



**TELECONFERENCE/VIRTUAL
PERFUSIONISTS EXAMINING COUNCIL
Room N208, 4822 Madison Yards Way, 2nd Floor, Madison, WI 53705
Contact: Tom Ryan (608) 266-2112
January 15, 2019**

The following agenda describes the issues that the Council plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Council.

AGENDA

1:00 P.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A) Adoption of Agenda (1-2)**
- B) Approval of Minutes of January 16, 2018 (3-5)**
- C) Administrative Updates (6-7)**
 - 1) Election of Officers
 - 2) Appointment of Liaisons and Alternates
 - 3) Delegated Authorities
 - 4) Department Updates
 - 5) Board Members – Term Expiration Dates
 - a) David Cobb – 07/01/2013
 - b) Jeffery Edwards – 07/01/2014
 - c) Shawn Mergen – 07/01/2014
 - d) Gary Tsarovsky – 07/01/2016
- D) Council Liaison Training and Appointment of Mentors**
- E) Legislative and Administrative Rule Matters – Discussion and Consideration (8-27)**
 - 1) Review of Final Draft Rules for MED 22, Relating to Perfusionists
 - 2) Update on Other Legislation and Pending or Possible Rulemaking Projects
- F) Items Added After Preparation of Agenda:**
 - 1) Introductions, Announcements and Recognition
 - 2) Administrative Updates
 - 3) Education and Examination Matters
 - 4) Credentialing Matters
 - 5) Practice Matters
 - 6) Legislation and Administrative Rule Matters
 - 7) Liaison Report(s)
 - 8) Informational Item(s)
 - 9) Appearances from Requests Received or Renewed

10) Speaking Engagement(s), Travel, or Public Relation Request(s), and Reports

G) Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§§ 19.85 (1) (b), Stats. and 448.02(8), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).

H) Deliberation of Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Appearances from Requests Received or Renewed

I) Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

J) Open Session Items Noticed Above Not Completed in the Initial Open Session

K) Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

L) Delegation of Ratification of Examination Results and Ratification of Licenses and Certificates

ADJOURNMENT

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the Council’s agenda, please call the listed contact person. The Council may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

**PERFUSIONISTS EXAMINING COUNCIL
JANUARY 16, 2018**

PRESENT: (all present via GoToMeeting) David Cobb, Jeffery Edwards, Shawn Mergen, Gary Tsarovsky

STAFF: Tom Ryan, Executive Director; Emily Handel, Bureau Assistant

CALL TO ORDER

Shawn Mergen, Chair, called the meeting to order at 1:00 p.m. A quorum of four (4) members was confirmed.

ADOPTION OF AGENDA

MOTION: Shawn Mergen moved, seconded by Gary Tsarovsky, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards, to approve the minutes of January 11, 2017 as published. Motion carried unanimously.

ADMINISTRATIVE MATTERS

Election of Officers

COUNCIL CHAIR

NOMINATION: Jeffery Edwards nominated Shawn Mergen for the Office of Council Chair.

Tom Ryan called for nominations three (3) times.

Shawn Mergen was elected as Chair by unanimous consent.

VICE CHAIR

NOMINATION: Gary Tsarovsky nominated Jeffery Edwards for the Office of Vice Chair.

Tom Ryan called for nominations three (3) times.

Jeffery Edwards was elected as Vice Chair by unanimous consent.

SECRETARY

NOMINATION: Shawn Mergen nominated Gary Tsarovsky for the Office of Secretary.

Tom Ryan called for nominations three (3) times.

Gary Tsarovsky was elected as Secretary by unanimous consent.

2018 ELECTION RESULTS	
Council Chair	Shawn Mergen
Vice Chair	Jeffery Edwards
Secretary	Gary Tsarovsky

Appointment of Liaisons and Alternates

2018 LIAISON APPOINTMENTS	
Credentialing Liaison	Gary Tsarovsky Alternate – Jeffery Edwards
Education & Exams Liaison	Shawn Mergen

MOTION: Jeffery Edwards moved, seconded by Gary Tsarovsky, to affirm the Chair’s appointment of liaisons for 2018. Motion carried unanimously.

Delegated Authorities

Document Signature Delegation

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards, to delegate authority to the Chair or chief presiding officer, or longest serving member of the Council, by order of succession, to sign documents on behalf of the Council. In order to carry out duties of the Council, the Chair, chief presiding officer, or longest serving member of the Council, has the ability to delegate this signature authority for purposes of facilitating the completion of assignments during or between meetings. The Chair, chief presiding officer, or longest serving member of the Council delegates the authority to Executive Director, or designee, to sign the name of any Council member on documents as necessary and appropriate. Motion carried unanimously.

Delegated Authority for Urgent Matters

MOTION: Shawn Mergen moved, seconded by Gary Tsarovsky, that in order to facilitate the completion of urgent matters between meetings, the Council delegates its authority to the Chair or chief presiding officer, or longest serving member of the Council, by order of succession, to appoint liaisons to the Department to act in urgent matters. Motion carried unanimously.

Continuing Education Delegation or Education Delegations

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards, to delegate authority to the Office of Education and Examination Liaison(s) to address all issues related to CE, education and examinations. Motion carried unanimously.

Authorization for DSPS to Provide Council Member Contact Information to National Regulatory Bodies

MOTION: Shawn Mergen moved, seconded by Gary Tsarovsky, to authorize Department staff to provide national regulatory bodies with all Council member contact information that the Department retains on file. Motion carried unanimously.

Optional Renewal Notice Insert Delegation

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards to designate the highest-ranking or chief presiding officer, or longest serving member of the Council, by order of succession, to provide a brief statement or link relating to Council-related business within the license renewal notice at the Council’s or Council designee’s request. Motion carried unanimously.

Legislative Liaison Delegation

MOTION: Shawn Mergen moved, seconded by David Cobb, to delegate authority to the Legislative Liaisons to speak on behalf of the Council regarding legislative matters. Motion carried unanimously.

Travel Delegation

MOTION: Shawn Mergen moved, seconded by Gary Tsarovsky, to delegate authority to the Travel Liaison to approve any Council Member travel. Motion carried unanimously.

Occupational Licensure Study Liaison

MOTION: Shawn Mergen moved, seconded by David Cobb, to designate Shawn Mergen as the Council's liaison to represent and speak on behalf of the Council regarding occupational license review and related matters. Motion carried unanimously.

LEGISLATIVE AND ADMINISTRATIVE RULE MATTERS

Perfusionists Examining Council Position Statements

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards, to remove the existing Position Statements and Frequently Asked Questions on the Perfusionists Examining Council's webpage. Motion carried unanimously.

