

Title 17. Professions, Occupations, and Businesses

Chapter XI. Department of Health, State Board of Health, Generally

Subchapter A. Generally

Part 46. Rules for Perfusionists in Arkansas

Codification Notes. This part as promulgated prior to codification into the Code of Arkansas Rules provided as follows:

"SECTION 1: Authority.

The following Rules for Perfusionists in Arkansas are duly adopted and promulgated by the Arkansas State Board of Health pursuant to the authority expressly conferred by the laws of the State of Arkansas in Ark. Code Ann. 17-104-101 et seq."

"Revision effective date: July 4, 2022"

"SECTION 6: Severability

If any provision of these Rules, or the application thereof to any person or circumstances is held invalid, such provisions or applications of these Rules that can give effect without the invalid provisions or applications will be enforced, and to this end the provisions hereto are declared to be severable."

Subpart 1. Generally

17 CAR § 46-101. Purpose.

(a) These rules establish minimum standards for licensure of perfusionists in Arkansas.

(b) These standards are not static and are subject to periodic revisions in the future as new knowledge and changes in patient care trends become apparent.

(c) Perfusionists in Arkansas have a strong moral responsibility for providing optimum patient care and treatment.

Authority. Arkansas Code § 17-104-103.

17 CAR § 46-102. Definitions.

As used in this part:

- (1) "ABCP" means the American Board of Cardiovascular Perfusion;
- (2) "Automatic licensure" means granting the occupational licensure without an individual having met occupational licensure requirements provided under the Arkansas Code or by other provisions in this part;
- (3) "BLS" means basic life support;
- (4) "CPS" means cardiopulmonary support;
- (5) "ECMO" means extracorporeal membrane oxygenation;
- (6) "Extracorporeal circulation" means the diversion of a patient's blood through a heart-lung machine or a similar device that assumes the functions of the patient's:
 - (A) Heart;
 - (B) Lungs;
 - (C) Kidneys;
 - (D) Liver; or
 - (E) Other organs;
- (7) "Licensed perfusionist" means a person licensed under Arkansas Code § 17-104-101 et seq., as amended;
- (8) "PADCAB" means perfusion-assisted direct coronary artery bypass;
- (9) "PALS" means pediatric advanced life support;
- (10) "Perfusion" means:
 - (A) The functions necessary for the support, treatment, measurement, or supplementation of the cardiovascular, circulatory, respiratory systems or other organs, or a combination of those activities;

(B) To ensure the safe management of physiologic functions by monitoring and analyzing the parameters of the systems under an order and supervision of a licensed physician, including:

(i) The use of extracorporeal circulation, long-term cardiopulmonary support techniques including, but not limited to:

(a) Extracorporeal carbon-dioxide removal and extracorporeal membrane oxygenation; and

(b) Associated therapeutic and diagnostic technologies;

(ii) Counterpulsation;

(iii) Ventricular assistance;

(iv) Autotransfusion;

(v) Blood conservation techniques;

(vi) Myocardial and organ preservation;

(vii) Extracorporeal life support;

(viii) Isolated limb perfusion;

(ix) The use of techniques involving blood management, advanced life support, related functions;

(x) The administration of pharmacological and therapeutic agents or blood products or anesthetic agents through the extracorporeal circuit or through an intravenous line for perfusion purposes as ordered by a physician; and

(xi) The performance and use of:

(a) Anticoagulation monitoring and analysis;

(b) Physiologic monitoring and analysis;

(c) Blood gas and chemistry monitoring and analysis;

(d) Hematologic monitoring and analysis;

(e) Hypothermia;

(f) Hyperthermia;

(g) Hemoconcentration and hemodilution; and

(h) Hemodialysis; and

(C) The observation of signs and symptoms related to perfusion services, the determination of whether the signs and symptoms exhibit abnormal characteristics, and the implementation of appropriate reporting, perfusion protocols, or changes in or the initiation of emergency procedures;

(11) "Perfusion protocols" means perfusion-related policies and protocols developed or approved by a licensed healthcare facility or a physician through collaboration with:

- (A) Administrators;
- (B) Licensed perfusionists; and
- (C) Other healthcare professionals;

