CS/SB 414 by HR, Negron; (Similar to CS/H 0171) Osteopathic Physicians

CS/SB 376 by HR, Flores; (Similar to CS/H 0309) Radiological Personnel

SB 1040 by Bogdanoff; (Compare to CS/H 1313) Dental Hygienists

The Florida Senate

COMMITTEE MEETING EXPANDED AGENDA

BUDGET SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES APPROPRIATIONS Senator Negron, Chair Senator Rich, Vice Chair

MEETING DATE: Wednesday, February 1, 2012

TIME: 10:15 —11:15 a.m.

PLACE: Toni Jennings Committee Room, 110 Senate Office Building

MEMBERS: Senator Negron, Chair; Senator Rich, Vice Chair; Senators Gaetz, Garcia, Oelrich, Richter, and

Sobel

BILL DESCRIPTION and TAB BILL NO. and INTRODUCER SENATE COMMITTEE ACTIONS

COMMITTEE ACTION

Continuation of Tuesday, January 31, 2012 meeting:

1 CS/SB 414

Health Regulation / Negron (Similar CS/H 171)

Osteopathic Physicians; Revising the requirements for licensure or certification as an osteopathic physician in this state; revising provisions relating to registration of physicians, interns, and fellows, etc.

HR 12/07/2011 Fav/CS

BHA 01/24/2012 Not Considered

BHA 01/31/2012

BHA 02/01/2012 Favorable

BC

2 CS/SB 376

Health Regulation / Flores (Similar CS/H 309)

Radiological Personnel; Providing titles for persons who hold a certificate as a specialty technologist; authorizing a person holding a certificate as a specialty technologist to perform the specific duties allowed for a specialty technologist as defined by the Department of Health; authorizing the Department of Health to adopt rules for recognizing certain national organizations that certify, license, or register specialty technologists; providing for an applicant for certification as a specialty technologist to be certified only by endorsement rather than by examination, etc.

HR 01/12/2012 Fav/CS

BHA 01/31/2012

BHA 02/01/2012 Favorable

BC

Favorable

Yeas 6 Nays 0

Favorable

Yeas 6 Nays 0

COMMITTEE MEETING EXPANDED AGENDA

Budget Subcommittee on Health and Human Services Appropriations Wednesday, February 1, 2012, 10:15—11:15 a.m.

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
3	SB 1040 Bogdanoff (Compare CS/H 1313)	Dental Hygienists; Authorizing a dental hygienist, under the supervision of a dentist, to administer local anesthesia to certain patients if the hygienist meets certain criteria; providing the criteria that a dental hygienist must meet in order to administer local anesthesia; authorizing a dental hygienist to apply for certification to administer local anesthesia; requiring the Department of Health to issue the certificate under certain circumstances; authorizing the board to charge a fee, not to exceed a specified amount, to defray the cost of verifying criteria and issuing a certificate; providing that the certificate is part of the dental hygienist's permanent record; requiring that the certificate be prominently displayed; authorizing a dental hygienist to administer local anesthesia, etc. HR 01/19/2012 Favorable BHA 01/31/2012 BHA 02/01/2012 Favorable BC	Favorable Yeas 6 Nays 1
4	Agency for Health Care Administrat Agency for Persons with Disabilities Department of Children and Family Department of Elder Affairs Department of Health Department of Veterans' Affairs	•	Discussed
	Public Testimony		Discussed
	Other Related Meeting Documents		

The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By	: The Professio	nal Staff o	f the Budget Su	ocommittee on Hea	th and Human	Services Appropriations
BILL:	CS/SB 414					
INTRODUCER:	R: Health Regulation Committee and		Senator Negron			
SUBJECT:	Osteopathic	Physicia	ns			
DATE:	January 19,	2012	REVISED:			
ANALYST Davlantes Bradford 3. 4. 5.		Stoval Hendo		REFERENCE HR BHA BC	Fav/CS Favorable	ACTION
	Please A. COMMITTEE B. AMENDMEN	SUBSTI	TUTE X	for Additional Statement of Substatement amendant Amendments were Significant amendal	tantial Change nents were rec recommende	es ommended d

I. Summary:

The bill revises requirements for licensure to practice osteopathic medicine in Florida for physicians who have not actively practiced osteopathic medicine for more than the previous two years and for new, unlicensed physicians who completed internship, residency, or fellowship more than two years ago. Any such physician whose present ability and fitness to practice osteopathic medicine has been adversely affected by the interruption of his or her active practice of osteopathic medicine, as determined by the Board of Osteopathic Medicine (the board), may, at the board's discretion, be denied licensure in Florida, granted a license with restrictions, or granted full licensure upon fulfillment of certain conditions.

The bill removes the requirement that a person desiring to be registered to practice as a resident physician, intern, or fellow must pass all parts of the examination conducted by the National Board of Osteopathic Medical Examiners and complete one year of residency, and deletes obsolete and redundant nomenclature.

The fiscal impact of this bill is insignificant.

This bill substantially amends ss. 459.0055 and 459.021, F.S.

II. Present Situation:

General Licensure Requirements

Osteopathic physicians are licensed to practice under ch. 459, F.S. Licensure requirements for osteopathic physicians are set forth in s. 459.0055, F.S. An applicant must:

- Submit the appropriate application form and fees;
- Be at least 21 years of age and of good moral character;
- Complete at least 3 years of pre-professional post-secondary education;
- Not have committed or be under investigation for any violation of ch. 459, F.S., unless the board determines the violation does not adversely affect the applicant's fitness and ability to practice osteopathic medicine;
- Not have had a medical license revoked, suspended, or otherwise acted against by the
 licensing authority of any jurisdiction unless the board determines the underlying action does
 not adversely affect the applicants current ability and fitness to practice osteopathic
 medicine;
- Have received satisfactory evaluations from his or her residency or fellowship training
 programs unless poorer evaluations are deemed to not adversely affect the applicant's current
 ability and fitness to practice osteopathic medicine;
- Undergo a background check with the Department of Health (the department);
- Have graduated from a medical college approved by the American Osteopathic Association;
- If graduated from an osteopathic medical school after 1948, have completed at least 1 year of residency training in an approved hospital; and
- Pass all parts of the examination conducted by the National Board of Osteopathic Medical Examiners or other examination approved by the board no more than five years before applying for licensure in Florida.

Reciprocity does exist for an osteopathic physician licensed in another state if the physician's license was initially issued within five years of passing an examination conducted by the National Board of Medical Examiners or its equivalent. This reciprocity does not extend to physicians who have been out of practice for more than two years, unless this period of inactivity is not considered to have adversely affected the physician's fitness and ability to practice osteopathic medicine.

If an applicant has committed a violation of any part of this chapter or has a license suspended, revoked, or otherwise acted against by a licensing authority in a different jurisdiction, the board may choose to provide that applicant a restricted osteopathic medical license.

Special Licenses

Limited licenses may be issued to osteopathic physicians who do not hold an active license to practice osteopathic medicine in Florida but have been licensed in any jurisdiction or U.S. territory in good standing for at least 10 years. Limited licenses may only be used to practice for public agencies or institutions or 501(c)(3) nonprofit organizations in medically underserved areas of the state.¹

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¹ Section 459.0075, F.S.

Temporary certificates may be issued to osteopathic physicians who are currently licensed in any jurisdiction or who have practiced as a military physician for at least 10 years and have been honorably discharged. Temporary certificates may be used to practice for county health departments, correctional facilities, Veterans' Affairs clinics, or other department-approved institution that serves a population of critical need or in underserved areas. Temporary certificates may also be used to practice for a limited time in an area of physician-specialty, demographic, or geographic need as determined by the State Surgeon General.²

Osteopathic faculty certificates may be issued without examination to osteopathic physicians who are licensed in other states and otherwise meet the standards for licensure described under s. 459.0055, F.S. A faculty certificate may be used to practice medicine only in conjunction with the holder's teaching duties at an accredited school of osteopathic medicine and its affiliated teaching hospitals and clinics.³

Renewal of Licenses and Certificates

Osteopathic medical practice licenses and certificates are renewed biennially. Applicants for renewal must submit the appropriate paperwork and fee, complete a physician workforce survey provided by the department, submit to a background check, and complete a certain number of hours of continuing education.⁴

Educational Pipeline for Osteopathic Physicians

The training of osteopathic physicians begins with a four-year bachelor's degree, followed by four years of medical school. A potential osteopathic physician must also pass a series of examinations developed and administered by the National Board of Osteopathic Medical Examiners. Level 1, and Level 2-CE, and Level 2-PE must be passed during medical school; Level 3 may only be taken after graduation from medical school. Passage of all three levels of the National Board of Osteopathic Medical Examiners examination or a similar examination is required for licensure of osteopathic physicians in all states.

Terminology for Medical Residents

After graduation from medical school, new physicians enter residency programs for further practical training in the various specialties of medicine. Physicians must complete at least one year of residency training before they may be licensed in Florida.⁶ Residency programs range in length from three to seven years depending on the educational institution and medical specialty.

² Section 459.0076, F.S.

³ Section 459.0077, F.S.

⁴ Section 459.008, F.S.

⁵ National Board of Osteopathic Medical Examiners, *COMLEX-USA Bulletin of Information 2011-2012*, available at http://www.nbome.org/docs/comlexBOI.pdf (last visited on November 2, 2011).