ADJOURNMENT

MOTION: Shawn Mergen moved, seconded by Gary Tsarovsky, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 1:22 p.m.

**PERFUSIONISTS EXAMINING COUNCIL
2018 ELECTION AND APPOINTMENT RESULTS**

2018 ELECTION RESULTS	
Council Chair	Shawn Mergen
Vice Chair	Jeffery Edwards
Secretary	Gary Tsarovsky

Appointment of Liaisons and Alternates

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Education & Exams Liaison	Shawn Mergen

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Continuing Education Delegation or Education Delegations

MOTION: Shawn Mergen moved, seconded by Jeffery Edwards, to delegate authority to the Office of Education and Examination Liaison(s) to address all issues related to CE, education and examinations. Motion carried unanimously.

PERFUSIONISTS EXAMINING COUNCIL 2018 ELECTION AND APPOINTMENT RESULTS

Authorization for DSPS to Provide Council Member Contact Information to National Regulatory Bodies

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dale Kleven Administrative Rules Coordinator		2) Date When Request Submitted: 1/3/19 Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Section Perfusionists Examining Council			
4) Meeting Date: 1/15/19	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislative and Administrative Rule Matters – Discussion and Consideration 1. Review of Final Draft Rules for Med 22, Relating to Perfusionists 2. Update on Other Legislation and Pending or Possible Rulemaking Projects	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:
10) Describe the issue and action that should be addressed: 1. At its December 19, 2018 meeting, the Medical Examining Board (MEB) reviewed final draft rules for ch. Med 22, relating to perfusionists. The Council will review the final draft rules and, if applicable, make recommendations to the MEB prior to final approval.			
11) Authorization			
<i>Dale Kleven</i>		<i>January 3, 2019</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
MEDICAL EXAMINING BOARD

IN THE MATTER OF RULEMAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : MEDICAL EXAMINING BOARD
MEDICAL EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE 18-074)

PROPOSED ORDER

An order of the Medical Examining Board to **repeal** Med 22.03 (3) (intro.), (a), and (b) 3., 22.04 (1) and (2), 22.05 (1) (d) and (f), and 22.08 (Note); to **renumber** Med 22.03 (3) (b) 1.; to **renumber and amend** Med 22.03 (3) (b) 2. and 22.07 (6); to **amend** Med 22.01, 22.02 (intro.), (3), and (4), 22.03 (intro.), (1), and (Note), 22.04 (3), (4), (5), (6), (9), and (10), 22.05 (1) (intro.), (a), (b), (c), and (e), (2), and (3) (a), 22.06 (1), (2) (intro.), (a), (d), and (e), (3), and (5), 22.07 (1) to (5), (7), and (8), 22.08 (2), 22.09 (4), and 22.10 (2), (3), (4) (a) to (c), and (5); and to **create** Med 22.04 (5) (k), 22.05 (1m), 22.07 (5m) and (6) (a) to (d), and 22.10 (1) (title) and (am) and (4) (title), relating to perfusionists.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Section 440.03 (4m), Stats.

Statutory authority:

Sections 15.08 (5) (b) and 448.40 (2) (c), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides an examining board “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . .”

Section 448.40 (2) (c), Stats., requires the Medical Examining Board to promulgate rules “[e]stablishing continuing education requirements for renewal of a license to practice perfusion under s. 448.13 (2).”

Related statute or rule:

None.

Plain language analysis:

A comprehensive review of ch. Med 22 was conducted to ensure the rules are consistent with current standards for drafting style and format and applicable Wisconsin statutes. As a result, the following updates have been made:

- Sections Med 20.03 and 22.04 are revised to remove requirements for applications submitted prior to January 1, 2004.

- Revisions to s. Med 22.04 (3), (4), and (6) are made to, as required under s. 448.05 (6) (a), Stats., specify the passing score for the Perfusion Basic Science Examination, the Clinical Applications in Perfusion Examination, the statutes and rules examination, and the oral examination.
- Section Med 22.04 (9) is revised to clarify the requirement to complete further professional training or education before retaking an exam after a third failure does not apply to the Perfusion Basic Science Examination or the Clinical Applications in Perfusion Examination.
- Section Med 22.07 (5m) is created to void the application of an applicant who uses a recording device when reviewing an examination, and requires the applicant to reapply for licensure. A provision is created under s. Med 22.04 (5) that will allow the Board to require an applicant who has violated s. Med 22.07 (5m) to complete an oral examination.
- Section Med 22.10 (5) is revised to comply with s. 440.03 (4m), Stats., as created by 2017 Wisconsin Act 59. Under this provision, the Board may require a credential holder to submit proof of completing continuing education programs or courses only if a complaint is made against the credential holder.
- Other provisions throughout ch. Med 22 have been updated to provide clarity and conform to current standards for drafting style and format.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois:

Rules of the Illinois Department of Financial and Professional Regulation address the practice of perfusion in Illinois (68 Ill. Adm. Code 1335.10 to 1335.100). Although underlying statutes authorize the Department to establish rules requiring 30 hours of continuing education per 2-year license renewal cycle (225 ILCS 125/75 – Perfusionist Practice Act), the rules currently do not have such a requirement.

Iowa:

Iowa rules and statutes do not specifically address the practice of perfusion.

Michigan:

Michigan rules and statutes do not specifically address the practice of perfusion.

Minnesota:

Minnesota rules and statutes do not specifically address the practice of perfusion.

Summary of factual data and analytical methodologies:

The proposed rules were developed by reviewing the provisions of ch. Med 22 for consistency with current standards for drafting style and format and applicable Wisconsin statutes and obtaining input and feedback from the Medical Examining Board.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at NathanielL.Ristow@wisconsin.gov, or by calling (608) 266-3445.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held at 8:00 a.m. on December 19, 2018, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Med 22.01 is amended to read:

Med 22.01 Authority and purpose. The rules in this chapter are adopted by the medical examining board under the authority of ss. 15.08 (5) (b)₂, ~~and 227.11 (2), Stats., and ss. 448.02, 448.04, 448.05, 448.13₂ and 448.40, Stats.~~

SECTION 2. Med 22.02 (intro.), (3), and (4) are amended to read:

Med 22.02 (intro.) Definitions. ~~As used in~~ In this chapter:

(3) “Perfusion” has the meaning ~~set forth~~ given in s. 448.015 (1m), Stats.

(4) “Perfusionist” has the meaning ~~set forth~~ given in s. 448.015 (1s), Stats.

SECTION 3. Med 22.03 (intro.) and (1) are amended to read:

Med 22.03 (intro.) Applications and credentials. Every applicant for initial licensure as a perfusionist shall submit all of the following:

(1) A completed application on a form provided by the board.

