



August 15, 2011

Jewel Mullen, MD, MPH, MPA
Commissioner
Department of Public Health
410 Capitol Avenue
Hartford, CT 06106

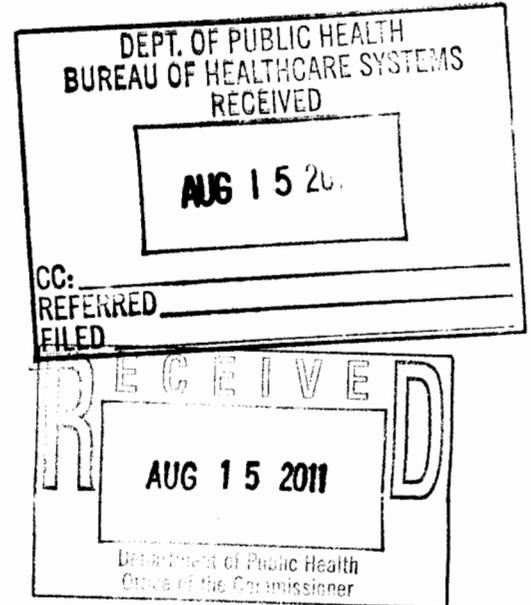
RE: Public Act 11-029

Dear Dr. Mullen:

In order to better serve the needs of our patients, Connecticut Children's Medical Center is developing a program to provide Extracorporeal Membrane Oxygenation (ECMO) services. We would like to use respiratory therapists as part of the ECMO clinical team, but the Department of Public Health (DPH) has made clear in prior conversations about this issue that a legislative change would be needed to add ECMO-related activities to the scope of practice for respiratory therapists. We respectfully request an exemption from the newly-enacted process for scope of practice determinations because we believe that participation on an ECMO team is already part of the scope of practice for respiratory therapists.

DPH's position on this issue may be due to the fact that the scope of practice for perfusionists (found in CGS, Sec.20-162aa) explicitly mentions ECMO while the scope of practice for respiratory care (found in CGS, Sec. 20-162n) does not. However, the functions listed in 20-162n describe the functions that would be used as an ECMO team member. Specifically, ECMO-related functions are shown below in underscore:

CGS Sec 20-162n (b) "Respiratory care" means health care under the direction of a physician licensed pursuant to chapter 370 and in accordance with written protocols developed by said physician, employed in the therapy, management, rehabilitation, diagnostic evaluation and care of patients with deficiencies and abnormalities that affect the cardiopulmonary system and associated aspects of other system functions and that includes the following: (1) The therapeutic and diagnostic use of medical gases, administering apparatus, humidification and aerosols, administration of drugs and medications to the cardiorespiratory systems, ventilatory assistance and ventilatory control, postural drainage, chest physiotherapy and breathing exercises, respiratory rehabilitation,



cardiopulmonary resuscitation and maintenance of natural airways as well as the insertion and maintenance of artificial airways.

The role of a respiratory therapist acting as part of an ECMO team would, in fact, involve the care of patients with deficiencies and abnormalities that affect the cardiopulmonary system and associated aspects of other system functions including cardiopulmonary resuscitation and maintenance of natural airways as well as the insertion and maintenance of artificial airways. We request that DPH issue a declaratory ruling confirming that respiratory therapists can already perform needed functions as part of an ECMO team thus obviating the need for a scope of practice determination under the new process.

Thank you in advance for your time and consideration of our request. If you have questions about our request or require additional information, please contact Jane Baird, Director of Government Relations, at 860-545-8561 or jbaird@connecticutchildrens.org.

Sincerely,



Theresa Hendricksen, RN, MS, FACHE
Executive Vice President and COO