⁶ Section 459.0055(1)(1), F.S., concerning osteopathic physicians, and s. 458.311(1)(f), F.S., concerning allopathic physicians.

A resident in his or her first year of training is called an intern. A resident in a training year other than the first is simply called a resident. After completing residency, a physician can enter a fellowship program which provides further specialized training in a particular area. Such physicians are called fellows.

Another name for a resident is a house physician. Assistant resident physicians do not exist.

III. Effect of Proposed Changes:

Section 1 amends s. 459.0055, F.S., relating to general licensure requirements for osteopathic physicians. Licensure provisions related to reciprocity for osteopathic physicians licensed in other states is moved from subsection (2) to subsection (1).

The bill grants the board licensure options for:

- Osteopathic physicians licensed in other states who have not actively practiced medicine for more than the previous two years, or
- New, unlicensed physicians who completed internship, residency, or fellowship more than two years ago;
- And physicians whose present ability and fitness to practice osteopathic medicine has been adversely affected by the interruption of their active practice of osteopathic medicine, as determined by the board.

Such physicians may be denied licensure in Florida; be granted a license with restrictions such as the requirement to practice under the supervision of another physician; or be fully licensed upon completion of reasonable conditions, such as remedial training as prescribed by the board. Currently, an osteopathic physician licensed in another state may only be granted a full license, notwithstanding a break in practice for two or more years if the board determines the interruption has not adversely affected the osteopathic physician's ability and fitness to practice osteopathic medicine.

Section 2 amends s. 459.021, F.S., to remove obsolete and redundant language concerning nomenclature for physicians in training. It also removes language requiring persons desiring to be registered to practice as resident physicians, interns, or fellows to have passed all parts of the examination conducted by the National Board of Osteopathic Medical Examiners and to have completed 1 year of residency.

Section 3 provides the bill will take effect on July 1, 2012.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of the bill have no impact on public records or open meetings issues under the requirements of Article I, Section 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The department indicates it may experience a slight increase in workload by evaluating the competencies of certain physicians. However, such evaluations will help improve healthcare in the state by ensuring that all licensed osteopathic physicians are fit to practice independently, and the fiscal impact will be negligible.⁷

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Health Regulation on December 7, 2011:

The CS provides more general guidelines to the board concerning the evaluation for licensure of osteopathic physicians who have been out of active practice for more than two years. Any physician whose present ability and fitness to practice osteopathic medicine has been adversely affected by the interruption of his or her active practice of osteopathic medicine, as determined by the board, may, at the board's discretion, be denied licensure in Florida, granted a license with restrictions, or granted full licensure

⁷ Department of Health, 2012 Bill Analysis, Economic Statement, and Fiscal Note for SB 414. A copy of this analysis is on file with the Senate Health Regulation Committee.

upon fulfillment of certain conditions. This replaces language in SB 414 which stated that the board could only deny licensure or grant restricted licensure to those osteopathic physicians who the board determined may lack clinical competency, possess diminished or inadequate skills, lack necessary medical knowledge, or exhibit patterns of deficits in clinical decisionmaking.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

By the Committee on Health Regulation; and Senator Negron

588-01571-12 2012414c1

A bill to be entitled
An act relating to osteopathic physicians; amending s.
459.0055, F.S.; revising the requirements for
licensure or certification as an osteopathic physician
in this state; amending s. 459.021, F.S.; revising
provisions relating to registration of physicians,
interns, and fellows; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

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Section 1. Paragraph (m) of subsection (1) and subsection (2) of section 459.0055, Florida Statutes, are amended to read: 459.0055 General licensure requirements.—

- (1) Except as otherwise provided herein, any person desiring to be licensed or certified as an osteopathic physician pursuant to this chapter shall:
- (m) Demonstrate that she or he has obtained a passing score, as established by rule of the board, on all parts of the examination conducted by the National Board of Osteopathic Medical Examiners or other examination approved by the board no more than 5 years before making application in this state or, if holding a valid active license in another state, that the initial licensure in the other state occurred no more than 5 years after the applicant obtained a passing score on the examination conducted by the National Board of Osteopathic Medical Examiners or other substantially similar examination approved by the board.
- (2) If the applicant holds a valid active license in another state and it has been more than 2 years since the active

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 ${\bf CODING:}$ Words ${\bf stricken}$ are deletions; words ${\bf \underline{underlined}}$ are additions.

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30	practice of osteopathic medicine, or if an applicant does not
31	hold a valid active license to practice osteopathic medicine in
32	another state and it has been more than 2 years since completion
33	of a resident internship, residency, or fellowship, and the
34	board determines that the interruption of the osteopathic
35	physician's practice of osteopathic medicine has adversely
36	affected the osteopathic physician's present ability and fitness
37	to practice osteopathic medicine, the board may:
38	(a) Deny the application;
39	(b) Issue a license having reasonable restrictions or
40	conditions that may include, but are not limited to, a
41	requirement for the applicant to practice under the supervision
42	of a physician approved by the board; or
43	(c) Issue a license upon receipt of documentation
44	confirming that the applicant has met any reasonable conditions
45	of the board which may include, but are not limited to,
46	completing continuing education or undergoing an assessment of
47	skills and training. For an applicant holding a valid active
48	license in another state, he or she shall submit evidence of the
49	active licensed practice of medicine in another jurisdiction in
50	which initial licensure must have occurred no more than 5 years
51	after the applicant obtained a passing score on the examination
52	conducted by the National Board of Medical Examiners or other
53	substantially similar examination approved by the board;
54	however, such practice of osteopathic medicine may have been
55	interrupted for a period totaling no more than 2 years or for a
56	longer period if the board determines that the interruption of
57	the osteopathic physician's practice of osteopathic medicine for
58	such longer period has not adversely affected the osteopathic

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physician's present ability and fitness to practice osteopathic

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Section 2. Subsections (1), (3), (4), and (6) of section 459.021, Florida Statutes, are amended to read:

459.021 Registration of resident physicians, interns, and fellows; list of hospital employees; penalty.-

- (1) Any person who holds a degree of Doctor of Osteopathic Medicine from a college of osteopathic medicine recognized and approved by the American Osteopathic Association who desires to practice as a resident physician, assistant resident physician, house physician, intern, or fellow in fellowship training which leads to subspecialty board certification in this state, or any person desiring to practice as a resident physician, assistant resident physician, house physician, intern, or fellow in fellowship training in a teaching hospital in this state as defined in s. 408.07(45) or s. 395.805(2), who does not hold an active license issued under this chapter shall apply to the department to be registered, on an application provided by the department, before commencing such a training program and shall remit a fee not to exceed \$300 as set by the board.
- (3) Every hospital or teaching hospital having employed or contracted with or utilized the services of a person who holds a degree of Doctor of Osteopathic Medicine from a college of osteopathic medicine recognized and approved by the American Osteopathic Association as a resident physician, assistant resident physician, house physician, intern, or fellow in fellowship training registered under this section shall designate a person who shall furnish, on dates designated by the board, in consultation with the department, to the department a

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CODING: Words stricken are deletions; words underlined are additions.

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88	list of all such persons who have served in such hospital during
89	the preceding 6-month period. The chief executive officer of
90	each such hospital shall provide the executive director of the
91	board with the name, title, and address of the person
92	responsible for filing such reports.
93	(4) The registration may be revoked or the department may
94	refuse to issue any registration for any cause which would be a

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- refuse to issue any registration for any cause which would be a ground for its revocation or refusal to issue a license to practice osteopathic medicine, as well as on the following arounds:
- (a) Omission of the name of an intern, resident physician, assistant resident physician, house physician, or fellow in fellowship training from the list of employees required by subsection (3) to be furnished to the department by the hospital or teaching hospital served by the employee.
- (b) Practicing osteopathic medicine outside of a bona fide hospital training program.
- (6) Any person desiring registration pursuant to this section shall meet all the requirements of s. 459.0055, except paragraphs (1)(1) and (m).

Section 3. This act shall take effect July 1, 2012.

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The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By	: The Profession	onal Staff o	of the Budget Sul	bcommittee on Hea	Ith and Human	Services Appropriations
BILL:	CS/SB 376					
INTRODUCER:	R: Health Regulation Committee and			Senator Flores		
SUBJECT:	Radiologica	al Personi	nel			
DATE:	January 26,	2012	REVISED:			
ANAL Davlantes Bradford 3.	YST	Stoval Hendo		REFERENCE HR BHA BC	Fav/CS Favorable	ACTION
5.	Please	see Se	ection VIII.	for Addition	al Informa	tion:
	A. COMMITTE 3. AMENDMEN			Statement of Subs Technical amendn Amendments were Significant amend	nents were receive recommende	ommended d

I. Summary:

This bill allows for the certification of nationally-recognized specialties of radiologic technologist which are currently not recognized in statute. The bill updates existing definitions and certification procedures to encompass emerging technologies and specialties.

This bill contains a fee not to exceed \$100 that will be charged to the applicant for the certification and will cover the costs of the new certification. The department indicates the fiscal impact of the bill is insignificant and can be handled within existing resources.

SB 376 substantially amends sections 468.301, 468.302, 468.303, 468.304, 468.306, and 468.3065 of the Florida Statutes.

