Senator Peaden moved the following amendment:

**Senate Amendment (with title amendment)**

On page 4, lines 27 and 28, delete those lines and insert:

Section 5. Effective January 1, 2006, section 458.3476, Florida Statutes, is created to read:

458.3476  Clinical perfusionist.--

(1) DEFINITIONS.--As used in this section, the term:

(a) "Approved program" means a program for the education and training of clinical perfusion which has been approved by the boards as provided in subsection (5).

(b) "Boards" means the Board of Medicine and the Board of Osteopathic Medicine.

(c) "Clinical perfusionist" means a person who has graduated from an approved program, who is licensed to perform medical services, and who is prescribed, delegated, or supervised by a licensed physician.

(d) "Clinical perfusion" means the functions necessary for the support, treatment, measurement, or supplementation of
the cardiovascular, circulatory, or respiratory systems or other organs, or a combination of those activities, and the safe management of physiologic functions by monitoring and analyzing the parameters of the systems under an order and the supervision of a licensed physician, through extracorporeal circulation, long-term clinical support techniques, including extracorporeal carbon-dioxide removal and extracorporeal membrane oxygenation, and associated therapeutic and diagnostic technologies, such as counter-pulsation, ventricular assistance, autotransfusion, blood conservation techniques, myocardial and organ preservation, extracorporeal life support, isolated limb perfusion, therapeutic aphaeresis, and platelet-rich plasma sequestration.

(e) "Clinical perfusionists' licensing committee" means the clinical perfusion licensing committee appointed by the board.

(f) "Continuing medical education" means courses recognized and approved by the boards, the American Academy of Physician Assistants, the American Medical Association, the American Osteopathic Association, the American Board of Cardiovascular Perfusion, or the Accreditation Council on Continuing Medical Education.

(g) "Direct supervision" means on-site, personal supervision by a licensed clinical perfusionist who is present when a procedure is being performed and who is in all instances immediately available to provide assistance and direction to the clinical perfusionist while clinical perfusion services are being performed.

(h) "Extracorporeal circulation" means the diversion of a patient's blood through a heart-lung machine or a similar device that assumes the functions of the patient's heart.
lungs, kidney, liver, or other organs.

(i) "Trainee" means a person who is currently enrolled in an approved program.

(j) "Perfusion protocols" means perfusion-related policies and protocols developed or approved by a licensed health facility or a physician through collaboration with administrators, licensed clinical perfusionists, and other health care professionals.

(k) "Proficiency examination" means an entry-level examination approved by the boards, including examinations administered by the American Board of Cardiovascular Perfusion (ABCP).

(l) "Provisional licensed perfusionist" means a person provisionally licensed under this section.

(m) "Supervising physician" means an allopathic physician who holds an active license.

(n) "Temporarily licensed perfusionist" means a person granted a temporary license under this section.

(2) PERFORMANCE OF A SUPERVISING PHYSICIAN.--A physician who supervises a clinical perfusionist must be qualified in the medical areas in which the clinical perfusionist performs.

(3)(a) PERFORMANCE OF CLINICAL PERFUSIONISTS.--A clinical perfusionist may perform duties established by rule by the board, including the following duties that are included in the clinical perfusionist's protocol, while prescribed by a physician or under the supervision of a physician:

1. Perform extracorporeal circulation/clinical support;

2. Perform or administer counter-pulsation;

3. Perform circulatory support and ventricular
assistance;

4. Perform extracorporeal membrane oxygenation (ECMO) and extracorporeal life support (ECLS);

5. Perform blood conservation techniques, autotransfusion, and blood component sequestration;

6. Perform myocardial preservation;

7. Perform coagulation and hemotalogic monitoring;

8. Perform physiological monitoring;

9. Perform blood gas and blood chemistry monitoring;

10. Perform induction of hypothermia or hyperthermia with reversal;

11. Perform hemodilution;

12. Perform hemofiltration;

13. Administer blood, blood products, supportive fluids, and anesthetic agents via the extracorporeal circuit;

14. Complete documentation associated with described duties;

15. Perform isolated limb and organ perfusion;

16. Provide surgical assistance;

17. Perform organ preservation;

18. Perform dialysis while the patient is on clinical bypass;

19. Perform therapeutic apheresis;

20. Administer blood, blood products and supportive fluids via the therapeutic apheresis circuit; and

21. Perform pacemaker lead and battery analysis.

(b) This section or chapter does not prevent third-party payors from reimbursing employers of clinical perfusionists for covered services rendered by such clinical perfusionists.