(12) "Provisional licensed perfusionist" means a person provisionally licensed under Arkansas Code § 17-104-101 et seq., as amended;

(13) "Returning military veteran" means a former member of the United States Armed Forces who was discharged from active duty under circumstances other than dishonorable;

(14) "Uniformed service member" means an:

(A) Active or reserve component member of the:

- (i) United States Air Force;
- (ii) United States Army;
- (iii) United States Coast Guard;
- (iv) United States Marine Corps;
- (v) United States Navy;
- (vi) United States Space Force; or
- (vii) National Guard;

(B) Active component member of the National Oceanic and Atmospheric Administration Commissioned Officer Corps; or

(C) Active or reserve component member of the United States Commissioned Corps of the Public Health Service;

(15) "Uniformed service veteran" means a former member of the United States uniformed services discharged under conditions other than dishonorable; and

(16) "VAD" means ventricular assist device.

Authority. Arkansas Code § 17-104-103.

17 CAR § 46-103. Licensure.

(a) Requirements.

(1) Any person is eligible to make application to the State Board of Health and receive a license, subject to the provisions of Arkansas Code § 17-104-101 et seq. as amended.

(2)(A) A licensed perfusionist shall conform to the code of ethics as approved by the State Board of Health.

(B) See 17 CAR § 46-104.

(3) A licensed perfusionist shall:

(A) At all times hold the well-being of the patient to be paramount; and

(B) Not act in such a way as to bring the member's interests into conflict with the patient's interests.

(4) A licensed perfusionist shall deliver healthcare services without regard to:

(A) Race;

(B) Color;

(C) Creed;

(D) National origin;

(E) Sex;

(F) Age;

(G) Religion;

(H) Sexual preference; or

(I) Physical or mental condition.

(5) The applicant shall make application upon a form prepared by the Department of Health.

(6) A perfusionist shall practice perfusion only when duly licensed to do so pursuant to the provisions of the Perfusion Licensure Act, Arkansas Code § 17-104-101 et seq., as amended.

(7) A licensed perfusionist shall notify the department of the suspension, probation, revocation, or any final disciplinary action of any past or currently held permits, licenses, or certificates required to practice perfusion in this or any jurisdiction of the United States, United States territories, District of Columbia, or a province of Canada within thirty (30) days of final adjudication.

(8) A licensed perfusionist shall report to the department any alleged violation of status and rules governing the practice of perfusion in the State of Arkansas within thirty (30) days of the alleged violation.

(9) A licensed perfusionist shall not procure or attempt to procure a license or renewal of a license to practice perfusion by fraud or deceit.

(10) A licensed perfusionist shall not practice perfusion after a license has expired or has been:

- (A) Suspended;
- (B) Revoked; or
- (C) Not renewed.

(11) A licensed perfusionist shall not practice perfusion under cover of any permit, license, or certificate illegally or fraudulently obtained or issued.

(12) A licensed perfusionist shall not obtain or attempt to obtain any fee, charge, tuition, or other compensation by:

- (A) Fraud;
- (B) Deception;
- (C) Misrepresentation; or
- (D) Willfully overcharging or overtreating patients.

(13) A licensed perfusionist shall not willfully perform inappropriate or unnecessary:

- (A) Treatment;
- (B) Diagnostic tests; or

(C) Perfusion services.

(14) A licensed perfusionist shall not delegate professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities.

(15) A licensed perfusionist shall not violate, or attempt, directly or indirectly, or assist or enable any person to violate, any provisions, document, section, lawful rule, or any code of ethics adopted pursuant to Arkansas Code § 17-104-101 et seq.

(16) A licensed perfusionist shall keep the department informed of any address change.

(b) **New applicants.** All new applicants for a perfusionist license shall:

- (1) Submit a signed application to the department for consideration;
- (2) Meet the requirements of the ABCP for certification; and
- (3) Be certified by the ABCP.

(c) **Military.**

(1) This section applies to:

(A) Uniformed service members stationed in Arkansas;

(B) A uniformed service veteran who resides in or establishes residency in the State of Arkansas; and

(C) The spouse of subdivision (c)(1)(A) or (c)(1)(B) of this section including a uniformed service member who is:

(i) Assigned a tour of duty that excludes the spouse from accompanying the uniformed service member and the spouse relocates to Arkansas; or

(ii) Killed or succumbs to his or her injuries or illness in the line of duty if the spouse establishes residency in Arkansas.

