### 267 CMR 4.00: SCOPE OF PRACTICE AND STANDARDS OF CONDUCT

#### Section

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### 4.01: Scope of Practice for Full Licensees

- (1) A fully licensed perfusionist may perform those functions and services which are necessary for the support, treatment, measurement or supplementation of a patient's cardiovascular, circulatory or respiratory systems or other organs, or any combination of those organs or systems; or which ensure the safe management of that patient's physiological functions through the monitoring and analysis of those bodily systems.
- (2) The functions and services which may properly be performed by a fully licensed perfusionist include, but are not necessarily limited to, the following:
  - (a) use of extracorporeal circulation and associated therapeutic and/or diagnostic technologies;
  - (b) use of long-term cardiopulmonary support techniques, including extracorporeal carbon dioxide removal and extracorporeal membrane oxygenation and associated therapeutic and/or diagnostic technologies;
  - (c) use or performance of counterpulsation;
  - (d) use or performance of ventricular assistance;
  - (e) use or performance of autotransfusion;
  - (f) use or performance of blood conservation techniques;
  - (g) use or performance of myocardial preservation and/or organ preservation techniques in connection with the performance of procedures involving cardiopulmonary bypass;
  - (h) use or performance of extracorporeal life support services or techniques;
  - (i) use or performance of isolated limb perfusion services;
  - (j) use or performance of techniques involving blood management, advanced life support and other related functions;
  - (k) administration of pharmacological and therapeutic agents through the extracorporeal circuit or through an intravenous line pursuant to an order from a duly licensed physician;
  - (l) administration of anesthetic agents through the extracorporeal circuit or through an intravenous line pursuant to an order from, and under the direct supervision of, an anesthesiologist;
  - (m) use or performance of physiologic monitoring;
  - (n) use or performance of central hypothermia or hyperthermia;
  - (o) use or performance of hemoconcentration, hemodilution or hemofiltration;
  - (p) performance of anticoagulation monitoring;
  - (q) peformance of blood gas and blood chemistry monitoring and/or analysis;
  - (r) performance of hematologic monitoring and/or analysis; and
  - (s) the observation of signs and symptoms related to perfusion services, the determination of whether such signs or symptoms exhibit abnormal characteristics, and the implementation of appropriate reporting of the same;
  - (t) the implementation of perfusion protocols, initiation of emergency procedures or implementation of changes in such emergency procedures in connection with any of the functions or services described in 267 CMR 4.01(2)(a) through (j); and
  - (u) participation in clinical research protocols.

- (3) All functions and services performed by a fully licensed perfusionist shall be performed pursuant to the orders of, and under the supervision of, a licensed physician.
- (4) *In lieu* of a patient-specific order from a licensed physician, a fully licensed perfusionist may perform any or all of the functions and services enumerated in 267 CMR 4.01(1) or (2) pursuant to a written perfusion protocol which has been adopted or approved by the health care facility in which that licensed perfusionist performs perfusion functions or services, as long as:

#### 4.01: continued

- (a) The protocol has been developed by a fully licensed perfusionist, a licensed physician who is actively engaged in the practice of cardiovascular surgery, and an anesthesiologist, a licensed physician who is actively engaged in the practice of cardiovascular anesthesia;
- (b) The protocol adequately addresses the conditions and circumstances under which licensed perfusionists may perform the particular perfusion function(s) or service(s) covered by the protocol, and the manner in which such functions or services will be performed;
- (c) The protocol is reviewed and updated annually by the individuals who developed the protocol; and
- (d) The protocol is made available to the Board for review immediately upon request from any duly authorized representative of the Board.
- (5) A fully licensed perfusionist may implement perfusion protocols, make changes in such protocols, and/or institute emergency procedures, based upon his or her observations and analysis of signs and symptoms related to the implementation of perfusion services.

## 4.02: Scope of Practice for Provisionally Licensed Perfusionists

An individual who holds a provisional license to practice perfusion issued by the Board pursuant to 267 CMR 3.06: *Provisional Licensure* may perform any or all of the functions and/or services enumerated in 267 CMR 4.01, as long as:

- (1) He or she performs all such functions and/or services in accordance with all applicable requirements of 267 CMR 4.01; and
- (2) He or she performs all such functions and/or services under the supervision and direction of a perfusionist who holds a full license to practice perfusion issued by the Board and who provides the level of supervision required by 267 CMR 3.06(7).