(c) A clinical perfusionist shall clearly convey to a
patient that he or she is a clinical perfusionist.

(d) A clinical perfusionist may perform medical tasks and services within the framework of a written practice protocol developed between the supervising physician and the clinical perfusionist.

(e) A clinical perfusionist may not prescribe, order, compound, or dispense any controlled substance, legend drug, or medical device to any patient. This paragraph does not prohibit a clinical perfusionist from administering legend drugs, controlled substances, intravenous drugs, fluids, or blood products that are ordered by the physician and administered to a patient while under the orders of such physician.

(4) PERFORMANCE BY TRAINEES.--The practice of a trainee is exempt from the requirements of this chapter while the trainee is performing assigned tasks as a trainee in conjunction with an approved program. Before providing clinical perfusion in conjunction with the requirements of an approved program, the trainee shall clearly convey to the patient that he or she is a trainee and is under direct supervision.

(5) PROGRAM APPROVAL.--The boards shall approve programs for the education and training of clinical perfusionists which meet standards established by board rules. The boards may recommend only those programs for clinical perfusionist training which hold full accreditation or provisional accreditation from the Commission on Accreditation of Allied Health Education Programs.

(6) CLINICAL PERFUSIONIST LICENSURE.--

(a) Any person seeking to be licensed as a clinical perfusionist must apply to the department. The department
shall issue a license to any person certified by the board to:

1. Be at least 18 years of age.
2. Have satisfactorily passed a proficiency examination established by the American Board of Cardiovascular Perfusion (ABCP). The board, on receipt of an application and application fee, shall waive the examination requirement for an applicant who at the time of application:
   a. Is appropriately licensed or certified by another state, territory, or possession of the United States if the requirements of that state, territory, or possession for the license or certificate are the substantial equivalent of the requirements of this section determined by the board; or
   b. Holds a current certificate as a certified clinical perfusionist issued by the American Board of Cardiovascular Perfusion (ABCP) or its successor before July 1, 2005.
3. Be certified in basic cardiac life support.
4. Have completed the application form and remitted an application fee, not to exceed $1,500, as set by the board. An application must include:
   a. A certificate of completion of an approved program;
   b. A sworn statement of any prior felony convictions;
   c. A sworn statement of any prior discipline or denial of licensure or certification in any state; and
   d. Two letters of recommendation, one from a physician and one from a certified or licensed clinical perfusionist.

Before January 1, 2006, a person is eligible to apply to the board and receive a license notwithstanding the requirements of this subsection if the person was actively engaged in the practice of perfusion consistent with applicable law, and if the person was operating cardiopulmonary bypass systems during
cardiac surgical cases in a licensed health care facility as
the person's primary function and had been operating the
system for 10 of the 12 years preceding application for
licensure.

(b) A license must be renewed biennially. Each renewal
must include:
   1. A renewal fee, not to exceed $1,500, as set by the
      board; and
   2. A sworn statement of no felony convictions in the
      immediately preceding 2 years.

(c) Each licensed clinical perfusionist shall
biennially complete continuing medical education as required
by the board.

(d)1. A license as a provisionally licensed
perfusionist may be issued by the board to a person who has
successfully completed an approved perfusion education program
and the filing of an application, payment of an application
fee, and the submission of evidence satisfactory to the board
of the successful completion of the requisite education
requirements.