SECTION 4. Med 22.03 (3) (intro.) and (a) are repealed.

SECTION 5. Med 22.03 (3) (b) 1. is renumbered Med 22.03 (3).

SECTION 6. Med 22.03 (3) (b) 2. is renumbered Med 22.03 (4) and amended to read:

Med 22.03 (4) ~~Written verification that Evidence~~ the applicant has passed ~~both the perfusion basic science examination and the clinical application in perfusion examination of the American Board of Cardiovascular Perfusion~~ the examinations required under s. Med 22.04.

SECTION 7. Med 22.03 (3) (b) 3. is repealed.

SECTION 8. Med 22.03 (Note) is amended to read:

Med 22.03 (Note) Application forms are available ~~on request to the board office at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708~~ from the department of safety and professional services at (608) 266-2112 or from the department's website at www.dsps.wi.gov.

SECTION 9. Med 22.04 (1) and (2) are repealed.

SECTION 10. Med 22.04 (3), (4), and (5) are amended to read:

Med 22.04 (3) An applicant for licensure as a perfusionist ~~under s. Med 22.03 (3) (b)~~, shall pass both the ~~perfusion basic science examination~~ Perfusion Basic Science Examination and the ~~clinical application in perfusion examination~~ Clinical Applications in Perfusion Examination of the American Board of Cardiovascular Perfusion. The board adopts the passing scores of the examination provider.

(4) An applicant for licensure as a perfusionist ~~under s. Med 22.03 (3) (b)~~, shall pass a state board statutes and rules examination conducted by the council ~~as evidenced by documents submitted directly to the council by the department's office of examinations.~~ The passing score for the examination under this subsection is 85 percent.

(5) (intro.) ~~An applicant who meets the criteria under s. Med 22.03 (3) (b),~~ The council may be required require an applicant to complete an oral examination if the applicant any of the following circumstances apply:

(a) ~~Has~~ The applicant has a medical condition which impairs or limits the applicant's ability to practice perfusion with reasonable skill and safety.

(b) ~~Uses~~ The applicant uses chemical substances so as to impair the applicant's ability to practice perfusion with reasonable skill and safety.

(c) ~~Has~~ The applicant has been disciplined or had licensure denied by a licensing or regulatory authority in ~~Wisconsin~~ this state or another jurisdiction.

(d) ~~Has~~ The applicant has been convicted of a crime the circumstances of which substantially relate to the practice of perfusion.

(e) ~~Has not~~ The applicant has practiced perfusion for ~~more than~~ less during the 3-year period preceding the date of application.

(f) ~~Has~~ The applicant has practiced ~~over~~ perfusion for more than 1,200 hours ~~in~~ during the last 3 years 3-year period preceding the date of application, but practice was limited.

(g) ~~Has~~ The applicant has been found negligent in the practice of perfusion or has been a party in a lawsuit in which it was alleged that the applicant has been negligent in the practice of perfusion.

(h) ~~Has~~ The applicant has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.

(i) ~~Has~~ The applicant has, within the past 2 years, engaged in the illegal use of controlled substances.

(j) ~~Has~~ The applicant has been subject to adverse formal action during the course of perfusion education, postgraduate training, hospital practice, or other perfusion employment.

SECTION 11. Med 22.04 (5) (k) is created to read:

Med 22.04 (5) (k) The applicant has violated s. Med 22.07 (5m).

SECTION 12. Med 22.04 (6), (9), and (10) are amended to read:

Med 22.04 (6) The council shall conduct oral examinations ~~and interviews~~. At the request of the council, the board shall provide a medical consultant to ~~the council to provide assistance~~ assist in evaluating applicants examined under s. ~~Med 22.03 (3) sub. (5) (a) and or (b)~~. The passing score for an oral examination is 66 percent.

(9) An applicant who fails to receive a passing grade on an examination under sub. (4) or (5) may reapply by payment of the fee specified in s. 440.05, Stats. If an applicant fails ~~an~~ the examination under sub. (4) 3 times, the applicant may not retake ~~that~~ the examination unless the applicant submits proof of evidence of having completed further professional training or education as the board may prescribe. An applicant ~~for an oral examination~~ may reapply for an oral examination twice at not less than ~~4 month~~ 4-month intervals.

(10) ~~If after receipt of additional information from applicants who have been treated for alcohol or drug abuse or impairment or from applicants who have been treated for an acute or chronic psychological impairment the council decides that an oral interview or examination shall be administered, the~~ An oral examination concerning the circumstances described in sub. (5) (a) or (b) shall be limited to a determination whether, at the time of application, ~~the applicant's disability appears to pose an actual risk to the health, safety, or welfare of patient or public arising~~ arises from the applicant's demonstrated inability to safely carry out necessary duties and responsibilities inherent to the practice of perfusion.

SECTION 13. Med 22.05 (1) (intro.), (a), (b), and (c) are amended to read:

Med 22.05 (1) (intro.) An applicant for licensure ~~who meets the criteria under s. Med 22.03 (3) (b)~~ may apply to the board for a temporary license to practice perfusion prior to licensure if the applicant ~~does~~ submits all of the following:

(a) ~~Submits a~~ A completed application on a form provided by the board.

(b) ~~Remits the~~ The fee specified in s. 440.05, Stats.

(c) ~~Has~~ Evidence the applicant has successfully completed an educational program ~~as defined in~~ under s. Med 22.03 (3) ~~(b)1~~.

SECTION 14. Med 22.05 (1) (d) is repealed.

SECTION 15. Med 22.05 (1) (e) is amended to read:

Med 22.05 (1) (e) ~~Has~~ Evidence the applicant has passed the ~~state board statutes and rules~~ examination under s. Med 22.04 (4).

SECTION 16. Med 22.05 (1) (f) is repealed.

SECTION 17. Med 22.05 (1m) is created to read:

Med 22.05 (1m) The board may not issue a license under this section if any of the following applies:

(a) The applicant has failed either of the examinations under s. Med 22.04 (3) and has not subsequently passed the examination.

(b) The applicant is required to complete an oral examination.

SECTION 18. Med 22.05 (2) and (3) (a) are amended to read:

Med 22.05 (2) ~~Practice~~ Except as provided under sub. (3) (b), practice during the period of a temporary license shall be under the general supervision of a licensed perfusionist. A person holding a temporary license shall consult at least weekly with the supervising perfusionist who shall at least once a month endorse the activities of the person holding the temporary license.

