RULES FOR THE
ADMINISTRATION OF THE
PERFUSIONIST PRACTICE ACT

PART 1335
TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

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PERFUSIONIST PRACTICE ACT

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AUTHORITY: Implementing the Perfusionist Practice Act [225 ILCS 125] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15 (7)].


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PERFUSIONIST PRACTICE ACT

Section 1335.10 Definitions

"Act" means the Perfusionist Practice Act [225 ILCS 125].

"Board" means the Board of Perfusion.

"Department" means the Department of Professional Regulation.

"Perfusionist" means a person qualified, by academic and clinical education, to operate the extracorporeal circulation equipment during any medical situation where it is necessary to support or replace a person's cardiopulmonary, circulatory, or respiratory function. A perfusionist is responsible for the selection of appropriate equipment and techniques necessary for support, treatment, measurement, or supplementation of the cardiopulmonary and circulatory system of a patient, including the safe monitoring, analysis, and treatment of physiologic conditions under an order and under the supervision of a physician licensed to practice medicine in all its branches and in coordination with a registered professional nurse. (Section 10 of the Act)

Section 1335.20 Fees

The following fees shall be paid to the Department and are not refundable:

a) Application Fees. The fee for application for a license as a perfusionist is $250.

b) Renewal Fees. The fee for the renewal of a license shall be calculated at the rate of $125 per year.

c) General Fees.

1) The fee for the restoration of a license other than from inactive status is $20 plus payment of all lapsed renewal fees not to exceed $400.

2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license that has been lost or destroyed, or for the issuance of a license with a change of name or address other than during the renewal period is $20. No fee is required for name and address changes on Department records when no duplicate license is issued.

3) The fee for a certification of a licensee's record for any purpose is $20.
4) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.

5) The fee for a roster of persons licensed as perfusionists in this State shall be the actual cost of producing the roster.

Section 1335.30 Application for Licensure Pursuant to Section 60 of the Act (Grandfather)

a) Pursuant to Section 60 of the Act, an applicant may apply for licensure by filing an application on forms provided by the Department. The application shall be postmarked no later than November 1, 2002 and shall include:

1) Verification of at least 5 years experience in the practice of perfusion. The experience shall be:

A) in operating cardiopulmonary bypass systems during cardiac surgical cases in a licensed health care facility;

B) the primary function of the applicant;

C) a minimum of 200 cases completed in the 5 years between January 1, 1991 and January 1, 2000; and

D) documented by 3 affidavits signed by either cardiovascular surgeons certified by the American Board of Thoracic Surgery or certified American Board of Cardiovascular Perfusion perfusionists who acted in a supervisory capacity;

2) A complete work history since January 1, 1991; and

3) The required fee set forth in Section 1335.20.

b) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Department or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking licensure shall be requested to:

1) Provide information as may be necessary; and/or

2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information or clear up any discrepancies or conflicts in information.

Section 1335.40 Application for Licensure

a) An applicant for licensure as a perfusionist shall file an application on forms provided by the Department. The application shall include:
1) Certification of graduation from a school accredited by the Commission on the Accreditation of Allied Health Education Programs (CAAHEP) or a similar accrediting body approved by the Department;

2) Certification of successful completion of the examinations provided by the American Board of Cardiovascular Perfusion (ABCP) or its successor agency or a substantially equivalent examination approved by the Department;

3) A work history since graduation from a perfusion program;

4) Verification from the state in which an applicant was originally licensed and is currently licensed, if applicable, stating:

   A) The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and

   B) Whether the file on the applicant contains any record of disciplinary actions taken or pending; and

5) The fee required in Section 1335.20 of this Part.

b) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Department or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking licensure shall be requested to:

1) Provide information as may be necessary; and/or

2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information or clear up any discrepancies or conflicts in information.

Section 1335.50 Renewals

a) The first licenses issued under the Act shall expire on April 30, 2004. Thereafter, every license issued under the Act shall expire on April 30 of even numbered years. The holder of a license may renew the license during the month preceding the expiration date by paying the required fee.

b) It is the responsibility of each perfusionist to notify the Department of any change of address. Failure to receive a renewal form from the Department shall not constitute an excuse for failure to pay the renewal fee.

c) Practice on an expired license shall be considered unlicensed practice and shall be grounds for discipline pursuant to Section 105 of the Act.
Section 1335.60 Restoration

a) A person seeking restoration of a license that has expired for 3 years or less shall have the license restored upon payment of all lapsed renewal fees required by Section 1335.20 of this Part.

b) A person seeking restoration of a license that has been placed on inactive status for 3 years or less shall have the license restored upon payment of the current renewal fee.

c) A person seeking restoration of a license after it has expired or been placed on inactive status for more than 3 years shall file an application, on forms supplied by the Department, including the applicant's work history since the license expired and the fee required by Section 1335.20 of this Part. The person shall also submit one of the following:

1) Sworn evidence of active practice in another jurisdiction. The evidence shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the registrant was authorized to practice during the term of active practice and verification of experience signed by a cardiovascular surgeon certified by the American Board of Thoracic Surgery; or

2) An affidavit attesting to military service as provided in Section 15 of the Act; or

3) Successful completion of the examination administered by the American Board of Cardiovascular Perfusion or its successor agency within 2 years prior to application.

d) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Department because of a lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant seeking restoration of a license shall be requested to:

1) Provide information as may be necessary; and/or

2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information or clear up any discrepancies or conflict in information.

e) Upon the recommendation of the Board and approval by the Director, an applicant shall have the license restored or will be notified in writing of the reason for the denial of the application.