The effective date of the bill is July 1, 2012.

II. Present Situation:

"Radiologic technologist" is defined in s. 468.301(15), F.S., to mean a person, other than a licensed practitioner, who is qualified by education, training, or experience to use radiation on

human beings under the specific direction and general supervision of a licensed practitioner in each particular case. "Licensed practitioner" means any Florida-licensed physician, podiatrist, chiropractor, or naturopath.

Florida regulations concerning radiologic technologists are found in part IV of ch. 468, F.S., and Rule chapter 64E-3, F.A.C. The Department of Health (DOH) Bureau of Radiation Control within the Division of Environmental Health is responsible for the certification and regulation of radiologic technologists.

Types and Duties of Radiologic Technologists Defined in Statute

A basic X-ray machine operator can perform general diagnostic radiographic and general fluoroscopic procedures, excluding nuclear medicine and radiation therapy procedures, under the direct supervision of a licensed practitioner.²

A basic X-ray machine operator-podiatric medicine can perform certain radiographic functions, excluding nuclear medicine and radiation therapy procedures, which are within the scope of practice of a podiatrist. Such an operator may only practice under the direct supervision of a licensed podiatrist.³

A general radiographer means anyone who is employed and certified in radiography, other than a basic X-ray machine operator or a basic X-ray machine operator-podiatric medicine.⁴ General radiographers may not perform nuclear medicine procedures but are permitted to perform computed tomography (CT) examinations. They can also assist certified radiation therapy technologists with certain radiation therapy procedures after undergoing appropriate training and certification.⁵

A limited computed tomography technologist may only perform diagnostic CT examinations.⁶

A radiation therapy technologist may administer certain forms of radiation therapy (X radiation, ionizing radiation from particle accelerators, and external beam teletherapy) to human beings for therapeutic or simulation purposes.⁷

A nuclear medicine technologist may conduct measurements of radioactivity and administer radiopharmaceuticals to human beings for diagnostic and therapeutic purposes. A nuclear medicine technologist may also administer X radiation from a combination nuclear medicine-CT device if that radiation is administered as an integral part of a nuclear medicine procedure and the technologist has received device-specific training. Otherwise the technologist is not permitted to operate a CT device. 8

¹ Sections 468.3003 and 468.301(11), F.S.

² Sections 468.301(1) and 468.302(3)(a), F.S.

³ Sections 468.301(2) and 468.302(3)(c), F.S.

⁴ Section 468.301(9), F.S.

⁵ Sections 468.302(3)(d) and 468.302(3)(g), F.S., and Rule 64E-3.3001, F.A.C.

⁶ Section 468.302(3)(e), F.S.

⁷ Section 468.302(3)(f), F.S.

⁸ Section 468.302(3)(g), F.S., and Rule 64E-3.0033, F.A.C.

A radiologist assistant is an advanced-level radiologic technologist who works under the supervision of a radiologist to enhance patient care by assisting the radiologist in the medical imaging environment. ^{9,10} Under supervision of a radiologist, a radiologist assistant may perform patient assessment, patient management, and selected clinical imaging procedures. Radiologist assistants are not certified to interpret any radiological image or to perform any nuclear medicine or radiation therapy procedures. ^{11,12}

Certification of Radiologic Technologists

Certification requirements for radiologic technologists are:¹³

- Pay appropriate application and examination fees.
- Be at least 18 years of age at the time of application.
- Be at least a high school graduate or hold a GED.
- Have good moral character.
- Complete an educational training program in the requested category of certification. The
 training program must come from a hospital or postsecondary academic institution which has
 been recognized and accepted by the American Registry of Radiologic Technologists
 (ARRT) or the Nuclear Medicine Technology Certification Board and certified by the
 DOH.¹⁴
- Complete 4 hours of HIV/AIDS training. 15
- Pass the appropriate licensing examination or meet the eligibility requirements for a certificate by endorsement.
- Submit documentation of any criminal offense of which the applicant has been found guilty, regardless of adjudication.
- Submit documentation of any final disciplinary action taken against the applicant by a licensing or regulatory body in any jurisdiction, by a national organization, or by a specialty board recognized by the DOH.

Additional certification procedures apply in certain situations:

• In lieu of completing an approved educational training program from a hospital or postsecondary academic institution, an applicant for basic X-ray machine operator certification may read *Radiography Essentials for Limited Practice*, *2nd edition*, published by Elsevier Saunders, or take any substantially equivalent course which provides instruction

⁹ Sections 468.301(17), F.S.

¹⁰ A radiologist, as defined in s. 468.301(16), F.S., is a physician specializing in radiology certified by the American Board of Radiology, the American Osteopathic Board of Radiology, the British Royal College of Radiology, or the Canadian College of Physicians and Surgeons.

¹¹ Section 468.302(3)(h), F.S.

¹² Further details on the duties of radiologist assistants can be found in Rule 64E-3.0032, F.A.C., and in the *Radiologist Assistant Role Delineation- January 2005*, published by the American Registry of Radiologic Technologists, available at http://www.acr.org/secondarymainmenucategories/quality_safety/radiologistassistant/arrtroledelineationdocumentdoc7.aspx (last visited on September 29, 2011).

¹³ Section 468.304, F.S.

¹⁴ Rules 64E-3.002(1) and 64E-3.003(1)(a), F.A.C., and s. 468.305, F.S.

¹⁵ Rule 64E-3.003(4), F.A.C.

on all of the subjects listed in the ARRT's January 2006 edition of *Content Specifications for the Examination for the Limited Scope of Practice in Radiography*. ^{16,17}

- A currently certified basic X-ray machine operator applying for general radiographer certification must complete a DOH-approved educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually practiced in a hospital.
- A currently certified general radiographer applying for nuclear medicine technologist certification must complete a DOH-approved educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually practiced in a hospital. ¹⁸
- A currently certified general radiographer who wishes to also assist with radiation therapy procedures must complete at least 560 hours of training following a DOH-prescribed curriculum at a radiation therapy school accredited by the Joint Review Committee on Education in Radiologic Technology. 19,20
- A radiologist assistant currently certified by the ARRT is not required to complete the educational training program or the examination and is instead issued a certificate by endorsement.²¹
- No further limited CT certificates were awarded after October 1, 1984. Certificates issued before this time are valid if they are renewed appropriately under s. 468.309, F.S. 22

Written examinations are offered semiannually and test applicants on patient positioning, technique, and radiation protection skills related to each category of certification. Examinations may be developed and administered by the DOH or by a contracting organization, including national organizations which certify radiologic technologists. The passing score is 65 percent for the basic X-ray machine operator examination and 75 percent for all other examinations. ²³

The DOH may issue a certificate by endorsement to practice as a radiologic technologist to an applicant who can demonstrate that he or she holds a current license or certification to practice radiologic technology in another jurisdiction and that the requirements for such license or certification are equivalent to those required for certification in Florida.²⁴

All operators of radiation equipment are not required to be registered radiologic technologists (as part of the ARRT or another national or state organization), but all must be certified by the state before they may practice.²⁵ Radiologic technologists are not required to be certified if they are currently students under direct supervision of a licensed radiologic technologist, are employed by a United States governmental agency, or are licensed under ch. 483, F.S., to only perform

¹⁶ Rule 64E-3.003(d), F.A.C.

¹⁷ ARRT, Content Specifications for the Examination for the Limited Scope of Practice in Radiography, January 2006, available at http://www.doh.state.fl.us/mqa/rad-tech/LIM CS 2006.pdf (last visited on September 29, 2011).

¹⁸ Rule 64E-3.002(1), F.A.C., and ss. 468.304(3)(e)2.c.-d. and 468.305, F.S.

¹⁹ Rule 64E-3.0031(1)(b), F.A.C.

²⁰ Department of Health, *Therapy Assistance by General Radiographer Training Program Curriculum*, March 2002, available at http://www.doh.state.fl.us/mqa/rad-tech/Thrpy_Assistance_Cur.pdf (last visited on September 29, 2011).

²¹ Sections 468.304(3)(e)2.e., 468.306, and 468.3065(1), F.S.

²² Section 468.304(5), F.S.

²³ Section 468.306, F.S., and Rule 64E-3.005, F.A.C.

²⁴ Section 468.3065(1), F.S., and Rule 64E-3.006, F.A.C.

²⁵ Sections 468.302(1) and 468.305, F.S.

nuclear medicine procedures.²⁶ Temporary certificates can also be issued by the DOH in certain situations.²⁷

Renewal of Certification and Continuing Education

All radiologic technology certificates must be renewed every 2 years by submitting a renewal application and fee to the DOH. ²⁸ Twelve classroom hours of continuing education per recertification period are also required. ²⁹

Certificates that have been expired for more than 2 but less than 10 years may be renewed by submitting a renewal application and fee as well as a late fee. Continuing education requirements in this case are 3 classroom hours for each 6 months for which the certificate has been expired. These classroom hours are in addition to the 12 hours that are normally required to renew a certificate. A certificate which has been expired for more than 10 years cannot be renewed. The applicant must repeat the entire certification process. ³⁰

Disciplinary Action

The following actions are subject to administrative fines by the DOH and probation, suspension, or revocation of certification:³¹

- Procuring or renewing a certificate via fraudulent means.
- Having a certificate suspended or revoked by a national organization, a DOH-recognized specialty board, or certification authority of another jurisdiction.
- Failing to notify the DOH within 30 days of revocation or suspension of certification by a
 national organization, a DOH-recognized specialty board, or certification authority of another
 jurisdiction.
- Being convicted, regardless of adjudication, of a crime that relates to the practice of radiologic technology or of any other crime against a person.
- Filing false reports or failing to file a report required by state or federal law. This applies only to reports filed in the capacity of the certificate holder.
- Engaging in unprofessional conduct.
- Inability to adequately practice radiologic technology due to chemical dependence or alcohol addiction.
- Failing to comply with the recommendations of the DOH's impaired practitioner program.
- Testing positive for unauthorized substances on an employment-related drug screen.
- Violating or not reporting another's violation of the rules and laws governing radiologic technologists.