(3) (a) A temporary license expires one year from the date of its issuance. Upon application, and upon submission of evidence of having passed the perfusion basic scientific examination, the temporary license may be renewed for an additional period of one year. The board may extend the term of the temporary license for an additional 6 months if the applicant was unable to complete the perfusion basic scientific examination within the ~~one-year~~ one-year period due to hardship, including ~~but not limited to~~ illness of the applicant, ~~the~~ illness or death of a family member of the applicant, or an accident or natural disaster. A written affidavit of the hardship ~~must~~ shall be provided.

SECTION 19. Med 22.06 (1), (2) (intro.), (a), (d), and (e), (3), and (5) are amended to read:

(1) An applicant who holds certification in clinical perfusion granted by the American Board of Cardiovascular Perfusion may apply to the board for a temporary locum tenens license.

(2) (intro.) An applicant for a locum tenens license shall submit ~~to the board~~ all of the following:

(a) A completed ~~and verified~~ application on a form supplied provided by the board.

(d) A verified statement by the applicant that the applicant is familiar with the ~~state~~ health laws of this state and ~~the~~ rules of the department of health services as related to communicable diseases.

(e) The fees required under s. 440.05, Stats., ~~made payable to the Wisconsin department of safety and professional services.~~

(3) All applicants shall ~~complete an open book~~ pass the examination ~~on statutes and rules governing the practice of perfusion in Wisconsin~~ under s. Med 22.04 (4).

(5) A locum tenens license expires 90 days from the date of its issuance. For cause shown to the satisfaction of the board, the board may renew the locum tenens license for additional periods of 90 days each, but ~~no~~ a license may not be renewed more than 3 consecutive times.

SECTION 20. Med 22.07 (1) to (5) are amended to read:

Med 22.07 (1) An applicant who fails the oral or statutes and rules examination may make a request to review that examination by filing a written request and required fee with the board within 30 days of the date on which examination results were ~~mailed~~ received by the applicant.

(2) Examination reviews ~~are~~ shall be by appointment only.

(3) An applicant may not review the statutes and rules examination for ~~not~~ more than one hour.

(4) An applicant may not review the oral examination for ~~not~~ more than 2 hours.

(5) An applicant shall review an examination in the presence of a board-assigned proctor. The applicant No other person may not be accompanied accompany an applicant during the a review by any person other than the proctor.

SECTION 21. Med 22.07 (5m) is created to read:

Med 22.07 (5m) (a) An applicant may not use any device capable of recording audio, photographic, or video content, or capable of viewing or playing back such content, during a review. A violation of this subsection shall void the applicant's application and require the applicant to reapply for licensure.

(b) A violation of this subsection constitutes knowingly engaging in fraud, misrepresentation, or dishonesty in applying for or procuring a license.

SECTION 22. Med 22.07 (6) is renumbered Med 22.07 (6) (intro.) and amended to read:

Med 22.07 (6) (intro.) At the beginning of ~~the a~~ review, the ~~applicant~~ proctor shall ~~be provided~~ provide the applicant with a copy of the questions, a copy of the applicant's answer sheet or oral examination audiotape and a copy of the master answer sheet. all of the following:

SECTION 23. Med 22.07 (6) (a) to (d) are created to read:

Med 22.07 (6) (a) A copy of the examination questions.

(b) A copy of or, if the applicant is reviewing an oral examination, audio recording of the applicant's answers to the examination questions.

(c) If an applicant is reviewing the statutes and rules examination, a copy of the master answer sheet.

(d) A form on which the applicant may write comments, questions, or claims of error regarding the examination.

SECTION 24. Med 22.07 (7) and (8) are amended to read:

Med 22.07 (7) ~~The applicant may review the examination in the presence of a proctor. The applicant shall be provided with a form on which to write comments, questions, or claims of error regarding any item in the examination. The An applicant may consult bound reference books materials during the a review. Applicants shall not remove any notes from the area. Notes~~ The form under sub. (6) (d) and any other notes taken by an applicant during a review shall be retained by the proctor and, if requested by the applicant, made available to the applicant for use at a hearing, if requested. The A proctor shall may not defend the examination or attempt to refute claims of error during the a review.

(8) An applicant may not review ~~the an~~ examination more than once.

SECTION 25. Med 22.08 (2) is amended to read:

Med 22.08 (2) The board shall review the claim, make a determination of the validity of the objections, and notify the applicant in writing of the board's decision and any resulting ~~grade~~ changes to the applicant's exam score.

SECTION 26. Med 22.08 (Note) is repealed.

SECTION 27. Med 22.09 (4) is amended to read:

Med 22.09 (4) The performance and use of anticoagulation monitoring and analysis, physiologic monitoring and analysis, blood gas and chemistry monitoring and analysis, hematologic monitoring and analysis, induction and hypothermia and ~~hyperthermia~~ hyperthermia with reversal, hemoconcentration and hemodilution, and ~~hymodialysis~~ hemodialysis.

SECTION 28. Med 22.10 (1) (title) and (am) are created to read:

Med 22.10 (1) (title) DEFINITIONS.

(am) "AC-PE" means the Accreditation Committee-Perfusion Education.

SECTION 29. Med 22.10 (2), (3), (4) (a) to (c), and (5) are amended to read:

Med 22.10 (2) CERTIFICATION STATEMENT. Each licensee shall, at the time of applying for renewal of a license under s. 448.07, Stats., certify that ~~he or she has~~, in the 2 years preceding the renewal due date, ~~completed~~ at least 30 continuing education units of acceptable continuing education were completed. At least 10 continuing education units ~~must~~ shall be completed in Category I activities.

(3) LIMITATION ON CLAIMING CONTINUING EDUCATION UNITS. ~~No additional~~ Additional continuing education units ~~are~~ may not be given for subsequent presentations of the same content.

SECTION 30. Med 22.10 (4) (title) is created to read:

Med 22.10 (4) (title) CATEGORIES OF CONTINUING EDUCATION.

SECTION 31. Med 22.10 (4) (a) to (c) and (5) are amended to read:

Med 22.10 (4) (a) ~~Category I~~ Category I. ABCP-approved perfusion meetings and related activity, including all of the following:

1. Attendance at ABCP-approved international, national, regional, or state perfusion meetings, programs, and seminars ~~in~~ at which a minimum of 75% of the contact hours consist of perfusion related material, ~~including international, national, regional or state perfusion meetings;~~ 1 One continuing education unit may be claimed for each contact hour.

2. Publication of a perfusion related book chapter or paper in a professional journal; 5 Five continuing education units may be claimed for each published book chapter or paper, subject to a maximum limit of 10 continuing education units in any given renewal period.

3. ~~Presentation of~~ Presenting a talk workshop or lecture at an international, national, regional, or state perfusion meeting; 5 Five continuing education units may be claimed for each presentation, subject to a maximum limit of 10 continuing education units in any given renewal period.