(2) Automatic licensure may be granted to the persons listed in this subsection if the person:

(A) Is a holder in good standing of occupational licensure with similar scope of practice issued in another state, territory, or district of the United States; and

(B) Pays the licensure fee in Arkansas Code § 17-107-204.

(3) **Credit toward initial licensure.** Relevant and applicable uniformed service education, training, national certification, or service-issued credential shall be accepted toward initial licensure.

(4) **Expiration dates and continuing education.**

(A) A license expiration date shall be extended for a deployed uniformed service member or a spouse for one hundred eighty (180) days following the date of the uniformed service member's return from deployment.

(B) A uniformed service member or spouse shall be exempt from continuing education requirements in this section for one hundred eighty (180) days following the date of the uniformed service member's return from deployment.

(C) Any uniformed service member or spouse exercising the exemption shall provide evidence of completion of continuing education before renewal or grant of a subsequent license.

(d) **Renewal.**

(1) Each renewal period the licensee must be able to provide proof of:

(A) Current certification by the American Board of Cardiovascular Perfusion (ABCP) or its successor or thirty (30) hours of perfusion-related continuing professional education which may include ACLS, PALS, and BLS, of which at least ten (10) hours shall be meetings, programs, or activities accredited for continuing education hours by ABCP or its successor; and

(B)(i) Forty (40) clinical activities annually.

(ii) Clinical activities are defined as:

(a) Bypass, Primary;

(b) Instructor;

(c) Veno-venous bypass;

(d) Pump-assisted coronary and/or organ perfusion

(PADCAB/isolated limb perfusion);

(e) CPS;

(f) ECMO;

(g) VAD;

- (h) Documented intraoperative pump standby; or
- (i) Bypass first assistant.

(iii)(a) Of the forty (40) clinical activities above, a maximum of fifteen (15) activities may be documented intraoperative pump standbys and/or bypass first assistant.

(b) The standbys must be documentable in an audit.

(c) For each ECMO or VAD case, one (1) case credit will be awarded for:

(1) Initiating and maintaining on shift (four (4) hours minimum);

(2) Managing one (1) shift (eight (8) hours minimum); or

(3) The duration of the case.

(d) Cases performed as the clinical instructor in an accredited program are considered primary perfusions and may be included in this category.

(2)(A) Regular licenses are renewable every two (2) years.

(B) Provisional licenses are renewable for twelve (12) months.

(3) A uniformed service member, veteran, or spouse may have an extension of their perfusion license expiration up to one hundred eighty (180) days following the date of the service member's return from deployment.

(4)(A) The period of completion of the continuing professional education and clinical activities requirements shall be the twenty-four-month period beginning January 1 and ending December 31 of each renewal period.

(B) A licensee who has failed to obtain and report, in a timely fashion, his or her continuing professional education and clinical activities shall not engage in the practice of perfusion unless an extension is obtained pursuant to subdivision (d)(8) of this section.

(5) A uniformed service member, veteran, or spouse may be granted up to one hundred eighty (180) days following the date of the service member's return from deployment to complete the required continuing education.

(6) Each licensee shall certify by signature, under penalty of perjury, that he or she has completed the required units of continuing professional education and clinical activities on the renewal form.

(7)(A) Each licensee shall retain records documenting completion of the continuing professional education and clinical activities requirements for a minimum of three (3) years after the reporting period in which the continuing professional education and clinical activities was completed.

(B) The State Board of Health may conduct an audit of licensees to verify compliance with the continuing professional education and clinical activities requirements.

(C) Licensees shall assist the State Board of Health in its audit by providing timely and complete responses to the State Board of Health's inquiries.

(8)(A)(i) A licensee who cannot complete the continuing professional education and clinical activities requirements because of personal illness, military service, or other circumstances beyond the licensee's control which the State Board of Health deems to be sufficient to impose an insurmountable hardship may apply for an extension of time to complete the continuing professional education and clinical activities requirements.