   2. A provisionally licensed perfusionist must be under
the supervision and direction of a licensed perfusionist at
all times during which the provisional licensed perfusionist
performs perfusion. Rules adopted by the board governing such
supervision and direction may not require the immediate
physical presence of the supervising licensed perfusionist.

   3. A provisional license is valid for 2 years from the
date it is issued and may be extended subject to rule by the
board. The application for extension must be signed by a
supervising licensed perfusionist. Upon notification by the
approved testing service, or the board, that any portion of
the licensing examination has been failed after the 2-year
provisional license term, the provisional license must be
surrendered to the board.

(e) A license as a temporarily licensed perfusionist
may be issued by the department to a person who has
successfully completed the perfusion licensure application.

(f) The Board of Medicine may impose upon a clinical
perfusionist any penalty specified in s. 456.072 or s.
458.331(2) if the clinical perfusionist is found guilty of or
is investigated for an act that constitutes a violation of
this chapter or chapter 456.

(7) CARDIOVASCULAR SURGEON AND CLINICAL PERFUSIONIST
TO ADVISE THE BOARD.--

(a) The chairperson of the board may appoint a
cardiovascular surgeon and a certified clinical perfusionist
to advise the board as to the adoption of rules for the
licensure of clinical perfusionists. The board may use a
committee structure that is most practicable in order to
receive any recommendations to the board regarding rules and
all matters relating to clinical perfusionists, including, but
not limited to, recommendations to improve safety in the
clinical practices of licensed clinical perfusionists.

(b) In addition to its other duties and
responsibilities as prescribed by law, the board shall:

1. Recommend to the department the licensure of
clinical perfusionists.

2. Develop rules regulating the use of clinical
perfusionists under this chapter and chapter 459, except for
rules relating to the formulary developed under s. 458.347(4).
The board shall also develop rules to ensure that the
continuity of supervision is maintained in each practice
setting. The boards shall consider adopting a proposed rule at
the regularly scheduled meeting immediately following the
submission of the proposed rule. A proposed rule may not be
adopted by either board unless both boards have accepted and
approved the identical language contained in the proposed
rule. The language of all proposed rules must be approved by
both boards pursuant to each respective board's guidelines and
standards regarding the adoption of proposed rules.

3. Address concerns and problems of clinical
perfusionists to improve safety in the clinical practices of
licensed clinical perfusionists.

   (c) When the board finds that an applicant for
licensure has failed to meet, to the board's satisfaction,
each of the requirements for licensure set forth in this
section, the board may enter an order to:

   1. Refuse to certify the applicant for licensure;
   2. Approve the applicant for licensure with
   restrictions on the scope of practice or license; or
   3. Approve the applicant for conditional licensure.

Such conditions may include placement of the applicant on
probation for a period of time and subject to such conditions
as the board specifies, including, but not limited to,
requiring the applicant to undergo treatment, to attend
continuing education courses, or to take corrective action.

   (8) PENALTY.--A person who falsely holds himself or
herself out as a clinical perfusionist commits a felony of the
third degree, punishable as provided in s. 775.082, s.
775.083, or s. 775.084.

   (9) DENIAL, SUSPENSION, OR REVOCATION OF
LICENSURE.--The boards may deny, suspend, or revoke the
license of a clinical perfusionist whom one of the boards
determines has violated any provision of this section, chapter, or any rule adopted pursuant thereto.

(10) RULES.--The boards shall adopt rules to administer this section.

(11) FEES.--The department shall allocate the fees collected under this section to the boards.

(12) EXEMPTIONS.--

(a) This section may not be construed to limit the practice of a physician licensed under this chapter or a respiratory therapist licensed under chapter 468, so long as that person does not hold himself or herself out to the public as possessing a license, provisional license, registration, or certificate issued under this section or use a professional title protected by this section.

(b) This section may not be construed to limit the practice of nursing or to prevent qualified members of other professions from doing work of a nature consistent with their training and licensure so long as those persons do not hold themselves out to the public as possessing a license, provisional license, registration, or certificate issued under this section or use a professional title protected by this section.

