

Brady, Nikki@DCA

To: Nunez, Stephanie@DCA
Subject: RE: Assessment Definition and Proposed Language Changes

From: Nunez, Stephanie@DCA <Stephanie.Nunez@dca.ca.gov>
Sent: Friday, June 21, 2024 3:25 PM
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Good Afternoon!

As requested, below is the final draft language. Thanks to everyone for your feedback!

PROPOSED TEXT

1399.365 Basic Respiratory Tasks and Services

- (a) For purposes of this section, “assessment” is defined as making an analysis or judgment and making recommendations concerning the management, diagnosis, treatment or care of a patient or as a means to perform any task in regard to the care of a patient. Assessment as used in this section is beyond documenting observations, and gathering and reporting data to a licensed RCP, RN, or physician.
- (b) For purposes of subdivision (a) of section 3702.5 of the Business and Professions code, basic respiratory tasks and services do not require a respiratory assessment and include the following:
- (1) Data collection
 - (2) Application and monitoring of a pulse oximeter.
 - (3) Medication administration by aerosol that does not require manipulation of an invasive or non-invasive mechanical ventilator.
 - (4) Heat moisture exchanger (HME) and oxygen tank replacement for patients who are using non-invasive mechanical ventilation.
 - (5) Hygiene care including replacement of tracheostomy ties and gauze and cleaning of the stoma sites.
 - (6) Use of a manual resuscitation devices and other cardio-pulmonary resuscitation technical skills (basic life support level) in the event of an emergency.
 - (7) Documentation of care provided, which includes data retrieved from performing a breath count or transcribing data from an invasive or non-invasive ventilator interface.
 - (8) Observe and gather data from chest auscultation, palpation and percussion.
- (c) For purposes of subdivision (a) of section 3702.5 of the Business and Professions code, basic respiratory tasks and services do not include the following:
- (1) Manipulation of an invasive or non-invasive ventilator.
 - (2) Assessment or evaluation of observation and gathered data from chest auscultation, palpation and percussion.
 - (3) Pre-treatment and post-treatment assessment.
 - (4) Use of medical gas mixtures other than oxygen.

- (5) Preoxygenation, or endotracheal or nasal suctioning.
- (6) Initial setup, change out, or replacement of the breathing circuit or adjustment of oxygen liter flow or oxygen concentration.
- (7) Tracheal suctioning, cuff inflation/deflation, use or removal of an external speaking valve, or removal and replacement of the tracheostomy tube or inner cannula.

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