(ii) Any extension of time to complete the continuing professional education and clinical activities requirements will be granted solely at the discretion of the State Board of Health.

(iii) The licensee must make a written application for extension of time prior to the January 31 deadline or completion of the continuing professional education and clinical activities requirement.

(iv) A processing fee of fifty dollars (\$50.00) shall accompany the application for extension.

(v) The licensee shall provide full and complete written documentation of the grounds supporting the reasons for which an extension is sought.

(vi) A licensee who requests an extension of time to complete the continuing professional education and clinical activities requirements shall not engage in the active practice of perfusion unless the:

(a) State Board of Health grants the licensee's request for extension; and

(b) Licensee received express written authorization to engage in the active practice of perfusion.

(B)(i) The State Board of Health, solely in its discretion, may grant an extension based on unforeseeable circumstances beyond the licensee's control which impose an insurmountable hardship precluding the licensee from obtaining the required continuing professional education and clinical activities.

(ii) At a minimum, the licensee must provide written documentation explaining specifically and in detail the:

(a) Nature of the circumstances that were unforeseeable and beyond the licensee's control;

(b) Period during which the circumstances were in existence;

(c) Number of continuing professional education units and clinical activities earned in the reporting period; and

(d) Licensee's plan for completing the balance of the requirements.

(iii) The State Board of Health, in its discretion, shall determine if the situation described in the licensee's application constitutes unforeseeable circumstances beyond the licensee's control which impose an unsurmountable hardship precluding the licensee from obtaining the required continuing professional education and clinical activities.

(C)(i) The licensee who is granted an extension of time shall:

(a) Complete the balance of his or her continuing professional education and clinical activities requirements no later than six (6) months after return to work immediately following the end of the reporting period for which an extension was sought; and

(b) Provide the State Board of Health with written documentation of his or her completion of the continuing education requirements no later than August

10 immediately following the end of the reporting period for which an extension was sought.

(ii) Failure to complete the continuing professional education and clinical activities requirements by January 31 or to file the documentation with the State Board of Health by August 10 shall constitute a violation of subdivision (d)(4) of this section.

(9) A licensee who has failed to complete and report in a timely fashion the required units of continuing professional education and clinical activities and engages in the active practice of perfusion without the express written authority of the State Board of Health shall be deemed to have engaged in the unauthorized practice of perfusion.

(e) Provisional license.

(1) A license as a provisional licensed perfusionist may be issued by the State Board of Health to a person who has:

- (A) Successfully completed an accredited perfusion education program recognized by ABCP or its successor;
- (B) Filed an application;
- (C) Paid an application fee; and
- (D) Submitted such evidence of successful completion of the education and clinical activities as required by the State Board of Health.

(2)(A) A provisional licensed perfusionist shall be under the supervision and direction of a licensed perfusionist at all times during which the provisional licensed perfusionist performs perfusion.

(B) Rules adopted by the State Board of Health governing such supervision and direction may not require the immediate physical presence of the supervising licensed perfusionist.

(3)(A) A person qualified for a provisional license under this part is entitled to receive a license as a provisional licensed perfusionist.

(B) A provisional licensed perfusionist shall comply with other pertinent sections of this part.

(4)(A) A provisional license:

(i) Is valid for twelve (12) months from the date it is issued; and
(ii) May be renewed annually not more than two (2) years by the same procedure established for renewal under this section.

(B) The application for renewal shall be signed by a supervising licensed perfusionist.

(f) Reciprocity.

(1) License shall be granted to the licensee of another state if the applicant:

(A) Holds a current certification issued by the ABCP in good standing, or its successor; and

(B) Pays the appropriate application fee.

(2) The applicant shall not have had a license revoked, suspended, or put on probation for:

(A) An act of bad faith; or

(B) A violation of:

(i) Law;

(ii) Rule; or

(iii) Ethics.

(3) The applicant shall be sufficiently competent in the field of perfusion.

(4)(A) An applicant shall submit:

(i) An application;

(ii) The required fee; and

(iii) Required documentation.