(c) A person need not be licensed under this section who:

1. Is licensed in this state under any other law and is engaging in the profession or occupation for which he or she is licensed.

2. Is a qualified person in this state or another state or territory who is employed by the United States Government or an agency thereof while discharging his or her official duties.
3. Is a student providing services regulated under this chapter who is:
   a. Pursuing a course of study that leads to a degree in a profession regulated by this chapter;
   b. Providing services in a training setting, as long as such services and associated activities constitute part of a supervised course of study; and
   c. Designated by the title "trainee."

4. Is not a resident of this state but offers services in this state, provided that:
   a. Such services are performed in this state for no more than 15 days in any calendar year; and
   b. Such nonresident is licensed or certified by a state or territory of the United States or by a foreign country or province.

   (d) Except as stipulated by the board, the exemptions in this subsection do not apply to any person licensed under this section whose license has been revoked or suspended by the board or whose license or certification in another jurisdiction has been revoked or suspended by the licensing or certifying authority in that jurisdiction.

   (e) This subsection may not be construed to exempt a person from meeting the minimum standards of performance in professional activities when measured against generally prevailing peer performance, including the undertaking of activities for which the person is not qualified by training or experience.

(13) PAYMENT OR REIMBURSEMENT BY HOSPITALS OF COSTS OF COMPLIANCE WITH PART.—A hospital is not required to pay for, or reimburse any person for, the costs of compliance with any requirement of this part, including costs of continuing
education.

Section 6. Effective January 1, 2006, section 456.048, Florida Statutes, is amended to read:

456.048 Financial responsibility requirements for certain health care practitioners.--

(1) As a prerequisite for licensure or license renewal, the Board of Acupuncture, the Board of Chiropractic Medicine, the Board of Podiatric Medicine, and the Board of Dentistry shall, by rule, require that all health care practitioners licensed under the respective board, and the Board of Medicine and the Board of Osteopathic Medicine shall, by rule, require that all anesthesiologist assistants licensed pursuant to s. 458.3475 or s. 459.023 and clinical perfusionists licensed pursuant to s. 458.3476 or s. 459.025, and the Board of Nursing shall, by rule, require that advanced registered nurse practitioners certified under s. 464.012, and the department shall, by rule, require that midwives maintain medical malpractice insurance or provide proof of financial responsibility in an amount and in a manner determined by the board or department to be sufficient to cover claims arising out of the rendering of or failure to render professional care and services in this state.

(2) The board or department may grant exemptions upon application by practitioners meeting any of the following criteria:

(a) Any person licensed under chapter 457, s. 458.3475, s. 458.3476, s. 459.023, s. 459.025, chapter 460, chapter 461, s. 464.012, chapter 466, or chapter 467 who practices exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent...
of the state, its agencies, or its subdivisions is a person
who is eligible for coverage under any self-insurance or
insurance program authorized by the provisions of s.
768.28(16) or who is a volunteer under s. 110.501(1).

(b) Any person whose license or certification has
become inactive under chapter 457, s. 458.3475, s. 458.3476,
s. 459.023, s. 459.025, chapter 460, chapter 461, part I of
chapter 464, chapter 466, or chapter 467 and who is not
practicing in this state. Any person applying for
reactivation of a license must show either that such licensee
maintained tail insurance coverage which provided liability
coverage for incidents that occurred on or after October 1,
1993, or the initial date of licensure in this state,
whichever is later, and incidents that occurred before the
date on which the license became inactive; or such licensee
must submit an affidavit stating that such licensee has no
unsatisfied medical malpractice judgments or settlements at
the time of application for reactivation.

(c) Any person holding a limited license pursuant to
s. 456.015, and practicing under the scope of such limited
license.

(d) Any person licensed or certified under chapter
457, s. 458.3475, s. 458.3476, s. 459.023, s. 459.025, chapter
460, chapter 461, s. 464.012, chapter 466, or chapter 467 who
practices only in conjunction with his or her teaching duties
at an accredited school or in its main teaching hospitals.
Such person may engage in the practice of medicine to the
extent that such practice is incidental to and a necessary
part of duties in connection with the teaching position in the
school.