²⁸ Section 468.309, F.S. Special allowances are made for certificate holders or their spouses are who called to active military duty. The certificate holder remains in good standing throughout the period of active duty and has up to 6 months after discharge to become recertified following the normal renewal process.

²⁶ Sections 468.302(6) and (7), F.S.

²⁷ Section 468.307(2), F.S.

²⁹ Rule 64E-3.008, F.A.C. Further details on the exact on the exact curricular requirements of continuing education are available in Rule 64E-3.009, F.A.C.

³⁰ Section 468.3095, F.S., and Rule 64E-3.010, F.A.C.

³¹ Section 468.3101, F.S. Further details of minimum and maximum disciplinary actions and fines associated with each violation are found in Rule 64E-3.011, F.A.C.

Employing an uncertified individual to practice radiologic technology in this state.

The following actions are considered misdemeanors of the second degree:³²

- Practicing radiologic technology without the appropriate certification, including practicing with a certificate that has been suspended or revoked.
- Practicing radiologic technology by an unsupervised student or allowing this to occur.
- Obtaining certification via fraudulent means.
- Using any name or title to imply that a person is a certified radiologic technologist when he or she is not.
- Knowingly concealing violations of rules and laws governing radiologic technologists from law enforcement.
- Employing an uncertified individual to practice radiologic technology in this state.

Advisory Council on Radiation Protection

Section 468.314, F.S. establishes a sixteen-person advisory council within the DOH. This council provides recommendations to the DOH on such issues as minimum requirements for certification, a certificate holders' code of ethics, curricula for continuing education courses, the duties of each different type of radiologic technologist.

National Radiologic Technology Organizations and Certifications

Nationally, there are three main organizations which certify radiologic technologists: the American Registry of Radiologic Technologists (ARRT), the American Registry for Diagnostic Medical Sonography (ARDMS), and the Nuclear Medicine Technology Certification Board (NMTCB). The ARRT is the largest with approximately 300,000 members. Among other duties, these organizations create and administer exams in various radiologic technologist specialties to provide national standards of competency.³³

To be eligible to take a certification examination, an applicant must graduate from an accredited educational training program and fulfill specific clinical competencies. The specific examination prerequisites vary depending on the certification organization. Policies for recertification and continuing education are also provided by each organization.³⁴

The following certifications are available nationally for radiologic technologists: From the ARRT:³⁵

- Primary certifications
 - o Radiography
 - Radiation Therapy

³² Section 468.311, F.S.

³³ American Society of Radiologic Technologists, Alphabet Soup: A Guide to Organizations in Radiologic Technology, available at https://www.asrt.org/content/aboutasrt/alphabet soup.aspx (last visited on September 30, 2011).

³⁴ For information on ARRT prerequisites, visit https://www.arrt.org/Certification (last visited on September 30, 2011). For information on ARDMS prerequisites, visit http://www.ardms.org/files/downloads/Prerequisite Chart.pdf (last visited on September 30, 2011). For information on NMTCB prerequisites, visit http://www.nmtcb.org/about/eligReq.php (last visited on September 30, 2011).

³⁵ ARRT, ARRT Certification, available at https://www.arrt.org/Certification (last visited on September 30, 2011).

- Nuclear Medicine Technology
- Magnetic Resonance Imaging
- Sonography
- Post-primary (subspecialty) certifications
 - Computed Tomography
 - o Magnetic Resonance Imaging
 - Mammography
 - Quality Management
 - Sonography
 - o Breast Sonography
 - Vascular Sonography
 - o Cardiac-Interventional
 - Vascular-Interventional
 - o Bone Densitometry
- Advanced practice certifications
 - o Radiologist Assistant

From the ARDMS:³⁶

- Primary certifications
 - Diagnostic Medical Sonographer
 - o Diagnostic Cardiac Sonographer
 - Vascular Technologist
- Specialty certifications
 - Abdominal Sonography
 - Breast Sonography
 - Neurosonology
 - Obstetrics and Gynecology Sonography
 - Adult Echocardiography
 - o Pediatric Echocardiography
 - o Fetal Echocardiography

From the NMTCB:³⁷

- Nuclear Medicine Technologist
- Nuclear Cardiology Technologist
- Positron Emission Tomography Technologist

Other certifications are also available from several smaller national radiologic technologist organizations.

III. Effect of Proposed Changes:

This bill allows for the certification of nationally-recognized specialties of radiologic technologist which are currently not recognized in statute.

³⁶ ARDMS, *Credentials and Examinations*, http://www.ardms.org/credentials_examinations/ (last visited on September 30, 2011).

³⁷ NMTCB, Welcome, http://www.nmtcb.org/root/default.php (last visited on September 30, 2011).

Section 1 amends s. 468.301, F.S., to create the term "specialty technologist" to mean a subtype of radiologic technologist subject to specific certification requirements under s. 468.304, F.S.

Section 2 amends s. 468.302, F.S., to provide guidelines for the titles and title abbreviations that specialty technologists may use to designate the various certifications they hold in Florida. The DOH is given rulemaking authority to specify these titles and title abbreviations. This section also allows the DOH, by rule, to define the duties each type of specialty technologist may perform in the state.

Section 3 amends s. 468.303, F.S., to give the DOH rulemaking authority to recognize national organizations that certify, license, or register specialty technologists under educational and examination requirements that demonstrate technical and safety competencies for the scope of practice for that specialty.

Section 4 amends s. 468.304(3), F.S., to require that an applicant for specialty technologist certification demonstrate that he or she is currently certified by or registered with a national radiologic technology organization in that specialty.

Section 5 amends s. 468.306, F.S., to provide that applicants for specialty technologist certification may only be certified by endorsement as provided in s. 468.3065, F.S. Applicants for specialty technologist certification may not be certified through the examination procedures otherwise provided under s. 468.306, F.S.

Section 6 amends s. 456.3065, F.S. to provide for certification of specialty technologists by endorsement. This means that specialty technologists who are registered with or certified by a national radiologic technology organization in some practice specialty will have that certification recognized in Florida as long as the national organization is recognized by the DOH. The application fee for a certificate by endorsement to practice as a specialty technologist may not exceed \$100.

Section 7 provides an effective date of July 1, 2012.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Article I, Section 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

A fee not to exceed \$100 is to be remitted by the applicant.

B. Private Sector Impact:

Technologists seeking DOH recognition of any national certifications would be required to pay an application fee. Recognizing additional categories of specialty certification would provide employers with greater information about the competencies of a prospective employee and would also increase the quality of care delivered during specialized radiologic technology procedures by ensuring that technologists had received appropriate training before being allowed to work with patients.

C. Government Sector Impact:

The DOH anticipates a small workload increase to process applications for recognition of additional nationally-recognized certifications, which will be offset by fees for an overall insignificant fiscal impact.³⁸ The department indicates that this can be absorbed within its existing resources.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Health Regulation on January 12, 2012:

The CS eliminates the amendment of ss. 458.3003 and 468.301(4), F.S., the declaration of policy and definition of "radiation," to revert to current statutory language. The CS changes the phrase "national registry" to "national organization" throughout the bill to maintain consistency with existing statute.

³⁸ Department of Health, 2012 Bill Analysis, Economic Statement, and Fiscal Note for SB 376. A copy of this document is on file with the Senate Health Regulation Committee.

Section 468.303, F.S., is amended to give the DOH rulemaking authority to recognize national organizations that certify, license, or register specialty technologists under educational and examination requirements that demonstrate technical and safety competencies for the scope of practice for that specialty.

Section 468.3065, F.S., is amended to eliminate the requirement that, in order for a nationally-licensed, -registered, or -certified specialty technologist to be issued a certificate by endorsement in Florida, criteria for licensure, certification, or registration by the national organization must be deemed substantially equivalent by the DOH to those for specialty technologists established in statute or rule.

