFT) or registered polysomnographic technologists (RPSGT) in a diagnostic laboratory or research setting.

(f) Respiratory care rendered in an emergency.

(g) Self care by a patient or gratuitous care by family members or friends who do not represent themselves as respiratory care practitioners.

(h) A respiratory care practitioner who is licensed in another jurisdiction of the United States or foreign educated respiratory care practitioner credentialed in another country from practicing respiratory care in conjunction with the interfacility transport of a critically ill patient.

(i) A polysomnography trainee from fulfilling the training and experiential clinical requirements established by the Board of Polysomnographic Technologists for eligibility for the RPSGT examination, while working under the indirect supervision of a physician, a respiratory care practitioner, or a RPSGT.

II. This chapter shall not restrict a person licensed under any other law of this state from engaging in the profession or practice for which that person is licensed if that person does not represent, imply, or claim that he or she is a respiratory care practitioner or a provider of respiratory care.

Source. 2003, 310:2, eff. July 1, 2003. 2022, 72:16, eff. July 19, 2022.