(B) Required documentation shall include:

(i) A copy of ABCP certification;

(ii) Evidence of current and active licensure in that state;

(iii) A list of the names of all states in which the applicant is currently licensed or has been previously licensed; and

(iv) Letters of good standing or other information from each state in which the applicant is currently or has ever been licensed showing that the applicant

has not had his or her license revoked, suspended, or put on probationary status as described above.

(5) The applicant shall receive a temporary license immediately upon submission of the:

- (A) Application;
- (B) Required fee; and
- (C) Required documentation.

(g) Displaying of license.

(1) Perfusionists shall display their license in an appropriate and public manner.

(2) Maintain on file in the healthcare facility in which the licensed perfusionists is working, an accurate copy of the perfusionists license.

(h) Fees.

(1) Initial application for consideration of licensure which requires a complete certification of stated qualifications and credentials in the application shall be one hundred fifty dollars (\$150).

(2) Renewal of license occurring every two (2) years which checks the current credentials and clinical activities of the already licensed perfusionist shall be one hundred dollars (\$100).

(3) Fee for a provisional license is one hundred fifty dollars (\$150) annually.

(4) Fee for reciprocity is one hundred dollars (\$100).

(5) Fee for an extension is fifty dollars (\$50.00).

(i) Continuing education and clinical activities.

(1) Licensed perfusionists and provisional licensed perfusionists shall meet the continuing education and clinical activities requirements of the American Board of Cardiovascular Perfusion or its successor.

(2) A uniformed service member may be granted additional time to complete.

(3) See subdivisions (c)(4)(B) and (C) of this section.

(j) Procedure on denial, reprimand, probation, civil penalties, suspension, or revocation.

(1) Grounds for discipline.

(A) The State Board of Health shall have sole authority to deny or suspend any license to practice perfusion issued by the State Board of Health or applied for in accordance with the provisions of this part, or to otherwise discipline a licensee upon determination of:

(i) Any violation of Arkansas Code § 17-104-101 et seq.;

(ii) Any violation of a rule or code of ethics adopted by the State Board of Health; or

(iii) Unprofessional conduct, which includes, but is not limited to:

(a) Incompetence or gross negligence in carrying out usual perfusion functions;

(b) A conviction of practicing perfusion without a license or a provisional license;

(c) The use of advertising relating to perfusion in a manner which violates state law;

(d) Procuring a license or provisional license by fraud, misrepresentation, or mistake;

(e) Making or giving any false statement or information in connection with the application for the license or provisional license;

(f) A plea of guilty, nolo contendere, or a finding of guilt of a felony listed under Arkansas Code § 17-2-102 or any offense substantially related to the qualifications, functions, or duties of a perfusionist, in which event the record shall be conclusive evidence; or

(g) Impersonating an applicant or acting as proxy for an applicant in any examination required under Acts 1999, No. 888, for the issuance of a license.

(B) If a license suspension is probated, the department may require the licensee to:

(i) Report on a regular basis to the department on matters that are the basis of the probation;

(ii) Limit the practice to the areas prescribed by the department; or
(iii) Continue the person's professional education until the licensee reaches a degree of skill in those areas that are the basis of the probation, satisfactory to the department.

(2) **Proceedings.** Proceedings shall be as follows:

(A)(i) Opportunity for licensee or applicant to have a hearing.

(ii) Except as provided in subdivision (j)(2)(B)(iv) of this section, every licensee or applicant for a license shall be afforded notice and an opportunity to be heard before the State Board of Health.

(iii) The State Board of Health shall have authority to take any action the effect of which would be to:

(a) Deny a license after examination for any cause other than failure to pass an examination;

(b) Withhold the renewal or reinstatement of a license for any cause;

(c) Revoke a license;

(d) Suspend a license;

(e) Probate a license;

(f) Reprimand a license; and

(g) Levy civil penalties; and

(B)(i) Suspension of license without prior notice or hearing.

(ii) If the department finds that the continued practice by a licensee of the occupation or profession for which he or she is licensed will create an immediate hazard to the public, the State Board of Health may suspend the license pending a hearing without prior notice of hearing.