(e) Any person holding an active license or
certification under chapter 457, s. 458.3475, s. 458.3476, s. 459.023, s. 459.025, chapter 460, chapter 461, s. 464.012, chapter 466, or chapter 467 who is not practicing in this state. If such person initiates or resumes practice in this state, he or she must notify the department of such activity.

(f) Any person who can demonstrate to the board or department that he or she has no malpractice exposure in the state.

(3) Notwithstanding the provisions of this section, the financial responsibility requirements of ss. 458.320 and 459.0085 shall continue to apply to practitioners licensed under those chapters, except for clinical perfusionists licensed pursuant to s. 458.3476 or s. 459.025 and anesthesiologist assistants licensed pursuant to s. 458.3475 or s. 459.023 who must meet the requirements of this section.

Section 7. Effective January 1, 2006, section 459.025, Florida Statutes, is created to read:

459.025 Clinical perfusionist.--

(1) DEFINITIONS.--As used in this section, the term:

(a) "Approved program" means a program for the education and training of clinical perfusion which has been approved by the boards as provided in subsection (5).

(b) "Boards" means the Board of Medicine and the Board of Osteopathic Medicine.

(c) "Clinical perfusionist" means a person who has graduated from an approved program, who is licensed to perform medical services, and who is prescribed, delegated, or supervised by a licensed physician.

(d) "Clinical perfusion" means the functions necessary for the support, treatment, measurement, or supplementation of the cardiovascular, circulatory, or respiratory systems or
other organs, or a combination of those activities, and the
safe management of physiologic functions by monitoring and
analyzing the parameters of the systems under an order and the
supervision of a licensed osteopathic physician, through
extracorporeal circulation, long-term clinical support
techniques, including extracorporeal carbon-dioxide removal
and extracorporeal membrane oxygenation, and associated
therapeutic and diagnostic technologies, such as counter
pulsation, ventricular assistance, autotransfusion, blood
conservation techniques, myocardial and organ preservation,
extracorporeal life support, isolated limb perfusion,
therapeutic aphaeresis, and platelet-rich plasma
sequestration.

(e) "Clinical perfusionists' licensing committee"
means the clinical perfusion licensing committee appointed by
the board.

(f) "Continuing medical education" means courses
recognized and approved by the boards, the American Academy of
Physician Assistants, the American Medical Association, the
American Osteopathic Association, the American Board of
Cardiovascular Perfusion, or the Accreditation Council on
Continuing Medical Education.

(g) "Direct supervision" means on-site, personal
supervision by a licensed clinical perfusionist who is present
when a procedure is being performed and who is in all
instances immediately available to provide assistance and
direction to the clinical perfusionist while clinical
perfusion services are being performed.

(h) "Extracorporeal circulation" means the diversion
of a patient's blood through a heart-lung machine or a similar
device that assumes the functions of the patient's heart.
lungs, kidneys, liver, or other organs.

(i) "Trainee" means a person who is currently enrolled in an approved program.

(j) "Perfusion protocols" means perfusion-related policies and protocols developed or approved by a licensed health facility or a physician through collaboration with administrators, licensed clinical perfusionists, and other health care professionals.

(k) "Proficiency examination" means an entry-level examination approved by the boards, including examinations administered by the American Board of Cardiovascular Perfusion (ABCP).

(l) "Provisional licensed perfusionist" means a person provisionally licensed under this section.

(m) "Supervising physician" means an osteopathic physician who holds an active license.

(n) "Temporarily licensed perfusionist" means a person granted a temporary license under this section.

(2) PERFORMANCE OF A SUPERVISING PHYSICIAN.--A physician who supervises a clinical perfusionist must be qualified in the medical areas in which the clinical perfusionist performs.

