## A-Engrossed House Bill 2876

Ordered by the House April 22 Including House Amendments dated April 22

Sponsored by COMMITTEE ON HEALTH CARE

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Prohibits health care facility from allowing person without certain qualifications to practice surgical technology. Provides exception for health care facility in rural or medically underserved [area of state] community.

Directs Oregon Health Authority to adopt rules necessary to carry out provisions relating to practice of surgical technology.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

2 Relating to the practice of surgical technology; and declaring an emergency.

**3 Be It Enacted by the People of the State of Oregon:** 

SECTION 1. As used in sections 1 to 5 of this 2015 Act:

5 (1) "Health care facility" means a hospital or an ambulatory surgical center, as those

6 terms are defined in ORS 442.015.

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(2) "Rural or medically underserved community" means a geographic area of this state

8 that is 10 or more miles from the geographic center of a population center of 40,000 or more
9 individuals.

10 (3) "Surgical technology" means intraoperative surgical patient care that involves:

(a) Preparing an operating room for surgical procedures by ensuring that surgical
 equipment is functioning properly and safely;

(b) Preparing an operating room and the sterile field for surgical procedures by preparing
 sterile supplies, instruments and equipment using sterile techniques;

15 (c) Anticipating the needs of a surgical team based on knowledge of human anatomy and

pathophysiology and how those fields relate to the surgical patient and the patient's surgical procedure; and

18 (d) Performing tasks as directed in an operating room, including:

19 (A) Passing instruments, equipment or supplies;

20 (B) Sponging or suctioning of an operative site;

- 21 (C) Preparing and cutting suture material;
- 22 (D) Transferring fluids or drugs;
- 23 (E) Handling specimens;
- 24 (F) Holding retractors and other equipment;
- 25 (G) Applying electrocautery to clamps on bleeders;
- 26 (H) Connecting drains to suction apparatus;

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(I) Applying dressings to closed wounds; and 1 2 (J) Assisting in counting supplies and instruments, including sponges and needles. SECTION 2. (1) A health care facility may not allow a person to practice surgical tech-3 nology at the health care facility unless the person: 4  $\mathbf{5}$ (a)(A) Provides the health care facility with documentation showing that the person has completed an educational program for surgical technologists accredited by a national ac-6 creditation organization approved by the Oregon Health Authority by rule; and 7 (B) Holds and maintains a surgical technologist certification issued by a nationally ac-8 9 credited certifying organization for surgical technologists approved by the authority by rule; (b)(A) Provides the health care facility with documentation showing that the person has 10 completed a training program for surgical technologists in the Army, Navy, Air Force, Ma-11 12 rine Corps or Coast Guard of the United States or in the United States Public Health Service 13 **Commissioned Corps; and** (B) Every two years completes 16 hours of continuing education approved by the au-14 15 thority; or

(c)(A) Provides the health care facility with documentation showing that the person
 practiced surgical technology during at least two of the three years immediately preceding
 January 1, 2017:

19 (i) In a health care facility in Oregon or in another state; or

20 (ii) As an employee of an agency or institution of the federal government; and

(B) Every two years completes 16 hours of continuing education approved by the au thority.

(2) Notwithstanding subsection (1)(a)(B) of this section, a health care facility may allow
a person who does not hold a surgical technologist certification to perform surgical technology at the health care facility for 12 months after the person completes an educational
program for surgical technologists accredited by a national accreditation organization approved by the authority by rule.

28 <u>SECTION 3.</u> (1) A health care facility in a rural or medically underserved community 29 may allow a person to practice as a surgical technologist at the health care facility who does 30 not meet the requirements of section 2 of this 2015 Act while the person is attending an ed-31 ucational program for surgical technologists accredited by a national accreditation organ-32 ization approved by the Oregon Health Authority by rule.

(2) A person described in subsection (1) of this section is exempt from the requirements
 of section 2 of this 2015 Act for three years from the date on which the person began practicing as a surgical technologist at the health care facility.

36 <u>SECTION 4.</u> Section 2 of this 2015 Act does not apply to a health care facility that allows 37 a licensed health care practitioner to perform the duties of a surgical technologist if the 38 practitioner is acting within the scope of practice of the practitioner's license.

39 <u>SECTION 5.</u> The Oregon Health Authority shall adopt rules necessary to carry out
 40 sections 1 to 5 of this 2015 Act, including but not limited to penalties for violation of sections
 41 1 to 5 of this 2015 Act or rules adopted under sections 1 to 5 of this 2015 Act.

42 <u>SECTION 6.</u> (1) During the period beginning on July 1, 2016, and ending on July 1, 2017,
43 sections 1 and 2 of this 2015 Act do not apply to a rural or medically underserved community.
44 (2) As used in this section, "rural or medically underserved community" means a ge45 ographic area of this state that is 10 or more miles from the geographic center of a popu-

1 lation center of 40,000 or more individuals.

2 SECTION 7. (1) Sections 1, 2, 4, 5 and 6 of this 2015 Act become operative on July 1, 2016.

3 (2) Section 3 of this 2015 Act becomes operative on July 1, 2017.

4 (3) The Oregon Health Authority may take any action before the operative dates specified

5 in subsections (1) and (2) of this section that is necessary to enable the authority to exercise,

6 on and after the operative dates specified in subsections (1) and (2) of this section, all of the

7 duties, functions and powers conferred on the authority by sections 1 to 6 of this 2015 Act.

8 <u>SECTION 8.</u> This 2015 Act being necessary for the immediate preservation of the public 9 peace, health and safety, an emergency is declared to exist, and this 2015 Act takes effect

- 10 on its passage.
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