(iii) When the department contemplates taking any action, it shall give a written notice to the licensee at the last address of record, which contains a statement:

(a) That the department has sufficient evidence which, if not rebutted or explained, will justify the department in taking the contemplated action;

(b) Indicating the general nature of the evidence and detailed allegations of violation the licensee is charged with; and

(c) That a hearing will be held on a date certain, no sooner than twenty (20) days after the mailing of the notice to the last address of record and at the hearing the State Board of Health will receive the evidence.

(iv) When the department shall summarily suspend a license pending a hearing, it shall give written notice of the general nature of the evidence and detailed allegations of the violation the licensee is charged with:

(a) That the department has sufficient evidence which, if not rebutted or explained, will justify revocation of the license by the State Board of Health;

(b) Indicating the general nature of the evidence against the licensee;

(c) That, based on the evidence indicated, the department has determined the continuation of practice of the occupation or profession of the licensee will create an immediate hazard to the public and has therefore suspended the license of the licensee effective as the date such notice is served; and

(d) That the State Board of Health will then set an immediate hearing for a full evidentiary presentation by the licensee and the department.

(v) In any hearing before the State Board of Health involving the suspension or revocation of the license, the burden shall be on the department to present competent evidence to justify the action taken or proposed by the State Board of Health.

(k) Civil penalties.

(1) The State Board of Health may, after providing notice and a hearing, levy civil penalties in an amount not to exceed five hundred dollars (\$500) for each violation against those individuals or entities found to be in violation of this section.

(2) Each day of violation shall be a separate offense.

(3) These penalties shall be in addition to other penalties which may be imposed by the State Board of Health pursuant to this section.

(4) Unless the penalty assessed under this subsection is paid within thirty (30) calendar days following the date for an appeal from the order, the State Board of Health shall have the power to file suit in the Pulaski County Circuit Court to obtain a judgment for the amount of penalty not paid.

(l) Method of serving notice of hearing.

(1) Any notice required may be served either:

(A) Personally or by an officer authorized by law to serve process; or

(B) By registered mail or certified mail with return receipt requested, directed to the licensee or applicant at his or her last known address.

(2) If notice is served personally, it shall be deemed to have been served at the time when the officer delivers the notice to the person addressed.

(3) Where notice is served by registered or certified mail, it shall be deemed to have been served on the date borne by the return receipt showing delivery of the notice to the addressee or refusal of the addressee to accept this notice.

(4) An attempt to serve notice at the last address of record shall constitute official notice.

(m) **Venue of hearing.** State Board of Health hearings held under provisions of this part shall be conducted at the State Board of Health office or elsewhere in Pulaski County.

(n) Hearings public.

(1) All hearings under this section shall be open to the public.

(2) At all such hearings at least a quorum of the State Board of Health shall be present to hear and determine the matter.

(o) **Rights of persons entitled to hearing.** A person entitled to be heard pursuant to this section shall have the right to:

(1) Be represented by counsel;

(2) Present all relevant evidence by means of witnesses, books, papers, and documents;

(3) Examine all opposing witnesses on any matter relevant to the issues;

(4) Have subpoenas and subpoenas duces tecum issued to compel the attendance of witnesses and the production of relevant books, papers, and documents upon making written request therefore to the State Board of Health; and

(5) Have a transcript of the hearing made at his or her own expense.

(p) **Powers of the State Board of Health in connection with hearing.** In connection with any hearing held pursuant to the provisions of this section, the State Board of Health or its hearing officer shall have power to:

(1) Have counsel to develop the case;

(2) Administer oaths or affirmations to witnesses called to testify;

(3) Take testimony;

(4) Examine witnesses;

(5) Have a transcript of the hearing made at the expense of the State Board of Health; and

(6) Direct a continuance of any case.

(q) **Rules of evidence.**

(1) In proceedings held pursuant to this part, the State Board of Health may:

(A) Admit any evidence; and

(B) Give probative effect to evidence that is of a kind commonly relied on by reasonably prudent men and women in the conduct of serious affairs.

(2) The State Board of Health may in its discretion exclude incompetent, irrelevant, immaterial, and unduly repetitious evidence.

(r) **Manner and time of rendering decision.**

(1) After a hearing has been completed, the members of the State Board of Health shall:

(A) Proceed to consider the case; and

(B) As soon as practicable, render their decision.