4. Presentation of a poster or other exhibit at an international, national, regional, or state perfusion meeting; 2 Two continuing education units may be claimed for each presentation, subject to a maximum limit of 4 continuing education units in any given renewal period.

5. Participation in an AC-PE site visitor workshop or volunteering as an AC-PE site visitor; 5 Five continuing education units may be claimed for each workshop or site visit, subject to a maximum limit of 10 continuing education units in any given renewal period.

6. Participation in an ABCP knowledge base survey; 2 Two continuing education units may be claimed for each survey.

7. Self-directed continuing education meeting ABCP requirements; 1 One continuing education unit may be claimed for each contact hour.

(b) ~~Category II~~ Category II. Non-accredited perfusion meetings and other medical meetings, including all of the following:

1. ~~Perfusion~~ Attendance at international, national, regional, or state perfusion or medical meetings, programs, and seminars ~~in~~ not approved by ABCP, at which a minimum of 75% of the contact hours consist of perfusion related material, ~~including international, national, state or regional perfusion meetings;~~ One-half of a continuing education unit may be claimed for each contact hour, subject to a maximum limit of 10 continuing education units in any given renewal period.

2. Manufacturer-specific and company-sponsored educational activities; 1 One continuing education unit may be claimed for each contact hour.

(c) ~~Category III~~ Category III. Individual education and other self-study activities, including all of the following:

1. Serving as a clinical instructor in an accredited perfusion training program; 2 Two continuing education units per may be claimed for this service in each year of a renewal period.

2. Serving as a didactic instructor in an accredited perfusion training program; ~~1~~ One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a ~~maximum~~ limit of 4 continuing education units in any given renewal period.

3. Participation in an ABCP examination development workshop or survey; ~~2~~ Two continuing education units ~~per~~ may be claimed for each contact hour, subject to a ~~maximum~~ limit of 4 continuing education units in any given renewal period.

4. Self-learning activities and self-study modules, including use of audiovisual devices or electronic forums, reading scientific journals, and participation in degree-oriented, professionally related course work; and self-study modules; ~~1~~ One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a ~~maximum~~ limit of 10 continuing education units in any given renewal period.

5. Presentation at a ~~non-approved~~ an international, national, regional, or state perfusion or medical meeting; that is not approved by ABCP. ~~1~~ One continuing education unit may be claimed for each hour of presentation.

6. ~~Grand~~ Participation in a grand round; ~~1~~ One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a ~~maximum~~ limit of 2 continuing education units in any given renewal period.

7. Completion of Advanced cardiac life support Cardiac Life Support training; ~~2~~ Two continuing education units may be claimed for completion of this training.

(5) AUDIT. An applicant for renewal shall certify ~~his or her attendance at~~ completion of required continuing education. The board ~~may conduct a random audit of~~ all licensees on a biennial basis for compliance with continuing education requirements; ~~and~~ shall audit for compliance with the continuing education requirements any licensee who is under investigation by the board for alleged misconduct.

SECTION 32. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

This Proposed Order of the Medical Examining Board is approved for submission to the Governor and Legislature.

Dated _____

Agency _____

Chairperson
Medical Examining Board

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date October 17, 2018
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Med 22	
4. Subject Perfusionists	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected 20.165(1)(hg)
7. Fiscal Effect of Implementing the Rule <input type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input checked="" type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input checked="" type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses (if checked, complete Attachment A)	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule A comprehensive review of ch. Med 22 was conducted to ensure the rules are consistent with current standards for drafting style and format and applicable Wisconsin statutes. As a result, the following updates have been made: <ul style="list-style-type: none">• Sections Med 20.03 and 22.04 are revised to remove requirements for applications submitted prior to January 1, 2004.• Revisions to s. Med 22.04 (3), (4), and (6) are made to, as required under s. 448.05 (6) (a), Stats., specify the passing score for the Perfusion Basic Science Examination, the Clinical Applications in Perfusion Examination, the statutes and rules examination, and the oral examination.• Section Med 22.04 (9) is revised to clarify the requirement to complete further professional training or education before retaking an exam after a third failure does not apply to the Perfusion Basic Science Examination or the Clinical Applications in Perfusion Examination.• Section Med 22.07 (5m) is created to void the application of an applicant who uses a recording device when reviewing an examination, and requires the applicant to reapply for licensure. A provision is created under s. Med 22.04 (5) that will allow the Board to require an applicant who has violated s. Med 22.07 (5m) to complete an oral examination.• Section Med 22.10 (5) is revised to comply with s. 440.03 (4m), Stats., as created by 2017 Wisconsin Act 59. Under this provision, the Board may require a credential holder to submit proof of completing continuing education programs or courses only if a complaint is made against the credential holder.• Other provisions throughout ch. Med 22 have been updated to provide clarity and conform to current standards for drafting style and format.	
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.	

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

13. Identify the Local Governmental Units that Participated in the Development of this EIA.

No local governmental units participated in the development of this EIA.

14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

The proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole. The Department estimates one-time administrative costs of \$1,518.17, which may be absorbed in the agency budget.

15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is reflecting current standards for drafting style and format and applicable Wisconsin statutes. If the rule is not implemented, it will continue to contain outdated references.

16. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is updated references and conformity with the Wisconsin Statutes.

17. Compare With Approaches Being Used by Federal Government

None

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois:

Rules of the Illinois Department of Financial and Professional Regulation address the practice of perfusion in Illinois (68 Ill. Adm. Code 1335.10 to 1335.100). Although underlying statutes authorize the Department to establish rules requiring 30 hours of continuing education per 2-year license renewal cycle (225 ILCS 125/75 – Perfusionist Practice Act), the rules currently do not have such a requirement.

Iowa:

Iowa rules and statutes do not specifically address the practice of perfusion.

Michigan:

Michigan rules and statutes do not specifically address the practice of perfusion.

Minnesota:

Minnesota rules and statutes do not specifically address the practice of perfusion.

19. Contact Name

Dale Kleven

20. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

ATTACHMENT A

1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
 - Less Stringent Schedules or Deadlines for Compliance or Reporting
 - Consolidation or Simplification of Reporting Requirements
 - Establishment of performance standards in lieu of Design or Operational Standards
 - Exemption of Small Businesses from some or all requirements
 - Other, describe:
-

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

5. Describe the Rule's Enforcement Provisions

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes No
-

Chapter Med 22

PERFUSIONISTS

Med 22.01 Authority and purpose. The rules in this chapter are adopted by the medical examining board under the authority of ss. 15.08 (5) (b), ~~and 227.11 (2), Stats., and~~ ~~ss. 448.02, 448.04, 448.05, 448.13, and 448.40, Stats.~~

Med 22.02 Definitions. ~~As used in~~ In this chapter:

- (1) "Board" means the medical examining board.
- (2) "Council" means the perfusionists examining council.
- (3) "Perfusion" has the meaning ~~set forth given~~ in s. 448.015 (1m), Stats.
- (4) "Perfusionist" has the meaning ~~set forth given~~ in s. 448.015 (1s), Stats.