(3)(a) PERFORMANCE OF CLINICAL PERFUSIONISTS.--A clinical perfusionist may perform duties established by rule by the board including the following duties that are included in the clinical perfusionist's protocol, while prescribed by a physician or under the supervision of an osteopathic physician:

1. Perform extracorporeal circulation/clinical support;

2. Perform or administer counter-pulsation;
3. Perform circulatory support and ventricular assistance;

4. Perform extracorporeal membrane oxygenation (ECMO) and extracorporeal life support (ECLS);

5. Perform blood conservation techniques, autotransfusion, and blood component sequestration;

6. Perform myocardial preservation;

7. Perform coagulation and hematologic monitoring;

8. Perform physiological monitoring;

9. Perform blood gas and blood chemistry monitoring;

10. Perform induction of hypothermia or hyperthermia with reversal;

11. Perform hemodilution;

12. Perform hemofiltration;

13. Administer blood, blood products, supportive fluids, and anesthetic agents via the extracorporeal circuit;

14. Complete documentation associated with described duties;

15. Perform isolated limb and organ perfusion;

16. Provide surgical assistance;

17. Perform organ preservation;

18. Perform dialysis while the patient is on clinical bypass;

19. Perform therapeutic apheresis;

20. Administer blood, blood products and supportive fluids via the therapeutic apheresis circuit; and

21. Perform pacemaker lead and battery analysis.

(b) This section or chapter does not prevent third-party payors from reimbursing employers of clinical perfusionists for covered services rendered by such clinical perfusionists.
(c) A clinical perfusionist shall clearly convey to a patient that he or she is a clinical perfusionist.

(d) A clinical perfusionist may perform medical tasks and services within the framework of a written practice protocol developed between the supervising physician and the clinical perfusionist.

(e) A clinical perfusionist may not prescribe, order, compound, or dispense any controlled substance, legend drug, or medical device to any patient. This paragraph does not prohibit a clinical perfusionist from administering legend drugs, controlled substances, intravenous drugs, fluids, or blood products that are ordered by the physician and administered to a patient while under the orders of such physician.

(4) PERFORMANCE BY TRAINEES.--The practice of a trainee is exempt from the requirements of this chapter while the trainee is performing assigned tasks as a trainee in conjunction with an approved program. Before providing clinical perfusion in conjunction with the requirements of an approved program, the trainee shall clearly convey to the patient that he or she is a trainee and is under direct supervision.

(5) PROGRAM APPROVAL.--The boards shall approve programs for the education and training of clinical perfusionists which meet standards established by board rules. The boards may recommend only those programs for clinical perfusionist training which hold full accreditation or provisional accreditation from the Commission on Accreditation of Allied Health Education Programs.

(6) CLINICAL PERFUSIONIST LICENSURE.--

(a) Any person seeking to be licensed as a clinical
perfusionist must apply to the department. The department shall issue a license to any person certified by the board to:

1. Be at least 18 years of age.
2. Have satisfactorily passed a proficiency examination established by the American Board of Cardiovascular Perfusion (ABCP). The board, on receipt of an application and application fee, shall waive the examination requirement for an applicant who at the time of application:
   a. Is appropriately licensed or certified by another state, territory, or possession of the United States if the requirements of that state, territory, or possession for the license or certificate are the substantial equivalent of the requirements of this section determined by the board; or
   b. Holds a current certificate as a certified clinical perfusionist issued by the American Board of Cardiovascular Perfusion (ABCP) or its successor before July 1, 2005.
3. Be certified in basic cardiac life support.
4. Have completed the application form and remitted an application fee, not to exceed $1,500, as set by the board. An application must include:
   a. A certificate of completion of an approved program;
   b. A sworn statement of any prior felony convictions;
   c. A sworn statement of any prior discipline or denial of licensure or certification in any state; and
d. Two letters of recommendation, one from a physician and one from a certified or licensed clinical perfusionist.

Before January 1, 2006, a person is eligible to apply to the board and receive a license notwithstanding the requirements of this subsection if the person was actively engaged in the practice of perfusion consistent with applicable law, and if
the person was operating cardiopulmonary bypass systems during cardiac surgical cases in a licensed health care facility as the person's primary function and had been operating the system for 10 of the 12 years preceding application for licensure.