Several technical changes are also made.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

By the Committee on Health Regulation; and Senator Flores

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A bill to be entitled An act relating to radiological personnel; amending s. 468.301, F.S.; defining the term "specialty technologist" as it relates to the certification of radiological personnel; amending s. 468.302, F.S.; providing titles for persons who hold a certificate as a specialty technologist; authorizing a person holding a certificate as a specialty technologist to perform the specific duties allowed for a specialty technologist as defined by the Department of Health; requiring that the duties fall within the scope of practice of the specialty as set by the national organization for the particular advanced, postprimary, or specialty area; amending s. 468.303, F.S.; authorizing the Department of Health to adopt rules for recognizing certain national organizations that certify, license, or register specialty technologists; amending s. 468.304, F.S.; providing criteria for certification as a specialty technologist; amending s. 468.306, F.S.; providing for an applicant for certification as a specialty technologist to be certified only by endorsement rather than by examination; amending s. 468.3065, F.S.; authorizing the department to issue a certificate by endorsement to practice as a specialty technologist to an applicant who meets certain criteria; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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31	Section 1. Subsection (18) is added to section 468.301,
32	Florida Statutes, to read:
33	468.301 Definitions.—As used in this part, the term:
34	(18) "Specialty technologist" means a person, other than a
35	licensed practitioner, who is qualified by education and
36	certification, as set forth in s. 468.304, to use radiation on
37	human beings under the specific direction and general
38	supervision of a licensed practitioner.
39	Section 2. Paragraph (h) is added to subsection (2) and
40	paragraph (i) is added to subsection (3) of section 468.302,
41	Florida Statutes, to read:
42	468.302 Use of radiation; identification of certified
43	persons; limitations; exceptions
44	(2)
45	(h) A person holding a certificate as a specialty
46	technologist may use the title "Certified Radiologic
47	$\underline{\text{Technologist-X''}} \text{ or the letters "CRT-X''} \text{ after his or her name,}$
48	where "X" represents a single- or multiple-letter designation
49	signifying the advanced, postprimary, or specialty area of
50	radiologic technology, such as "CT" for computed tomography or
51	"PET" for positron emission tomography, in which the person is
52	certified by a national organization that is recognized by the
53	department. The department shall approve these letter
54	designations by rule for each area, consistent with the
55	designation used by the national organization.
56	
57	No other person is entitled to so use a title or letters
58	contained in this subsection or to hold himself or herself out

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in any way, whether orally or in writing, expressly or by implication, as being so certified.

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(i) A person holding a certificate as a specialty technologist may perform the specific duties allowed for a specialty technologist as defined by rule of the department. These duties must fall within the scope of practice for the specialty as set by the national organization for that particular advanced, postprimary, or specialty area.

Section 3. Section 468.303, Florida Statutes, is amended to read:

468.303 Rules.-

- (1) The department may is authorized to make such rules, not inconsistent with law, as may be necessary to carry out the provisions of this part. The department may is authorized to establish by rule fees to be paid for application, examination, reexamination, certification, and renewal, and for recordmaking and recordkeeping, provided that no fee shall exceed the amounts provided in this part. Fees shall be based on department estimates of the revenue required to implement the provisions of this part. The department may, based upon estimates of revenue required to implement this part, establish separate fee schedules for application, examination, reexamination, certification, and renewal for the different categories of certification.
- (2) The department may adopt rules for recognizing national organizations that certify, license, or register specialty technologists under educational and examination requirements that demonstrate technical and safety competencies for the scope

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88	of practice for that specialty.
89	Section 4. Section 468.304, Florida Statutes, is amended to
90	read:
91	468.304 Certification.—The department shall certify any
92	applicant who meets the following criteria:
93	(1) Pays to the department a nonrefundable fee that may not
94	exceed \$100, plus the actual per-applicant cost to the
95	department for purchasing the examination from a national
96	organization.
97	(2) Submits a completed application on a form specified by
98	the department. An incomplete application expires 6 months after
99	initial filing. The application must include the social security
100	number of the applicant. Each applicant shall notify the
101	department in writing of his or her current mailing address.
102	Notwithstanding any other law, service by regular mail to an
103	applicant's last reported mailing address constitutes adequate
104	and sufficient notice of any official departmental communication
105	to the applicant.
106	(3) Submits satisfactory evidence, verified by oath or
107	affirmation, that she or he:
108	(a) Is at least 18 years of age at the time of application;
109	(b) Is a high school, vocational school, technical school,
110	or college graduate or has successfully completed the
111	requirements for a graduate equivalency diploma (GED) or its
112	equivalent;
113	(c) Is of good moral character;
114	(d) Has passed an examination as specified in s. 468.306 or
115	meets the requirements specified in s. 468.3065; and
116	(e)1. Has successfully completed an educational program,

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which program may be established in a hospital licensed pursuant to chapter 395 or in an accredited postsecondary academic institution which is subject to approval by the department as maintaining a satisfactory standard; or

- 2.a. With respect to an applicant for a basic X-ray machine operator's certificate, has completed a course of study approved by the department with appropriate study material provided the applicant by the department;
- b. With respect to an applicant for a basic X-ray machine operator-podiatric medicine certificate, has completed a course of study approved by the department, \underline{if} provided that such course of study \underline{is} shall be limited to \underline{the} that information necessary to perform radiographic procedures within the scope of practice of a podiatric physician licensed pursuant to chapter 461;
- c. With respect only to an applicant for a general radiographer's certificate who is a basic X-ray machine operator certificateholder, has completed an educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually and customarily practiced in a hospital, which educational or training program complies with the rules of the department;
- d. With respect only to an applicant for a nuclear medicine technologist's certificate who is a general radiographer certificateholder, has completed an educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually and customarily practiced in a hospital, which educational or training program complies with the rules of the department; $\frac{1}{2}$

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e. With respect to an applicant for a radiologist
assistant's certificate, who demonstrates to the department that
he or she holds a current certificate or registration as a
radiologist assistant granted by the American Registry of
Radiologic Technologists; or-

f. With respect to an applicant for a specialty technologist's certificate, demonstrates to the department that he or she is currently certified by or registered with a national organization that is recognized by the department in an advanced, postprimary, or specialty area of radiologic technology, such as computed tomography or positron emission tomography.

- (4) Submits complete documentation of any criminal offense in any jurisdiction of which the applicant has been found guilty, regardless of whether adjudication of guilt was withheld, or to which the applicant has pled guilty or nolo contendere.
- (5) Submits complete documentation of any final disciplinary action taken against the applicant by a licensing or regulatory body in any jurisdiction, by a national organization, or by a specialty board that is recognized by the department. Disciplinary action includes revocation, suspension, probation, reprimand, or being otherwise acted against, including being denied certification or resigning from or nonrenewal of membership taken in lieu of or in settlement of a pending disciplinary case.

The department may not certify any applicant who has committed an offense that would constitute a violation of any of the

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provisions of s. 468.3101 or <u>applicable</u> the rules adopted thereunder if the applicant had been certified by the department at the time of the offense. <u>An</u> No application for a limited computed tomography certificate <u>may not shall</u> be accepted. <u>A person</u> All persons holding <u>a</u> valid computed tomography certificate eertificates as of October 1, 1984, <u>is</u> are subject to the provisions of s. 468.309.

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Section 5. Section 468.306, Florida Statutes, is amended to read:

468.306 Examinations.—An applicant All applicants for certification as a radiologic technologist, basic X-ray machine operator, or basic X-ray machine operator-podiatric medicine, except an applicant those certified pursuant to s. 468.3065, shall be required to pass an examination. An applicant for certification as a specialty technologist shall be certified only in accordance with s. 468.3065. An application for certification as a specialty technologist by examination may not be accepted. In lieu of an examination for a radiologist assistant certificate, the department shall accept a demonstration by the applicant for such a certificate that he or she holds a current certificate or registration as a radiologist assistant granted by the American Registry of Radiologic Technologists. The department may develop or use examinations for each type of certificate. The department may require an applicant who does not pass an examination after five attempts to complete additional remedial education, as specified by rule of the department, before admitting the applicant to subsequent examinations.

(1) The department may contract with organizations that

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204	develop such test examinations. Examinations may be administered
205	by the department or the contracting organization.
206	(2) Examinations shall be given for each type of
207	certificate at least twice a year at such times and places as
208	the department may determine to be advantageous for applicants.
209	(3) All examinations $\underline{\text{must}}$ $\underline{\text{shall}}$ be written and $\underline{\text{must}}$ include
210	positioning, technique, and radiation protection. The department
211	shall either pass or fail each applicant on the basis of his or
212	her final grade. The examination for a basic X-ray machine
213	operator $\underline{\text{must}}$ $\underline{\text{shall}}$ include basic positioning and basic
214	techniques directly related to the skills necessary to safely
215	operate radiographic equipment.
216	(4) A nonrefundable fee not to exceed \$75 plus the actual
217	per-applicant cost for purchasing the examination from a
218	national organization shall be charged for any subsequent
219	examination.
220	Section 6. Subsection (3) is added to section 468.3065,
221	Florida Statutes, to read:
222	468.3065 Certification by endorsement.—
223	(3) The department may issue a certificate by endorsement
224	to practice as a specialty technologist to an applicant who,
225	upon applying to the department and remitting a nonrefundable
226	fee not to exceed \$100, demonstrates to the department that he
227	or she holds a current certificate, license, or registration
228	from a national organization that is recognized by the
229	department to practice in an advanced, postprimary, or specialty
230	area of radiologic technology, such as computed tomography or
231	positron emission tomography.

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Section 7. This act shall take effect July 1, 2012.