Section 1335.70 Endorsement

a) An applicant for licensure as a perfusionist who is licensed under the laws of another state shall file an application with the Department that shall include:
1) Certification of graduation from a school accredited by the Commission on the Accreditation of Allied Health Education Programs (CAAHEP) or a similar accrediting body approved by the Department;

2) Certification of successful completion of the examination provided by the American Board of Cardiovascular Perfusion (ABCP) or its successor agency or a substantially equivalent examination approved by the Department;

3) Verification from the state in which the applicant was originally licensed and is currently licensed, stating:

A) The time during which the applicant was licensed in that jurisdiction; and

B) Whether the file on the applicant contains any record of any disciplinary actions taken or pending;

4) A complete work history indicating all employment since graduation from an approved perfusionist program; and

5) The required fee set forth in Section 1335.20 of this Part.

b) The Department shall examine each endorsement application to determine whether the requirements in the other state at the date of licensing were substantially equivalent to the requirements then in force in this State and whether the applicant has otherwise complied with the Act. The Department shall either issue a license by endorsement or notify the applicant of the reasons for the denial of the application.

Section 1335.80 Inactive Status

a) Licensed perfusionists who notify the Department, on forms provided by the Department, may place their licenses on inactive status and shall be excused from paying renewal fees until they notify the Department in writing of the intention to resume active practice.

b) Any licensed perfusionist seeking restoration from inactive status shall do so in accordance with Section 1335.60.

c) Any person violating this Section shall be considered to be practicing without a license and shall be subject to the disciplinary provisions of the Act.

Section 1335.90 Granting Variances

a) The Director may grant variances from this Part in individual cases where he/she finds that:

1) The provision from which the variance is granted is not statutorily mandated;
2) No party will be injured by the granting of the variance; and

3) The rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.

b) The Director shall notify the Board of the granting of the variance, and the reasons for granting the variance, at the next meeting of the Board.

Section 1335.100 Unethical, Unauthorized or Unprofessional Conduct
a) The Department may suspend or revoke a license, refuse to issue or renew a license or take other disciplinary action based upon its finding of "unethical, unauthorized, or unprofessional conduct" within the meaning of Section 105(7) of the Act. In determining what constitutes unethical, unauthorized or unprofessional conduct of a character likely to deceive, defraud or harm the public, the Department shall consider whether the questioned activities:

1) Are violative of ethical standards of the profession (such as safeguarding patient confidence and records within the constraints of law; respecting the rights of patients, colleagues and other health professionals; observing laws under the Act; and providing service with compassion and respect for human dignity);

2) Constitute a breach of the perfusionist's responsibility to a patient;

3) Resulted in assumption by the perfusionist of responsibility for delivery of patient care that the perfusionist was not properly qualified or competent to render;

4) Resulted in a delegation of responsibility for delivery of patient care to persons who were not properly supervised or who were not competent to assume such responsibility;

5) Caused actual harm to any member of the public; or are reasonably likely to cause harm to any member of the public in the future;

6) Resulted in the individual being convicted of any crime an essential element of which is larceny, embezzlement, obtaining money, property or credit by false pretenses or by means of a confidence game, dishonesty, fraud, misstatement or moral turpitude;

7) Involved misrepresenting as to educational background, training, credentials, competence, or medical staff memberships;

8) Entailed abuse of the perfusionist/patient relationship by taking unfair advantage of a patient's vulnerability;

9) Involved unethical conduct with a patient that resulted in the patient engaging in unwanted personal, financial or sexual relationships with the perfusionist;
10) Involved committing an act or acts, in the practice conducted under the Act, of a flagrant, glaringly obvious nature that constitute conduct of such a distasteful nature that accepted codes of behavior or codes of ethics are breached;

11) Involved committing an act or acts in a relationship with a patient so as to violate common standards of decency or propriety;

12) Involved overutilizing services by providing excessive evaluation or treatment procedures not warranted by the condition of the patient or by continuing treatment beyond the point of possible benefit;

13) Involved making gross or deliberate misrepresentations or misleading claims as to professional qualifications or of the efficacy or value of the treatments or remedies given or recommended, or those of another practitioner;

14) Involved willfully making or filing a false report or record, willfully failing to file a report or record required by State or federal law, or willfully impeding or obstructing such filing or inducing another person to do so. Such reports or records include only those reports or records that require the signature of a respiratory care practitioner licensed pursuant to this Part;

15) Allowed the opportunity to arise whereby objective evaluations of products and services are compromised by gratuities, gifts, entertainment, consulting engagements, employment status, or any other material or personal gain.

16) Constitute gross negligence. In determining what constitutes gross negligence, the Board shall consider gross negligence to be an act or omission that is evidence of recklessness or carelessness toward or a disregard for the safety or well-being of the patient, and that results in injury to the patient.

Pursuant to Section 105(7) of the Act, the Department incorporates by reference the "Code of Ethics" of the American Society of Extra-Corporeal Technology, 503 Carlisle Dr., Suite 125, Herndon VA 20170 (2001), with no later amendments or editions.