Med 22.03 Applications and credentials. Every applicant for initial licensure as a perfusionist shall submit all of the following:

- (1) A completed application on a form provided by the board.
- (2) The fee specified in s. 440.05, Stats.
- (3) ~~One of the following:~~
 - ~~(a) For applications submitted before January 1, 2004, satisfactory evidence that the applicant has, for the entire 10 year period prior to May 3, 2002, been practicing perfusion.~~
 - ~~(b)~~
 - ~~1. Satisfactory evidence that the applicant has successfully completed an educational program in perfusion recognized by the board and accredited by the Accreditation Committee for Perfusion Education of the Commission on Accreditation of Allied Health Educational Programs.~~
 - ~~2. (4) Written verification that Evidence the applicant has passed both the perfusion basic science examination and the clinical application in perfusion examination of the American Board of Cardiovascular Perfusion the examinations required under s. Med 22.04.~~
 - ~~3. Evidence of successful completion of the state board statutes and rules examination and an oral examination, if required.~~

Note: Application forms are available ~~on request to the board office at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708 from the department of safety and professional services at (608) 266-2112 or from the department's website at www.dsps.wi.gov.~~

Med 22.04 Examinations; panel review of applications.

- ~~(1) An applicant under s. Med 22.03 (3) (b) 3., shall certify on forms provided by the board that he or she has read and understands the statutes and rules relating to the provision of perfusion.~~
- ~~(2) An applicant who meets the criterion under s. Med 22.03 (3) (a), may be required to submit to an oral interview by the board if the applicant meets any of the following:~~
 - ~~(a) Has a medical condition which impairs or limits the applicant's ability to practice perfusion with reasonable skill and safety.~~
 - ~~(b) Uses chemical substances so as to impair the applicant's ability to practice perfusion with reasonable skill and safety.~~
 - ~~(c) Has been disciplined or had licensure denied by a licensing or regulatory authority in Wisconsin or another jurisdiction.~~
 - ~~(d) Has been convicted of a crime the circumstances of which substantially relate to the practice of perfusion.~~
 - ~~(e) Has been found negligent in the practice of perfusion or has been a party in a lawsuit in which it was alleged that the applicant has been negligent in the practice of perfusion.~~
 - ~~(f) Has been diagnosed as suffering from pedophilia, exhibitionism or voyeurism.~~
 - ~~(g) Has within the past 2 years engaged in the illegal use of controlled substances.~~
 - ~~(h) Has been subject to adverse formal action during the course of perfusion education, postgraduate training, hospital practice, or other perfusion employment.~~

- (3) An applicant for licensure as a perfusionist ~~under s. Med 22.03 (3) (b)~~, shall pass both the ~~perfusion basic science examination~~ Perfusion Basic Science Examination and the ~~clinical application in perfusion examination~~ Clinical Applications in Perfusion Examination of the American Board of Cardiovascular Perfusion. The board adopts the passing scores of the examination provider.
- (4) An applicant for licensure as a perfusionist ~~under s. Med 22.03 (3) (b)~~, shall pass a state board statutes and rules examination conducted by the council ~~as evidenced by documents submitted directly to the council by the department's office of examinations.~~ The passing score for the examination under this subsection is 85 percent.
- (5) ~~An applicant who meets the criteria under s. Med 22.03 (3) (b)~~, The council may ~~be required~~ require an applicant to complete an oral examination if ~~the applicant~~ any of the following circumstances apply:
- (a) ~~Has~~ The applicant has a medical condition which impairs or limits the applicant's ability to practice perfusion with reasonable skill and safety.
- (b) ~~Uses~~ The applicant uses chemical substances so as to impair the applicant's ability to practice perfusion with reasonable skill and safety.
- (c) ~~Has~~ The applicant has been disciplined or had licensure denied by a licensing or regulatory authority in ~~Wisconsin~~ this state or another jurisdiction.
- (d) ~~Has~~ The applicant has been convicted of a crime the circumstances of which substantially relate to the practice of perfusion.
- (e) ~~Has not~~ The applicant has practiced perfusion for ~~more than~~ 1,200 hours or less during the 3-year period preceding the date of application.
- (f) ~~Has~~ The applicant has practiced ~~over~~ perfusion for more than 1,200 hours ~~in~~ during the ~~last 3 years~~ 3-year period preceding the date of application, but practice was limited.
- (g) ~~Has~~ The applicant has been found negligent in the practice of perfusion or has been a party in a lawsuit in which it was alleged that the applicant has been negligent in the practice of perfusion.
- (h) ~~Has~~ The applicant has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.
- (i) ~~Has~~ The applicant has, within the past 2 years, engaged in the illegal use of controlled substances.
- (j) ~~Has~~ The applicant has been subject to adverse formal action during the course of perfusion education, postgraduate training, hospital practice, or other perfusion employment.
- (k) The applicant has violated s. Med 22.07 (5m).
- (6) The council shall conduct oral examinations ~~and interviews~~. At the request of the council, the board shall provide a medical consultant to ~~the council to provide assistance~~ assist in evaluating applicants examined under ~~s. Med 22.03 (3) sub. (5) (a) and or (b).~~ The passing score for an oral examination is 66 percent.
- (7) All examinations shall be conducted in English.
- (8) Where both written and oral examinations are required, they shall be graded separately and the applicant shall achieve a passing grade on all examinations to qualify for a license.
- (9) An applicant who fails to receive a passing grade on an examination under sub. (4) or (5) may reapply by payment of the fee specified in s. 440.05, Stats. If an applicant fails ~~an~~ the examination under sub. (4) 3 times, the applicant may not retake ~~that the~~ examination unless the applicant submits proof evidence of having completed further professional training or education as the board may prescribe. An applicant ~~for an oral examination~~ may reapply for an oral examination twice at not less than ~~4-month~~ 4-month intervals.
- (10) ~~If after receipt of additional information from applicants who have been treated for alcohol or drug abuse or impairment or from applicants who have been treated for an acute or chronic psychological impairment the council decides that an oral interview or examination shall be administered, the~~ An oral examination concerning the circumstances described in sub. (5) (a) or (b) shall be limited to a determination whether, at the time of application, ~~the applicant's disability appears to pose an actual~~ risk to the health, safety, or welfare of patient or public arising arises from the applicant's demonstrated inability to safely carry out necessary duties and responsibilities inherent to the practice of perfusion.