(b) A license must be renewed biennially. Each renewal must include:

1. A renewal fee, not to exceed $1,500, as set by the board; and

2. A sworn statement of no felony convictions in the immediately preceding 2 years.

(c) Each licensed clinical perfusionist shall biennially complete continuing medical education as required by the board.

(d)1. A license as a provisional licensed perfusionist may be issued by the board to a person who has successfully completed an approved perfusion education program and the filing of an application, payment of an application fee, and the submission of evidence satisfactory to the board of the successful completion of the requisite education requirements.

2. A provisionally licensed perfusionist must be under the supervision and direction of a licensed perfusionist at all times during which the provisional licensed perfusionist performs perfusion. Rules adopted by the board governing such supervision and direction may not require the immediate physical presence of the supervising licensed perfusionist.

3. A provisional license is valid for 2 years from the date it is issued and may be extended subject to rule by the board. The application for extension must be signed by a supervising licensed perfusionist. Upon notification by the approved testing service, or the board, that any portion of
the licensing examination has been failed after the 2-year
provisional license term, the provisional license must be
surrendered to the board.

(e) A license as a temporarily licensed perfusionist
may be issued by the department to a person who has
successfully completed the perfusion licensure application.

(f) The Board of Osteopathic Medicine may impose upon
a clinical perfusionist any penalty specified in s. 456.072 or
s. 458.331(2) if the clinical perfusionist is found guilty of
or is investigated for an act that constitutes a violation of
this chapter or chapter 456.

(7) CARDIOVASCULAR SURGEON AND CLINICAL PERFUSIONIST
TO ADVISE THE BOARD.--

(a) The chairperson of the board may appoint a
cardiovascular surgeon and a certified clinical perfusionist
to advise the board as to the adoption of rules for the
licensure of clinical perfusionists. The board may use a
committee structure that is most practicable in order to
receive any recommendations to the board regarding rules and
all matters relating to clinical perfusionists, including, but
not limited to, recommendations to improve safety in the
clinical practices of licensed clinical perfusionists.

(b) In addition to its other duties and
responsibilities as prescribed by law, the board shall:

1. Recommend to the department the licensure of
clinical perfusionists.

2. Develop rules regulating the use of clinical
perfusionists under this chapter and chapter 458, except for
rules relating to the formulary developed under s. 458.347(4).
The board shall also develop rules to ensure that the
continuity of supervision is maintained in each practice
setting. The boards shall consider adopting a proposed rule at
the regularly scheduled meeting immediately following the
submission of the proposed rule. A proposed rule may not be
adopted by either board unless both boards have accepted and
approved the identical language contained in the proposed
rule. The language of all proposed rules must be approved by
both boards pursuant to each respective board's guidelines and
standards regarding the adoption of proposed rules.

3. Address concerns and problems of clinical
perfusionists to improve safety in the clinical practices of
licensed clinical perfusionists.

(c) When the board finds that an applicant for
licensure has failed to meet, to the board's satisfaction,
each of the requirements for licensure set forth in this
section, the board may enter an order to:

1. Refuse to certify the applicant for licensure;
2. Approve the applicant for licensure with
restrictions on the scope of practice or license; or

3. Approve the applicant for conditional licensure.

Such conditions may include placement of the applicant on
probation for a period of time and subject to such conditions
as the board specifies, including, but not limited to,
requiring the applicant to undergo treatment, to attend
continuing education courses, or to take corrective action.

(8) PENALTY.--A person who falsely holds himself or
herself out as a clinical perfusionist commits:

(a) For the first offense, a misdemeanor of the first
degree, punishable as provided in s. 775.082, s. 775.083, or
s. 775.084.

(b) For the second or subsequent offense, a felony of
the third degree, punishable as provided in s. 775.082, s.
775.083, or s. 775.084.

(9) DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE.--The boards may deny, suspend, or revoke the license of a clinical perfusionist whom one of the boards determines has violated any provision of this section, chapter, or any rule adopted pursuant thereto.

