

**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 25, 2014 8:01:36 AM

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

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]  
Sent: Tuesday, June 24, 2014 10:23 PM  
To: Sunset Advisory Commission  
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Tuesday, June 24, 2014 - 22:23

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: Shawna

Last Name: Sallaska

Title: Mrs

Organization you are affiliated with: DSHS

City: Lubbock

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or

Opposed: I am a nurse in the emergency department and have been for 11 years!

I can't tell you how many times I have depended on respiratory therapist to manage the airway of critical patients so that I can focus on nursing care.

It is a specialty and not something that can be taught to someone via on the job training! RRT's have 2 years of college plus a certification exam. Those

2 years are focused solely on the anatomy and physiology of the lungs. They are a very complex organ vital for life!

Nurses spend two years learning the entire body! Not nearly as focused or specialized. I agree that giving nebulized treatments could be managed by nurses or support staff; however, the complexity of ventilated patients needing respiratory support cannot be effectively and efficiently managed by anyone like it can be by respiratory therapists.

I hope that you guys think about the decisions that are before you, and honestly how ridiculous this is? People's lives are depending on you making smart decisions! Imagine if it's your wife, husband or child in critical condition, on a ventilator! Would you want someone who knows how the lungs work, why the metabolic complications going on within the body are affecting the pulmonary status, and who know how to interpret blood gases and effectively improve oxygenation and ventilation of your loves one.....or someone who has no college degree who applied for a "support staff" job who gets a short on the job training in how to set up and trouble shoot ventilator alarms?!? It seems like a no brainer to me! Please think of the lives you will affect, both professionally and those who will seek care of professionals that will no longer be available. Thanks for your time.

Any Alternative or New Recommendations on This Agency: Keep RRT's and Radiology Techs! They are very valuable

My Comment Will Be Made Public: I agree