## 4.03: Scope of Practice for Students in Perfusion Training Programs

A student who is duly enrolled in a perfusion education program may perform any or all of the functions and/or services enumerated in 267 CMR 4.01, as long as:

- (1) The perfusion education program in which the student is enrolled meets the educational standards established by the Accreditation Committee for Perfusion Education and which has been approved by the Commission on Accreditation of Allied Health Education Programs or its successor, or which has otherwise been approved by the Board;
- (2) The student is performing all such perfusion services as an integral part of his or her course of study in that perfusion education program;
- (3) The student performs all such perfusion services under the direct supervision of a perfusionist who has been duly licensed by the Board pursuant to 267 CMR 3.04: *Application for Full Licensure* or 3.05: *Application for Full Licensure by Reciprocity*;
- (4) The licensed perfusionist who is providing supervision to the student pursuant to 267 CMR 3.02(5)(c) has been specifically assigned to provide such supervision to that student, and is on duty and immediately available in the same room in which the student is performing or providing the perfusion services;
- (5) The student is designated and identified by a title which clearly indicates his or her status

as a student or trainee; and

(6) All applicable requirements of 267 CMR 4.01 are otherwise met.

# 4.04: Standards of Conduct

(1) <u>Use of Title</u>. A perfusionist shall only identify himself or herself as a perfusionist while in possession of a current license.

### 4.04: continued

- (2) <u>Practice under a False or Different Name</u>. A perfusionist shall engage in the practice of perfusion only under the name in which such license has been issued.
- (3) <u>Competency</u>. A perfusionist shall only assume those duties and responsibilities within his or her scope of practice and for which he or she has acquired and maintained necessary knowledge, skills, and abilities.
- (4) <u>Falsification of Information</u>. A perfusionist shall not knowingly falsify, or attempt to falsify, any documentation or information related to any aspect of licensure as a perfusionist, the practice of perfusion, or the delivery of services.
- (5) <u>Alteration or Destruction of Records</u>. A perfusionist shall not inappropriately destroy or alter any record related to his or her work as a perfusionist.
- (6) <u>Discrimination</u>. A perfusionist shall not withhold or deny care or services based on age, ancestry, marital status, sex, sexual orientation, gender identity, race, color, religious creed, national origin, diagnosis, or mental or physical disability.
- (7) <u>Patient Abuse, Neglect, Mistreatment, or Other Harm</u>. A perfusionist shall not abuse, neglect, mistreat, or otherwise harm a patient.
- (8) <u>Patient Dignity and Privacy</u>. A perfusionist shall safeguard a patient's dignity and right to privacy.
- (9) <u>Patient Confidential Information</u>. A perfusionist shall safeguard patient information from any person or entity, not entitled to such information. A perfusionist shall share appropriate information only as required by law or authorized by the patient for the well-being or protection of the patient.
- (10) Exercise of Undue Influence. A perfusionist shall not exercise undue influence on a patient, including the promotion or sale of services, goods, appliances or drugs, in such a manner as to exploit the patient for financial gain for the benefit of the perfusionist or a third party.
- (11) <u>Fraudulent Practices</u>. A perfusionist shall not engage in any fraudulent practice including, but not limited to, billing for services not rendered or submitting false claims for reimbursement.
- (12) <u>Aiding Unlawful Activity</u>. A perfusionist shall not aid any person in performing any act prohibited by law or regulation.
- (13) <u>Circumvention of Law</u>. A perfusionist shall not receive from, or offer, give, or promise anything of value or benefit to, any official to circumvent any federal, state and local laws and regulations.
- (14) <u>Practice While Impaired</u>. A perfusionist shall not act as a perfusionist while impaired by any substance or condition.
- (15) <u>Unlawful Acquisition and Possession of Controlled Substances</u>. A perfusionist shall not unlawfully obtain or possess controlled substances.
- (16) <u>Duty to Report to the Board</u>. A perfusionist has a duty to report to the Board if he or she directly observes another perfusionist or health care professional engaged in any of the

# following:

- (a) abuse of a patient;
- (b) practice of any health care worker under his or her supervision while impaired by substance use;
- (c) diversion of controlled substances.

## 4.04: continued

(17) <u>Compliance with Agreements and Orders</u>. A perfusionist shall comply with all provisions contained in any agreement he or she has entered into with the Board or in any order issued to him or her by the Board.

# REGULATORY AUTHORITY

267 CMR 4.00: M.G.L. c. 112, § 219.