

**From:** [Sunset Advisory Commission](#)  
**To:** [Janet Wood](#)  
**Subject:** FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)  
**Date:** Wednesday, June 11, 2014 8:05:26 AM

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-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]  
Sent: Wednesday, June 11, 2014 6:59 AM  
To: Sunset Advisory Commission  
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Wednesday, June 11, 2014 - 06:59

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: C.H.

Last Name: Prihoda, MD

Title: Family Practitioner

Organization you are affiliated with: Navasota Medical Group, CHRISTUS Dubuis Hospital of Bryan

City: Navasota

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed:

In May 2014, the Sunset Advisory Commission Staff Report recommended to discontinue 19 regulatory programs currently housed at the Department of State Health Services (DSHS) which includes Respiratory Care Practitioners Program (Page 4, Issue 3 and Pages 106-108, Appendix E).

Licensed RCPs' must complete a rigorous specialized, college-based educational training program from an accredited college, and must successfully complete a national credentialing process consisting of rigorous examinations before they are eligible to apply for a state license.

The organization that provides the credentialing examinations does not regulate the profession, nor does the organization that accredits the RT educational programs. The RCPs' are regulated by the Texas Respiratory Care Practitioners Program with the DSHS.

The scope of practice for a licensed RCP is complex. The following are just a few procedures in an RCP's scope of practice:

- Directly manages highly technical mechanical ventilators providing necessary life support for patients who are unable to sustain life on their own.
- Routinely administers prescription medications, including bronchodilators, antibiotics, analgesics, and opioids.
- Assists the physician in diagnosing cardio-pulmonary disease by performing diagnostic procedures and patient assessment
- Performs CPR in all types of health care facilities and on patients of all ages

- Administers medical gases such as oxygen, nitric oxide and helium
- Provides counseling and rehabilitation to patients with cardio-pulmonary diseases
- Functions as members of the Extracorporeal Life Support team
- Works with critically ill patients in all intensive care units (ICUs)
- Serves as an invaluable member of land and air transport teams.

There are numerous reasons to not deregulate RCPs'. Public health and safety is the greatest concern. Licensed RCPs' are direct patient care providers in a profession where extensive specialized skills and training are required and a significant potential risk of harm to the public exists from lack of training education and incompetence. The lack of a formal state licensure process in Texas would mean that RCPs' whom are incompetent, engaged in criminal activity, or have lost their license to practice in another state can work in Texas without any review or screening to protect the citizens of Texas.

As a practicing Family Practitioner, I heavily rely on an experienced RCP's training when I make decisions to extubate a patient, start BiPAP, adjust inhaler medications. I regularly do rounds with RCPs and consider them a vital part of the medical team. This deregulation could potentially affect the lives and safety of thousands of patients per year and ultimately raise the cost of healthcare expenditures in the ICU if the patients are not cared for by professionals in a timely manner.

Any Alternative or New Recommendations on This Agency: My recommendation is not to deregulate RCPs', but for the Respiratory Care Practitioners program to either remain with the DSHS or to be transferred to the Texas Department of Licensing and Regulation.

My Comment Will Be Made Public: I agree