(2) If the hearing was conducted by a hearing officer, the decision shall be rendered by the State Board of Health at a meeting where quorums of the members of the State Board of Health are present and participating in the decision.

(3) In any case the decision must be rendered within ninety (90) days after the hearing.

(s) Service of written decision.

(1) Within a reasonable time after the decision is rendered, the State Board of Health shall serve upon the person whose license is involved a written copy of the decision, either personally or by registered mail to the last known address.

(2) If the decision is sent by registered mail, it shall be deemed to have been served on the date borne on the return receipt.

(t) Procedure where persons fail to request or appear for hearing. If a person duly notified fails to appear for a disciplinary hearing and no continuance has been granted, the:

(1) State Board of Health, or its hearing officer, shall hear the evidence of such witnesses as may have appeared; and

(2) State Board of Health shall proceed to consider the matter and dispose of it on the basis of the evidence before it in the manner required.

(u) Contents of decision. The decision of the State Board of Health shall contain:

(1) Findings of fact made by the State Board of Health;

(2) Conclusions of law reached by the State Board of Health;

(3) The order of the State Board of Health based upon these findings of fact and conclusions of law; and

(4) A statement informing the person whose license is involved of his or her right to request a judicial review and the time within which such request must be made.

(v) Initial licensure fee waiver.

(1)(A) Pursuant to Acts 2021, No. 725, an applicant may receive a waiver of the initial licensure fee, if eligible.

(B) Eligible applicants are applicants who:

(i) Are receiving assistance through the:

(a) Arkansas, or current state of residence equivalent, Medicaid Program;

(b) Supplemental Nutrition Assistance Program (SNAP);

- (c) Special Supplemental Nutritional Program for Women, Infants, and Children (WIC);
 - (d) Temporary Assistance for Needy Families Program (TEA); or
 - (e) Lifeline Assistance Program (LAP);
- (ii) Were approved for unemployment within the last twelve (12) months; or
- (iii) Have an income that does not exceed two hundred percent (200%) of the federal poverty income guidelines.

(2)(A) Applicants shall provide documentation showing their receipt of benefits from the appropriate state agency.

(B) For Medicaid, SNAP, WIC, TEA, or LAP, documentation from the Department of Human Services, or current state of residence equivalent agency.

(C) For unemployment benefits approval in the last twelve (12) months, the Division of Workforce Services, or current state of residence equivalent agency.

(D) For proof of income, copies of all Internal Revenue Service forms indicating applicant's total personal income for the most recent tax year, e.g., W-2, 1099, etc.

(3) Applicants shall attest that the documentation provided under subdivision (v)(2)(B) of this section is a true and correct copy, and fraudulent or fraudulently obtained documentation shall be grounds for denial or revocation of license.

Authority. Arkansas Code §§ 17-104-103, 17-104-104, 17-14-303.

Codification Notes. "ACLS" means advanced cardiac life support.

17 CAR § 46-104. Code of ethics.

(a) Preamble.

(1) The purpose of a code of ethics is to acknowledge a profession's acceptance of the responsibility and trust conferred upon it by society and to recognize the internal obligations inherent in that trust.

(2) The following paragraphs delineate the standards governing the conduct of perfusionists in their professional interactions with:

- (A) Patients;
- (B) Colleagues;
- (C) Other health professionals; and
- (D) The general public.

(3) Realizing that no code can encompass all ethical responsibilities of the perfusionists, this enumeration of obligations in the code of ethics:

- (A) Is not comprehensive; and
- (B) Does not constitute a denial of the existence of other obligations, equally imperative, and not specifically mentioned herein.

(4) This code of ethics shall be binding on all perfusionists in Arkansas.

(b) **Canon 1.** Perfusionists must uphold the dignity and honor of the profession, accept its disciplines, and expose without hesitation illegal, unethical, and incompetent conduct.

INTERPRETIVE STATEMENTS

- Perfusionists are part of a collaborative effort to deliver proper health care to the patient under the perfusionist's care.
- The perfusionist has a personal, as well as a professional, obligation to protect and safeguard the patients from illegal and/or unethical actions or the incompetence of any person.
- The perfusionist must maintain personal integrity and establish the appropriate means to fully protect his or her freedom of conscience for the delivery of services to the patient.
- A perfusionist who demonstrates incompetence or illegal conduct as it pertains to the code of ethics shall be exposed to the proper authorities.