The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By	: The Profess	ional Staff o	f the Budget Sub	ocommittee on Hea	Ith and Human S	Services Appropriations
BILL:	SB 1040					
INTRODUCER: Senator B		ogdanoff				
SUBJECT:	Dental Hy	gienists				
DATE:	January 26	5, 2012	REVISED:			
ANAL	YST	STAFF	F DIRECTOR	REFERENCE		ACTION
Davlantes		Stoval	1	HR	Favorable	
Bradford		Hendo	n	BHA	Favorable	
				BC		
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I. **Summary:**

The bill authorizes dental hygienists to administer local anesthesia to nonsedated adult patients under the direct supervision of a licensed dentist. Dental hygienists desiring this privilege must be certified by the Department of Health (DOH) or its designee, complete an approved course in the administration of local anesthesia, and have current training in basic or advanced cardiac life support. The Board of Dentistry within the DOH may charge a certification fee of up to \$35. Certification never expires, and no continuing education is required.

The department indicates that the fiscal impact of this bill is insignificant and can be absorbed with existing resources.

This bill substantially amends ss. 466.017 and 466.023, F.S.

The effective date of this bill is July 1, 2012.

II. **Present Situation:**

Scope of Practice of Dental Hygienists

A dental hygienist is a person licensed by the DOH to render educational, preventive, and therapeutic dental services and any related extra-oral procedures required in the performance of such services. Dental hygienists practice under the supervision of dentists and may be

¹ Section 466.003(4) and (5), F.S.

Section 466.023(1), F.S. Supervision may be direct, indirect, or general.

delegated various remediable tasks – intraoral treatment tasks which are reversible and do not cause an increased risk to the patient. Dental hygienists may not perform any irremediable tasks – intraoral treatment tasks which are irreversible or cause an increased risk to the patient. The administration of anesthetics other than topical anesthetics is considered to be an irremediable task. Dentists remain primarily responsible for any procedures they delegate.

Tasks dental hygienists may perform under supervision include:⁵

- Removing calculus deposits, accretions, and stains from exposed surfaces of the teeth and gingival sulcus,
- Exposing dental x-ray films,
- Applying topical preventive or prophylactic agents,
- Taking impressions for study casts but not for the purpose of fabricating any intraoral restorations or orthodontic appliance,
- Placing periodontal dressings,
- Removing sutures,
- Placing or removing rubber dams,
- Applying cavity liners, varnishes, or bases,
- Polishing clinical crowns of the teeth for the purpose of removing stains but not changing the existing contour of the tooth, and
- Obtaining bacteriological cytological specimens not involving cutting of the tissue.

Dental hygienists may perform the following services without supervision:

- Providing educational or training programs to faculty or staff,
- Applying fluorides,
- Instructing and supervising a patient in oral hygiene care,⁶
- Dental charting,⁷
- Other services which do not involve diagnosis or treatment of dental conditions, and⁸
- Certain diagnostic and treatment procedures, in emergency situations.

Dental hygienists may perform certain additional tasks, including recording patient histories, measuring blood pressure and oral temperature, and applying dental sealants, without the supervision of a dentist when practicing in a health access setting. ¹⁰ Certain disclaimers and other conditions are required. ¹¹

³ Section 466.003, F.S.

⁴ Section 466.024(9), F.S.

⁵ Section 466.023(1), F.S. A full list tasks which may be performed by dental hygienists is found in Rule 64B5-16.006, F.A.C.

⁶ Sections 466.023(3) and 466.024(1), F.S.

⁷ Per s. 466.025, F.S., dental charting refers to recording visual observations of clinical conditions of the oral cavity without the use of X-rays, laboratory tests, or other diagnostic methods of equipment, except the instruments necessary to record visual restoration, missing teeth, suspicious areas, and periodontal pockets. Dental charting does not constitute a patient of record or a medical record.

⁸ Rule 64B5-16.007(4), F.A.C.

⁹ Rule 64B5-16.008, F.A.C. The service may only be provided by a dental hygienist who is currently certified in cardiopulmonary resuscitation (CPR), and the patient must seen by a dentist within 3 days.

¹⁰ A health access setting is defined in s. 466.003(14), F.S., as a program or an institution of the Department of Children and Family Services, the Department of Health, the Department of Juvenile Justice, a nonprofit community health center, a Head

Hygienists must undergo training before performing most remediable tasks. This training may be completed via a DOH-approved course or may have been part of the hygienist's initial training program. ¹² Certain other remediable tasks require at least 6 months of on-the-job training provided by a licensed dentist. ¹³ Dental hygienists practicing prior to April 30, 1980 who were at that time authorized to perform tasks set forth by Board of Dentistry (board) rule may continue to perform those tasks without any additional training. ¹⁴

Dental hygienists are never allowed to prescribe medications, make diagnoses, or conduct treatment planning. ¹⁵

Anesthesia in Dentistry

Currently, only licensed dentists may administer general or local anesthetics within the practice of dentistry. ¹⁶ The primary anesthesia modalities used in dentistry are local anesthesia, general anesthesia, conscious sedation, and nitrous-oxide inhalation analgesia. Local anesthesia leads to diminished pain sensation in a specific area of the body without loss of consciousness, usually achieved with a topically-applied or superficially-injected numbing agent. General anesthesia refers to a controlled state of pharmacologically-induced unconsciousness accompanied by a partial or complete loss of protective reflexes. Conscious sedation means a depressed level of consciousness produced by a pharmacologic substance in which the patient's ability to independently maintain an airway and respond appropriately to physical and verbal stimulation is retained. Nitrous-oxide inhalation anesthesia is produced by the inhalation of a combination of nitrous-oxide and oxygen and causes an altered level of consciousness while retaining the patient's ability to independently maintain an airway and respond appropriately to physical stimulation or verbal command. ¹⁷

Dentists are automatically authorized to administer local anesthesia and may perform general anesthesia, conscious sedation, or pediatric conscious sedation after obtaining the appropriate permit. Dentists may use nitrous-oxide inhalation analgesia after complying with certain rules. Oral medications may not be used for sedation unless the dentist holds a conscious sedation permit, and the administration of propofol, methohexital, thiopental, or etomidate is prohibited without a general anesthesia permit.¹⁸

Start center, a federally qualified health center or look-alike as defined by federal law, a school-based prevention program, a clinic operated by an accredited college of dentistry, or an accredited dental hygiene program in this state if such community service program or institution immediately reports to the Board of Dentistry all violations of s. 466.027, F.S., s. 466.028, F.S., or other practice act or standard of care violations related to the actions or inactions of a dentist, dental hygienist, or dental assistant engaged in the delivery of dental care in such setting.

¹¹ Section 466.024(2)- (5), F.S.

¹² Rule 64B5-16.002(1), F.A.C.

¹³ Rule 64B5-16.002(4), F.A.C.

¹⁴ Rule 64B5-16.010, F.A.C.

¹⁵ Section 466.024(8), F.S.

¹⁶ Section 466.017(1), F.S.

¹⁷ Rule 64B5-14.001, F.A.C.

¹⁸ Rule 64B5-14.002, F.A.C.

An applicant for any type of anesthesia permit must demonstrate training and competency in the desired anesthesia modality, including documentation of administration of that type of anesthetic to twenty actual patients within 2 years prior to application and direct observation of the applicant in various simulated emergency situations by a board-appointed consultant. The locations in which anesthesia will be administered must also be inspected by the board to ensure that conditions are adequate and appropriate personnel have been trained for maximizing patient safety and managing any anesthesia emergencies. The safety and managing any anesthesia emergencies.

Anesthesia permits initially cost \$300 and must be renewed biennially for \$200.²² Dentists must complete 4 hours of continuing education to be eligible for renewal, including 2 hours dealing with the management of medical emergencies.²³ The board reserves the right to re-evaluate the dentist's office and credentials before renewing a permit.²⁴ Once granted, permits only authorize anesthesia administration at the location or locations previously inspected by the board.²⁵

To perform nitrous-oxide inhalation anesthesia, a dentist must complete a 2-day training course described in the American Dental Association's "Guidelines for Teaching and Comprehensive Control of Pain and Anxiety in Dentistry" or its equivalent (with special exceptions for dentists practicing before January 1, 1986) and have adequate equipment with fail-safe features and a 25 percent minimum oxygen flow. Alternatively, a dentist who holds any type of anesthesia permit is also authorized to perform nitrous-oxide inhalation anesthesia.

All dentists using conscious sedation, general anesthesia, or nitrous-oxide inhalation anesthesia must be currently certified in cardiopulmonary resuscitation (CPR) and either Advanced Cardiac Life Support (ACLS) or Advanced Trauma Life Support. Dentists using pediatric conscious sedation must be certified in ACLS, Pediatric Advanced Life Support (for pediatric conscious sedation), or a similar life support program approved by the board.²⁶ Dentists using local anesthesia must be currently certified in either basic CPR for health professionals or ACLS.²⁷

Current Role of Dental Hygienists in Anesthesia

The presence of at least one assistant is required for all general anesthesia, conscious sedation, and pediatric conscious sedation procedures. Dental hygienists may assist with such procedures under the direct supervision of a permitted dentist if they are CPR-certified at the basic life support level. Dental hygienists may monitor nitrous-oxide inhalation analgesia under the direct supervision of a permitted dentist if they additionally complete at least a 2-day training

¹⁹ Rule 64B5-14.005(2), (3), and (8), F.A.C.

²⁰ Rule 64B514.007(2), F.A.C.