(10) RULES.--The boards shall adopt rules to administer this section.

(11) FEES.--The department shall allocate the fees collected under this section to the boards.

(12) EXEMPTIONS.--

(a) This section may not be construed to limit the practice of an osteopathic physician licensed under this chapter or a respiratory therapist licensed under chapter 468, so long as that person does not hold himself or herself out to the public as possessing a license, provisional license, registration, or certificate issued under this section or use a professional title protected by this section.

(b) This section may not be construed to limit the practice of nursing or to prevent qualified members of other professions from doing work of a nature consistent with their training and licensure so long as those persons do not hold themselves out to the public as possessing a license, provisional license, registration, or certificate issued under this section or use a professional title protected by this section.

(c) A person need not be licensed under this section who:

1. Is licensed in this state under any other law and is engaging in the profession or occupation for which he or she is licensed.
2. Is a qualified person in this state or another state or territory who is employed by the United States Government or an agency thereof while discharging his or her official duties.

3. Is a student providing services regulated under this chapter who is:
   a. Pursuing a course of study that leads to a degree in a profession regulated by this chapter;
   b. Providing services in a training setting, as long as such services and associated activities constitute part of a supervised course of study; and
   c. Designated by the title "trainee."

4. Is not a resident of this state but offers services in this state, provided that:
   a. Such services are performed in this state for no more than 15 days in any calendar year; and
   b. Such nonresident is licensed or certified by a state or territory of the United States or by a foreign country or province.

(d) Except as stipulated by the board, the exemptions in this subsection do not apply to any person licensed under this section whose license has been revoked or suspended by the board or whose license or certification in another jurisdiction has been revoked or suspended by the licensing or certifying authority in that jurisdiction.

(e) This subsection may not be construed to exempt a person from meeting the minimum standards of performance in professional activities when measured against generally prevailing peer performance, including the undertaking of activities for which the person is not qualified by training or experience.
(13) PAYMENT OR REIMBURSEMENT BY HOSPITALS OF COSTS OF COMPLIANCE WITH PART.--A hospital is not required to pay for, or reimburse any person for, the costs of compliance with any requirement of this part, including costs of continuing education.

Section 8. Except as otherwise expressly provided in this act, this act shall take effect January 1, 2006.

And the title is amended as follows:

On page 1, line 11, delete that line and insert:

creating ss. 458.3476 and 459.025, F.S.; providing definitions; requiring a supervising physician to be qualified in the medical area in which the clinical perfusionist performs; prescribing duties of a clinical perfusionist; requiring a clinical perfusionist to convey that he or she is a clinical perfusionist to a patient; authorizing a clinical perfusionist to perform medical tasks and services within a certain protocol; prohibiting a clinical perfusionist from prescribing, ordering, compounding, or dispensing certain drugs or a medical device; providing that a clinical perfusionist may administer certain drugs, fluids, and blood products under the supervision of a physician; exempting a trainee from requirements of a clinical perfusionist;}
requiring board approval of training programs
for clinical perfusionists; providing licensure
requirements; providing provisional licensing
requirements; providing for a temporary license
as a clinical perfusionist; authorizing the
Board of Medicine and the Board of Osteopathic
Medicine to impose a penalty against a clinical
perfusionist found guilty of or investigated
for violating ch. 456, ch. 458, or ch. 459,
F.S.; authorizing the chair of each board to
appoint certain persons to advise the board
regarding rules for the licensure of clinical
perfusionists; providing duties of each board;
providing a penalty for any person who falsely
holds himself or herself out as a clinical
perfusionist; providing for the denial,
suspension, or revocation of a license;
requiring each board to adopt rules; requiring
the Department of Health to allocate collected
fees to each board; providing exemptions from
clinical perfusionist licensure requirements;
providing that hospitals are not obligated to
pay certain costs; amending s. 456.048, F.S.;
specifying financial responsibility
requirements for clinical perfusionists;
providing effective dates.