(c) **Canon 2.** Perfusionists shall:

- (1) Respect the patients' rights and dignity; and

(2) Uphold the doctrine of confidentiality regarding privileged patient information.

INTERPRETIVE STATEMENTS

- Information about the patient’s clinical situation will be kept confidential, unless otherwise required by law, in order to protect the welfare of an individual or community. Written guidelines or protocols of an institution or department may be instrumental in deciding the manner in which confidential information is handled for release.

(d) Canon 3.

(1) Perfusionists shall provide only those services for which they are qualified.

(2) Perfusionists shall not misrepresent in any manner, either directly or indirectly, their:

- (A) Skills;
- (B) Training;
- (C) Professional credentials;
- (D) Identity; or
- (E) Services.

INTERPRETIVE STATEMENTS

- Perfusionists will accept responsibility for the exercise of sound judgment in the delivery of services to the patient and shall be accountable for the quality of the service provided.
- Perfusionists will provide accurate information about the profession and services they provide, as well as the perfusionists’ own qualifications.
- The perfusionists shall not engage in practices beyond their competence or training.
- Perfusionists shall not delegate to a less qualified person any activity which requires the unique skill, knowledge, and judgment of a formally educated perfusionist. Services rendered by

supportive personnel will be under the supervision of a formally educated perfusionist.

(e) **Canon 4.** Perfusionists shall strive to improve their medical knowledge and skills on a continuing basis.

INTERPRETIVE STATEMENTS

- Perfusionists shall support quality didactic and clinical education.
- Professional conduct will be maintained toward perfusionists' peers, students, medical staff, and patients.
- Perfusionists shall participate in educational activities, either by individual study or through continuing education, which will enhance their basic knowledge in order to continue to provide quality health care to the patient.

(f) **Canon 5.** Perfusionists shall maintain and promote high standards for perfusion practice which may include:

- (1) Education;
- (2) Research; and
- (3) Scientific presentations and/or publications.

(g) **Canon 6.**

(1) A perfusionist shall:

- (A) At all times hold the well-being of the patient to be paramount; and
- (B) Not act in such a way as to bring the member's interests into conflict with the patient's interests.

(2) A perfusionist shall deliver healthcare services without regard to:

- (A) Race;
- (B) Color;
- (C) Creed;
- (D) National origin;
- (E) Sex;
- (F) Age;
- (G) Religion;

- (H) Sexual preference; or
- (I) Physical and/or mental condition.

INTERPRETIVE STATEMENTS

- A perfusionist's professional practice and adherence to ethical principles shall take preference over business practices. Perfusionists shall place service before material gain.
- A perfusionist shall fully disclose to clientele other business practices that may appear as conflicts of interest to clientele and/or the public. These may include but are not limited to:
 - 1) Consultant for fee;
 - 2) Clinical instructor (support staff for industry);
 - 3) Sales representative;
 - 4) Technical advisor;
 - 5) Lecture for fee; and
 - 6) Acceptance of fees, gratuities, or funding from industry.

In that the ultimate concern is to improve patient care, it is our position that clinicians engaged in the practice of cardiopulmonary bypass are required to and must be allowed to periodically evaluate the equipment which is utilized in cardiopulmonary bypass in the effort of continuously improving patient care which should include not only patient outcomes but safety as well.

To this end, the State Board of Health holds that each perfusionist has the following ethical and professional responsibilities:

A. The perfusionist being the most qualified individual by training, education, experience, and job description has the responsibility to evaluate, recommend, select, and implement the components of the extracorporeal circuit so that patient safety and care are optimized;

B. The perfusionist will always attempt to fairly evaluate all competing products and services, with the principal selection criteria being that of regard for patient safety and well-being; and

C. The perfusionist shall always base any decision on product and service selection on clinical evaluations and documented clinical and scientific data.

In conclusion, it is the responsibility of the perfusionist to make decisions regarding the selection of clinical products with the patient as the primary concern.

Authority. Arkansas Code § 17-104-103.