Med 22.05 Temporary licenses.

- (1) An applicant for licensure ~~who meets the criteria under s. Med 22.03 (3) (b)~~ may apply to the board for a temporary license to practice perfusion prior to licensure if the applicant ~~does~~ submits all of the following:
 - (a) ~~Submits a~~ A completed application on a form provided by the board.
 - (b) ~~Remits the~~ The fee specified in s. 440.05, Stats.
 - (c) ~~Has Evidence the applicant has~~ successfully completed an educational program ~~as defined in under~~ s. Med 22.03 (3) ~~(b) 1~~.
 - ~~(d) Has not previously failed either of the examinations required in s. Med 22.03 (3) (b) 2., unless the applicant has subsequently passed the examination failed.~~
 - (e) ~~Has Evidence the applicant has~~ passed the ~~state board statutes and rules~~ examination under s. Med 22.04 (4).
 - ~~(f) Is not required to take an oral examination.~~
- (1m) The board may not issue a license under this section if any of the following applies:
 - (a) The applicant has failed either of the examinations under s. Med 22.04 (3) and has not subsequently passed the examination.
 - (b) The applicant is required to complete an oral examination.
- (2) ~~Practise~~ Except as provided under sub. (3) (b), practice during the period of a temporary license shall be under the general supervision of a licensed perfusionist. A person holding a temporary license shall consult at least weekly with the supervising perfusionist who shall at least once a month endorse the activities of the person holding the temporary license.
- (3)
 - (a) A temporary license expires one year from the date of its issuance. Upon application, and upon submission of evidence of having passed the perfusion basic scientific examination, the temporary license may be renewed for an additional period of one year. The board may extend the term of the temporary license for an additional 6 months if the applicant was unable to complete the perfusion basic scientific examination within the ~~one-year~~ one-year period due to hardship, including ~~but not limited to~~ illness of the applicant, ~~the~~ illness or death of a family member of the applicant, or an accident or natural disaster. A written affidavit of the hardship ~~must~~ shall be provided.
 - (b) If the applicant fails the perfusion basic science examination prior to the expiration of the temporary license, the applicant shall work under the direct supervision of a licensed perfusionist who is available on the hospital premises to assist.
 - (c) If the applicant fails the clinical application in perfusion examination prior to the expiration of the temporary license, the temporary license expires.
 - (4) The application and required documents for licensure and the application for temporary licensure prior to regular licensure will be reviewed by 2 members of the council to determine eligibility. The council may issue a temporary license prior to licensure as a perfusionist to an applicant who meets the requirements of sub. (1).

Med 22.06 Locum tenens license.

- (1) An applicant who holds certification in clinical perfusion granted by the American Board of Cardiovascular Perfusion may apply to the board for a temporary locum tenens license.
- (2) An applicant for a locum tenens license shall submit ~~to the board~~ all of the following:
 - (a) A completed ~~and verified~~ application on a form supplied provided by the board.
 - (b) A letter from a physician licensed to practice medicine and surgery in this state or a perfusionist licensed to practice perfusion in this state requesting the applicant's services.
 - (c) Verified evidence of certification in clinical perfusion granted by the American Board of Cardiovascular Perfusion.
 - (d) A verified statement by the applicant that the applicant is familiar with the ~~state~~ health laws of this state and ~~the~~ rules of the department of health services ~~as~~ related to communicable diseases.

- (c) The fees required under s. 440.05, Stats., ~~made payable to the Wisconsin department of safety and professional services.~~
- (3) All applicants shall ~~complete an open book~~ pass the examination ~~on statutes and rules governing the practice of perfusion in Wisconsin under s. Med 22.04 (4).~~
- (4) The holder of a locum tenens license may engage in the practice of perfusion only in the geographical area for which the license is issued.
- (5) A locum tenens license expires 90 days from the date of its issuance. For cause shown to the satisfaction of the board, the board may renew the locum tenens license for additional periods of 90 days each, but ~~no~~ a license may not be renewed more than 3 consecutive times.

Med 22.07 Examination review by applicant.

- (1) An applicant who fails the oral or statutes and rules examination may make a request to review that examination by filing a written request and required fee with the board within 30 days of the date on which examination results were ~~mailed~~ received by the applicant.
- (2) Examination reviews ~~are~~ shall be by appointment only.
- (3) An applicant may not review the statutes and rules examination for ~~not~~ more than one hour.
- (4) An applicant may not review the oral examination for ~~not~~ more than 2 hours.
- (5) An applicant shall review an examination in the presence of a board-assigned proctor. The applicant No other person may not be accompanied accompany an applicant during the a review by any person other than the proctor.
- (5m) (a) An applicant may not use any device capable of recording audio, photographic, or video content, or capable of viewing or playing back such content, during a review. A violation of this subsection shall void the applicant's application and require the applicant to reapply for licensure.
- (b) A violation of this subsection constitutes knowingly engaging in fraud, misrepresentation, or dishonesty in applying for or procuring a license.
- (6) At the beginning of the a review, the applicant proctor shall ~~be provided~~ provide the applicant with ~~a copy of the questions, a copy of the applicant's answer sheet or oral examination audiotape and a copy of the master answer sheet. all of the following:~~
 - (a) A copy of the examination questions.
 - (b) A copy of or, if the applicant is reviewing an oral examination, audio recording of the applicant's answers to the examination questions.
 - (c) If an applicant is reviewing the statutes and rules examination, a copy of the master answer sheet.
 - (d) A form on which the applicant may write comments, questions, or claims of error regarding the examination.
- (7) ~~The applicant may review the examination in the presence of a proctor. The applicant shall be provided with a form on which to write comments, questions, or claims of error regarding any item in the examination. The An applicant may consult bound reference books materials during the a review. Applicants shall not remove any notes from the area. Notes The form under sub. (6) (d) and any other notes taken by an applicant during a review shall be retained by the proctor and, if requested by the applicant, made available to the applicant for use at a hearing, if requested. The A proctor shall may not defend the examination or attempt to refute claims of error during the a review.~~
- (8) An applicant may not review ~~the an~~ an examination more than once.

Med 22.08 Board review of examination error claim.

- (1) An applicant claiming examination error shall file a written request for board review in the board office within 30 days of the date the examination was received. The request shall include all of the following:
 - (a) The applicant's name and address.
 - (b) The type of license for which the applicant applied.
 - (c) A description of the mistakes the applicant believes were made in the examination content, procedures, or scoring, including the specific questions or procedures claimed to be in error.

