

**BOARD OF RESPIRATORY CARE
TELECONFERENCE
MINUTES**

DATE: April 30, 2009

TIME: 3:30 p.m. C.S.T

LOCATION: Heritage Place, Metro Center
Poplar Conference Room
227 French Landing, 1st Floor
Nashville, TN 37243

MEMBER(S) PRESENT: Candace Partee, RRT, Chair
Gene Gantt, RRT
Teresa Hatcher, Consumer Member
Roger Major, RRT
Colleen Schabacker, RRT

MEMBER(S) ABSENT: Darryl Jordan, M.D.
Delmar Mack, Ed.D

STAFF PRESENT: Marva Swann, Board Director
Mary Webb, Board Administrator
Ernie Sykes, Board Attorney
Libby Miller, HRB Director
Alison Cleaves, Deputy General Counsel

With a quorum being present, Candace Partee, Chair, called the meeting to order at 3:30 p.m. C.S.T. All members were physically present with the exceptions of Colleen Schabacker and Teresa Hatcher who participated by telephone.

Purpose of Meeting

Pursuant to T.C.A. 8-44-108 (b) (2), an electronic meeting was deemed necessary in order for the Board of Respiratory Care to discuss and take timely action before their next scheduled meeting regarding an amendment to Senate Bill #726. Ms. Schabacker made a motion seconded by Gene Gantt affirming the necessity of holding an electronic meeting of the Board. The motion carried by roll call vote with all members voting to approve.

Mr. Sykes will file documentation on the necessity of the Board holding an electronic meeting with the Secretary of State's office within two (2) working days of the meeting today.

Board of Respiratory Care
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Senate Bill #726 Amendment

Amendment to Senate Bill #726 would amend T.C.A. 63-31-101 (9)(A) of the Polysomnography Act by deleting the language “Practice of polysomnography” means the staging and scoring of sleep by performing any of the following tasks, under the general supervision of a licensed physician:” and by substituting instead the following:

(9)(A) “Practice of polysomnography” means the staging and scoring of sleep by continuous and simultaneous monitoring of the stages of sleep and wake through use of an electroencephalogram (EEG), and electroculogram (EOG), and a submental electromyogram (EMG), in conjunction with the recording and monitoring of other physiological variables, and the assignment of values for duration, frequency, and type of event to each stage of sleep in which the event occurred. The following tasks are considered a part of the practice of polysomnography only when performed as part of the staging and scoring of sleep under the general supervision of licensed physician:

T.C.A. 63-31-107 (a)(5) is amended by deleting the subdivision in its entirety and by substituting instead the following:

(a)(5) Respiratory therapists who provide polysomnography services shall be credentialed as a registered polysomnographic technologist by the Board of Polysomnographic Technologists, or as a sleep disorders specialist by the National Board for Respiratory Care, or have undergone a standardized, uniform mechanism to document competency in polysomnography as approved by the Tennessee Board of Respiratory Care with documentation of passage of such mechanism made available at the request of the Board of Respiratory Care. The Tennessee Board of Respiratory Care shall consult with the Tennessee Board of Medical Examiners in the development of such mechanism. Respiratory therapists are not required to have a second license as a polysomnographic technologist.

After discussion, Mr. Gantt made a motion to support the amendment to Senate Bill #726 seconded by Ms. Schabacker. The motion carried by roll call vote with all members voting to approve.

With there being no further business to discuss, the meeting was adjourned at 4:00 p.m.

These minutes were ratified at the June 25, 2009 board meeting.