²¹ Specific guidelines regarding required equipment, medication, training, and records for facilities in which anesthesia is used can be found in Rule 64B5-14.008, 64B5-14.009, and 64B5-14.010, F.A.C., concerning general anesthesia, conscious sedation, and pediatric conscious sedation, respectively.

²² Rules 64B5-15.017, 64B5-15.018, and 64B5-15.019, F.A.C.

²³ Rule 64B5-14.004(6), F.A.C.

²⁴ Rule 64B5-14.005(7), F.A.C.

²⁵ Rule 64B5-14.005(2), (3), and (8), F.A.C.

²⁶ Rule 64B5-14.003, F.A.C.

²⁷ Section 466.017(4), F.S.

²⁸ Rule 64B5-14.003, F.A.C.

course as described in the American Dental Association's "Guidelines for Teaching and Comprehensive Control of Pain and Anxiety in Dentistry" or an equivalent.²⁹

III. Effect of Proposed Changes:

Section 1 amends s. 466.017, F.S., to allow dental hygienists to administer local anesthesia to nonsedated adult patients under the direct supervision of a dentist, notwithstanding s. 466.003(11), F.S., which states that the administration of any anesthesia other than topical anesthesia is an irremediable task. Such hygienists must complete a course in the administration of local anesthesia offered by a dental or dental hygiene program accredited by the Commission on Dental Accreditation of the American Dental Association or approved by the board. The course must contain 30 hours each of didactic and clinical instruction and must cover the following topics:

- Theory of pain control,
- Selection-of-pain-control modalities,
- Anatomy,
- Neurophysiology,
- Pharmacology of local anesthetics,
- Pharmacology of vasoconstrictors,
- Psychological aspects of pain control,
- Systemic complications,
- Techniques of maxillary anesthesia,
- Techniques of mandibular anesthesia,
- Infection control, and
- Medical emergencies involving local anesthesia.

Dental hygienists must also be currently certified in basic or advanced cardiac life support.

After completing these two requirements, hygienists can apply for local anesthesia certification from the DOH or its designee. A certification fee, if any, may not exceed \$35 and will be used to defray the cost of validating applications and printing certificates. Once granted, local anesthesia certification never has to be renewed but must be prominently displayed at every location at which the hygienist performs local anesthesia.

Section 2 amends s. 466.023, F.S., to add administration of local anesthesia to the list of tasks within a dental hygienist's scope of practice.

Section 3 provides an effective date of July 1, 2012.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

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²⁹ Rule 64B5-14.004(2), F.A.C.

B. Public Records/Open Meetings Issues:

The provisions of the bill have no impact on public records or open meetings issues under the requirements of Article I, Section 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

Up to a \$35 fee may be levied by the Board of Dentistry in the DOH for providing local anesthesia certification to dental hygienists.

B. Private Sector Impact:

Dental hygienists will be able to perform local anesthesia procedures on adult patients under the direct supervision of a licensed dentist.

C. Government Sector Impact:

The DOH will experience a non-recurring increase in workload for rulemaking and updating its practitioner licensing system. They will also experience a recurring increase in workload relating to processing of local anesthesia certifications for dental hygienists as well as in investigating hygienists who are noncompliant with the bill's provisions, and a potential positive fiscal impact from the collection of corresponding certification fees. The department indicates that the workload increase can be handled with existing resources.

VI. Technical Deficiencies:

None.

VII. Related Issues:

Lines 54-55 of the bill state that dental hygienists seeking local anesthesia certification must show evidence of basic or advanced cardiac life support certification. However, the bill does not provide any guidance as to which organizations are authorized to provide this certification nor to whom hygienists must show evidence of their certification. Subsection (4) of s. 466.017, F.S., the section which these lines are amending, provides that dentists who administer anesthesia must be certified in basic CPR for health professionals or ACLS approved by the American Red Cross, the American Heart Association, or a similar course with recertification every 2 years.

The bill does not require dental hygienists to complete any continuing education to maintain anesthesia certification. However, some level of continuing education might be advisable to ensure that hygienists are up to date with current anesthesia modalities.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

Florida Senate - 2012 SB 1040

By Senator Bogdanoff

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25-00525B-12 20121040

A bill to be entitled An act relating to dental hygienists; amending s. 466.017, F.S.; authorizing a dental hygienist, under the supervision of a dentist, to administer local anesthesia to certain patients if the hygienist meets certain criteria; providing the criteria that a dental hygienist must meet in order to administer local anesthesia; authorizing a dental hygienist to apply for certification to administer local anesthesia; requiring the Department of Health to issue the certificate under certain circumstances; authorizing the board to charge a fee, not to exceed a specified amount, to defray the cost of verifying criteria and issuing a certificate; providing that the certificate is part of the dental hygienist's permanent record; requiring that the certificate be prominently displayed; amending s. 466.023, F.S.; authorizing a dental hygienist to administer local anesthesia; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Present subsections (5) and (6) of section 466.017, Florida Statutes, are renumbered as subsections (7) and (8), respectively, and new subsections (5) and (6) are added to that section, to read:

466.017 Prescription of drugs; anesthesia.-

28 (5) Notwithstanding s. 466.003(11), a dental hygienist
29 under the direct supervision of a dentist may administer local

Page 1 of 3

CODING: Words $\underline{\textbf{stricken}}$ are deletions; words $\underline{\textbf{underlined}}$ are additions.

Florida Senate - 2012 SB 1040

	25-00525B-12 20121040
30	anesthesia, including both intraoral block and soft tissue
31	infiltration anesthesia, to a nonsedated patient who is 18 years
32	of age or older, if the following criteria are met:
33	(a) The dental hygienist has successfully completed a
34	course in the administration of local anesthesia which is
35	offered by a dental or dental hygiene program accredited by the
36	Commission on Dental Accreditation of the American Dental
37	Association or approved by the board. A course involving the
38	administration of local anesthesia must contain a minimum of 30
39	hours of didactic instruction and 30 hours of clinical
40	experience. This course involving the administration of local
41	<pre>anesthesia must include instruction in:</pre>
42	1. Theory of pain control.
43	2. Selection-of-pain-control modalities.
44	3. Anatomy.
45	4. Neurophysiology.
46	5. Pharmacology of local anesthetics.
47	6. Pharmacology of vasoconstrictors.
48	7. Psychological aspects of pain control.
49	8. Systemic complications.
50	9. Techniques of maxillary anesthesia.
51	10. Techniques of mandibular anesthesia.
52	11. Infection control.
53	12. Medical emergencies involving local anesthesia.
54	(b) The dental hygienist maintains and shows evidence of
55	<pre>current certification in basic or advanced cardiac life support.</pre>
56	(c) The dental hygienist holds a certificate issued under
57	subsection (6).
58	(6) An individual dental hygienist may apply for

Page 2 of 3

Florida Senate - 2012 SB 1040

25-00525B-12 20121040 certification to administer local anesthesia under subsection 60 (5). According to rules adopted by the board, the department or 61 its designee shall issue a certificate to a dental hygienist who 62 proves that he or she has met the criteria in paragraphs (5)(a) 63 and (b). The board may charge a fee, not to exceed \$35, to 64 defray the cost of verifying that the dental hygienist has met 65 the criteria in paragraphs (5)(a) and (b) and issuing the certificate. The certificate is not subject to renewal but is 67 part of the dental hygienist's permanent record and must be 68 prominently displayed at the location where the dental hygienist 69 is authorized to administer local anesthesia. 70 Section 2. Subsection (7) is added to section 466.023, 71 Florida Statutes, to read: 72 466.023 Dental hygienists; scope and area of practice.-73 (7) A dental hygienist may administer local anesthesia as 74 provided in s. 466.017. 75 Section 3. This act shall take effect July 1, 2012.

Page 3 of 3

No material available

PPEARANCE RECORD



(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) Osteppathic Physicians (if applicable) JOCAUIS __ Amendment Barcode (if applicable) logislative advacace Phone 251-2288 Address Tallahassee, FL 32302 E-mail Mjacquis@finalcal. org Against Information Walve Speaking: Representing FL Medical association Appearing at request of Chair: Yes X No Lobbyist registered with Legislature: Yes While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. This form is part of the public record for this meeting. S-001 (10/20/11) THE FLORIDA SENATE APPEARANCE RECORD (Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) 2-1-2012 Bill Number 5B Topic Name STEPHEN R, WINN Amendment Barcode (if applicable) (if applicable) Job Title EXECUTIVE DIRECTOR. Address 2007 APALACHTE PARKURY

Street

I ALLA HASSE

State

State

Phone 878-7364

E-mail ____ Against Speaking: Representing PLURIDA DSTEDPATHIC MEDICAL ASSOCIATION

Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date	
Topic Radiological Personnel	Bill Number <u>C3</u> /5B376
Name Alison Dudly	Amendment Barcode
Job Title President AB Dudly & ASCS	(1) (1) (1)
Address P.O. Box 428	Phone 850 556-6517
Tall F 32302 City State Zip	E-mail <u>alison dully and dudly and ars</u> orister. Low
Speaking: For Against Information Representing Floulda Radiological Society	7
Appearing at request of Chair: Yes No Lobbyist	registered with Legislature: Ves No
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THE FLORIDA SENATE APPEARANCE REC Complete the Senator of Senate Profession. Copic Radiological Personnel Name James Futch Job Title Env. Administrator Address 4047 Radid Cypress Way	ORD al Staff conducting the meeting) Bill Number (15/5) 376 (if applicable) Amendment Barcode
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Meeting Dale	
Topic HYGIEN LOCAL ANGSTHESIA	Bill Number <u> </u>
Name Rick STRUENSON DAS	Amendment Barcode
Job Title DENTIST	(if applicable
Address 6851 BELFORT OAKS PLACE	Phone 904 281-2566
TOCKSONTILE PL 3221/ City State	E-mail drrqs@bellsoutheno
Speaking: For Against Information	
Representing FLORIDA DENTAL ASSOCIATION	ron
	t registered with Legislature: Yes No
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Topic Pental Hygicalst	Bill Number/040 s
Name Trevor Mask	(if applicable) Amendment Barcode
Job Title Athorney	(if applicable)
Address 215 5- Monra A.	Phone 850-345-8169
Tallahassee FZ 32711 City State Zip	E-mail tmaskecflow. con
Speaking: Against Information	,
Representing FLORIDA DENTA 1461ENT	ASSOCIATION
Appearing at request of Chair: Yes Lobbyist	registered with Legislature: Yes No

APPEARANCE RECORD

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Topic Dental Hygienists	Bill Number 1040 (if applicable)	
Name FRANK R KECKER	Amendment Barcode	
Job Title DDS 7		
Address Lesish Charles Pl Hol	Phone \$00-727-3529	
Street 1850 SAN MARCHART	Phone 800-729-3529 E-mail RECKERO	
Speaking: For Against Information	DDSLAW, Co.	
Speaking: For Against Information Representing Fonda Dental ASSOCIATION	tion	
	registered with Legislature: Yes No	
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THE FLORIDA SENATE APPEARANCE REC 2-1-12 Meeting Date Topic Substance Use Disorder Funding Name Mank Fontaine	ORD nal Staff conducting the meeting) Bill Number (if applicable)	
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THE FLORIDA SENATE APPEARANCE REC 2-1-12 Meeting Date Topic Substance Use Disorder Funding Name Mank Fontaine Job Title EXECUTIVE DIRECTOR Address 2868 MAHAN Drive Street	ORD nel Staff conducting the meeting) Bill Number	
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THE FLORIDA SENATE APPEARANCE REC 2-1-12 Meeting Date Topic Substance Use Disorder Funding Name MANK FATAINE Job Title EXECUTIVE DIRECTOR Address 2868 MAHAN Drive Street TALLAHASSEE, FL 32308 City State Zip	Bill Number (if applicable) Amendment Barcode (if applicable) Phone 878~2196 E-mail	

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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Topic Budget for homeless programs	Bill Number
Name LENORE WILSON	Amendment Barcode
Job Title Executive Director	(у ирупсиону
Address 203 Cloverdale Blud Sireel Fort Walton Bench, Fe 32547 City State Zip	Phone 850-409.3070
Fort Walton Beach, Fe 32547	E-mail raven/en @aol. com
Speaking: Against Information	
Representing OKalowsa Watton Homeless Continue	m) (bre Departunity the
Appearing at request of Chair: Yes Wo Lobbyist	registered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit meeting. Those who do speak may be asked to limit their remarks so that as ma This form is part of the public record for this meeting.	all persons wishing to speak to be heard at this ny persons as possible can be heard. S-001 (10/20/11)
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Deliver BOTH copies of this form to the Senator or Senate Profession Address Address 1323 Stracks	Bill Number (if applicable) Amendment Barcode (if applicable) Phone 407 535 079 E-mail Stew Countral Newborginn, Cot05

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Topic Cuts to independent living	Bill Number		
Name Breon Callins	(if applicable) Amendment Barcode(if applicable)		
Job Title Kuth Advante			
Address 380 SW 63 ave	Phone (954) -601 -7004		
Street City State State	E-mail Brean Wallins Oyaharan		
Speaking: For Against Information	,		
Representing Florida Youth Shine			
Appearing at request of Chair: Yes You Lobbyis	t registered with Legislature: Yes No		
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THE FLORIDA SENATE APPEARANCE RECORD			
(Deliver BOTH copies of this form to the Senator or Senate Profession	nal Staff conducting the meeting)		
Topic Cuts to Independent Living	Bill Number		
Name Grorgina Bodniquez	(if applicable) Amendment Barcode		
Job Title			
Address 510 E Harrison St. Apt 50	Phone (3/3) 850-4739		
Tampi + 33002	E-mail ROCY (GUEZO) GUICE		
Speaking: For Against Information Representing Florida Youth SHIVE			
	st registered with Legislature: Yes No		
While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this			

meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

2/01/17 Meeting Date	G G,
Name Andrea Cowart	Bill Number
Address 66 Bass (1. apt) Street City State Zip Speaking: For Against Information	Phone 727-492-4597 E-mail Acowall (1) read for life pinellos or
<u> </u>	t registered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not perm meeting. Those who do speak may be asked to limit their remarks so that as m This form is part of the public record for this meeting.	it all persons wishing to speak to be heard at this any persons as possible can be heard. S-001 (10/20/11)
The Florida Senate APPEARANCE REC (Deliver BOTH copies of this form to the Senator or Senate Profession Meeting Date Topic Cuts to Independent Living	nal Staff conducting the meeting) Bill Number
Name Courtney Tait Job Title	-
Address 13916 Sommers Ave Street Hudson City Speaking: For Against Information Representing Florida Youth Shing	E-mail chelly ninja@phoocor
	st registered with Legislature: Yes Vo

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

APPEARANCE RECORD

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S-001 (10/20/11)

This form is part of the public record for this meeting.

CourtSmart Tag Report

Room: EL 110 Case: Type: Caption: Senate Budget Subcommittee on Health and Human Services Appropriations Judge:

Started: 2/1/2012 10:20:19 AM

Ends: 2/1/2012 11:17:58 AM Length: 00:57:40

10:20:21 AM Meeting called to order

10:20:24 AM Roll call

10:20:57 AM Opening comments by Senator Gaetz10:22:45 AM Opening comments by Chairman Negron

10:22:47 AM Chair to Senator Gaetz

10:22:54 AM Tab 1 - CS/SB 414 by Health Regulation/Negron

10:23:08 AM Senator Negron recognized to explain bill

10:24:29 AM Roll call

10:24:52 AM Bill will be reported Favorable (6 Yeas, 0 Nays)

10:24:59 AM Chair back to Chairman Negron

10:25:22 AM Tab 2 - CS/SB 376 by Health Regulation/Flores

10:25:34 AM Patricia Flor, Legislative Assistant, recognized to explain bill

10:26:37 AM Roll call

10:27:00 AM Bill will be reported Favorable (6 Yeas, 0 Nays)

10:27:03 AM Tab 3 - SB 1040 by Bogdanoff

10:27:10 AM Laura Coburn, Legislative Assistant, recognized to explain bill

10:28:26 AM Rick Stevenson, Dentist, Florida Dental Association

10:33:14 AM Senator Bogdanoff

10:39:57 AM Frank Recker, Dentist, Florida Dental Association

10:43:42 AM Mary Edenfield, Florida Dental Association

10:45:22 AM Roll call

10:46:02 AM Bill will be reported Favorable (6 Yeas, 1 Nav)

10:46:22 AM Tab 4 - Review and Discussion of Fiscal Year 2012-2013 Budget Issues Relating to:

10:50:32 AM Public Testimony:

10:50:42 AM Mark Fontaine, Florida Alcohol and Drug Abuse Association

11:06:33 AM Breon Callins, Florida Youth Shine

11:07:44 AM Georgina Rodriguez, Florida Youth Shine

11:10:29 AM Andrea Cowart, Florida Youth Shine

11:12:37 AM Courtney Tait, Florida Youth Shine

11:13:11 AM Rick Gale, Florida Youth Shine

11:15:03 AM Closing Remarks

11:16:48 AM Adjourned



Tallahassee, Florida 32399-1100

COMMITTEES:
Judiciary, Chair
Budget
Budget - Subcommittee on Education Pre-K - 12
Appropriations
Commerce and Tourism
Communications, Energy, and Public Utilities
Governmental Oversight and Accountability
Reapportionment
Rules

SENATOR ANITERE FLORES

Majority Whip 38th District

January 23, 2012

The Honorable Joe Negron Chair of Budget Subcommittee on Health and Human Services Appropriations 306 Senate Office Building 404 South Monroe Street Tallahassee, FL 32399-1100

Dear Chairman Negron:

I respectfully request that you place SB 376, regarding streamlining and modernizing certification of radiological personnel, on the next Budget Subcommittee on Health and Human Services agenda. In the previous committee of reference, Committee on Health regulation, this legislation passed unanimously.

I look forward to presenting this bill before your committee.

Please do not hesitate to contact me should you have any questions. Thank you for your consideration.

Sincerely,

Anitere Flores

CC: Mr. Claude Hendon, Committee on Budget Subcommittee on Health and Human Services, 201 The Capitol

REPLY TO

Intero Flores

☐ 10691 North Kendall Drive, Suite 309, Miami, Florida 33176 (305) 270-6550

☐ 316 Senate Office Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5130

Senate's Website: www.flsenate.gov

MIKE HARIDOPOLOS
President of the Senate

MICHAEL S. "MIKE" BENNETT President Pro Tempore