- (d) The facts the applicant intends to prove, including reference text citations or other supporting evidence for the applicant's claim.
- (2) The board shall review the claim, make a determination of the validity of the objections, and notify the applicant in writing of the board's decision and any resulting ~~grade~~ changes to the applicant's exam score.
- (3) If the board confirms the failing status following its review, the application shall be deemed incomplete, and the applicant may be reexamined.

~~Note: The board office is located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.~~

Med 22.09 Scope of practice. The scope of practice of perfusion includes the following functions:

- (1) The use of extracorporeal circulation, long-term cardiopulmonary membrane oxygenation, and associated therapeutic and diagnostic techniques.
- (2) Counterpulsation, ventricular assistance, autotransfusion, blood conservation, management and processing techniques, myocardial and organ preservation, isolated limb perfusion, and surgical assistance.
- (3) The administration of pharmacological and therapeutic agents, and blood products or anesthetic agents, through the extracorporeal circuit or through an intravenous line in conjunction with extracorporeal support.
- (4) The performance and use of anticoagulation monitoring and analysis, physiologic monitoring and analysis, blood gas and chemistry monitoring and analysis, hematologic monitoring and analysis, induction and hypothermia and ~~hyperthermia~~ hyperthermia with reversal, hemoconcentration and hemodilution, and ~~hymodialysis~~ hemodialysis.
- (5) The observation of signs and symptoms related to perfusion services, the determination of whether the signs and symptoms exhibit abnormal characteristics, and the implementation of appropriate reporting, perfusion protocols or changes in or the initiation of emergency procedures.
- (6) Evaluation and selection of equipment to perform the functions set forth in subs. (1) to (5).

Med 22.10 Continuing education.

- (1) **DEFINITIONS.** In this section:
 - (a) "ABCP" means the American Board of Cardiovascular Perfusion.
 - (am) "AC-PE" means the Accreditation Committee-Perfusion Education.
 - (b) "Contact hour" means not less than 50 minutes spent by a licensee in actual attendance at and completion of an approved continuing education activity.
 - (c) "Continuing education" means planned, organized learning activities designed to maintain, improve, or expand a licensee's knowledge and skills relevant to the practice of perfusion.
 - (d) "Continuing education unit" means one contact hour of continuing education.
 - (e) "Licensee" means a person licensed to practice perfusion in this state.
- (2) **CERTIFICATION STATEMENT.** Each licensee shall, at the time of applying for renewal of a license under s. 448.07, Stats., certify that ~~he or she has~~, in the 2 years preceding the renewal due date, ~~completed~~ were completed at least 30 continuing education units of acceptable continuing education were completed. At least 10 continuing education units ~~must shall~~ be completed in Category I activities.
- (3) **LIMITATION ON CLAIMING CONTINUING EDUCATION UNITS.** ~~No additional~~ Additional continuing education units ~~are may not be~~ given for subsequent presentations of the same content.
- (4) **CATEGORIES OF CONTINUING EDUCATION.** Continuing education units shall be accumulated through professional activities related to perfusion in all of the following categories:
 - (a) ~~Category I~~ Category I. ABCP-approved perfusion meetings and related activity, including all of the following:
 - 1. Attendance at ABCP-approved international, national, regional, or state perfusion meetings, programs, and seminars ~~in at~~ which a minimum of 75% of the contact hours consist of perfusion related material; ~~including international, national, regional or state perfusion meetings;~~ 1 One continuing education unit may be claimed for each contact hour.

2. Publication of a perfusion related book chapter or paper in a professional journal: 5 Five continuing education units may be claimed for each published book chapter or paper, subject to a maximum limit of 10 continuing education units in any given renewal period.
 3. ~~Presentation of~~ Presenting a talk workshop or lecture at an international, national, regional, or state perfusion meeting: 5 Five continuing education units may be claimed for each presentation, subject to a maximum limit of 10 continuing education units in any given renewal period.
 4. Presentation of a poster or other exhibit at an international, national, regional, or state perfusion meeting: 2 Two continuing education units may be claimed for each presentation, subject to a maximum limit of 4 continuing education units in any given renewal period.
 5. Participation in an AC-PE site visitor workshop or volunteering as an AC-PE site visitor: 5 Five continuing education units may be claimed for each workshop or site visit, subject to a maximum limit of 10 continuing education units in any given renewal period.
 6. Participation in an ABCP knowledge base survey: 2 Two continuing education units may be claimed for each survey.
 7. Self-directed continuing education meeting ABCP requirements: 1 One continuing education unit may be claimed for each contact hour.
- (b) Category II Category II. Non-accredited perfusion meetings and other medical meetings, including all of the following:
1. Perfusion Attendance at international, national, regional, or state perfusion or medical meetings, programs, and seminars ~~is not approved by ABCP, at~~ which a minimum of 75% of the contact hours consist of perfusion related material, ~~including international, national, state or regional perfusion meetings:~~ One-half of a continuing education unit may be claimed for each contact hour, subject to a maximum limit of 10 continuing education units in any given renewal period.
 2. Manufacturer-specific and company-sponsored educational activities: 1 One continuing education unit may be claimed for each contact hour.
- (c) Category III Category III. Individual education and other self-study activities, including all of the following:
1. Serving as a clinical instructor in an accredited perfusion training program: 2 Two continuing education units ~~per~~ may be claimed for this service in each year of a renewal period.
 2. Serving as a didactic instructor in an accredited perfusion training program: 1 One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a maximum limit of 4 continuing education units in any given renewal period.
 3. Participation in an ABCP examination development workshop or survey: 2 Two continuing education units ~~per~~ may be claimed for each contact hour, subject to a maximum limit of 4 continuing education units in any given renewal period.
 4. Self-learning activities and self-study modules, including use of audiovisual devices or electronic forums, reading scientific journals, and participation in degree-oriented, professionally related course work; ~~and self-study modules:~~ 1 One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a maximum limit of 10 continuing education units in any given renewal period.
 5. Presentation at ~~a non-approved~~ an international, national, regional, or state perfusion or medical meeting: that is not approved by ABCP. 1 One continuing education unit may be claimed for each hour of presentation.
 6. ~~Grand~~ Participation in a grand round: 1 One continuing education unit ~~per~~ may be claimed for each contact hour, subject to a maximum limit of 2 continuing education units in any given renewal period.
 7. Completion of Advanced cardiac life support Cardiac Life Support training: 2 Two continuing education units may be claimed for completion of this training.
- (5) **AUDIT**. An applicant for renewal shall certify ~~his or her attendance at~~ completion of required continuing education. The board ~~may conduct a random audit of all licensees on a biennial basis for compliance with continuing education requirements, and~~ shall audit for compliance with the continuing education requirements any licensee who is under investigation by the board for alleged misconduct.