

Legislative Analysis



SURGICAL TECHNOLOGIST: DEFINE & REQUIRE MINIMUM & CONTINUING EDUCATION

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House Bill 6418
Sponsor: Rep. Marie Donigan

House Bill 6419
Sponsor: Rep. John Stakoe

Committee: Health Policy

Complete to 12-3-08

A SUMMARY OF HOUSE BILLS 6418 AND 6419 AS INTRODUCED 9-10-08

The bills would add new provisions to the Public Health Code regarding surgical technologists and restricting employment by hospitals and freestanding surgical outpatient facilities to individuals meeting certain educational and continuing education requirements. The bills are tie-barred to each other and would take effect January 1, 2009. A detailed description of each bill follows.

House Bill 6419 would add a new section to the Public Health Code (MCL 333.20174) to define terms, restrict employment by certain entities to individuals having a minimal level of education, and create a waiver. "Surgical technologist" would mean an individual who engaged in the practice of surgical technology. "Surgical technology" would mean intraoperative surgical patient care that involved any of the following:

- Preparation of operating rooms for surgical procedures by ensuring surgical equipment was functioning properly and safely.
- Preparation of the operating room and surgical field for surgical procedures by preparing sterile supplies, instruments, and equipment using sterile techniques.
- Performing tasks within the sterile field that included passing supplies, equipment, or instruments; sponging or suctioning an operative site; preparing and cutting suture materials; transferring fluids or drugs; holding retractors; and/or assisting in counting sponges, needles, supplies, or instruments.

Educational requirements. A hospital, freestanding surgical outpatient facility, or any other similar entity that utilizes surgical technologists could not employ, independently contract with, or grant clinical privileges to an individual as a surgical technologist unless he or she satisfied either of the following:

- Successfully completed an accredited education program for surgical technologist and held and maintained the national certification established by the National Board of Surgical Technology and Surgical Assisting for the surgical technologist.

- Completed an appropriate training program for surgical technology in the United States Army, Air Force, Marine Corps, or Coast Guard or in the U.S. Public Health Service.

Exemption and grandfather clause. The bill would not apply to an individual employed by or under contract with the federal government. The bill would grandfather in those who, on the bill's effective date, were employed or by or under contract with a hospital, freestanding surgical outpatient facility or other entity and had been so employed for that entity for at least 18 months over the course of the three years immediately preceding the bill's effective date.

Waiver. An entity could petition the director of the Department of Community Health for a waiver from the above requirements if it were unable to employ a sufficient number of eligible surgical technologists. The waiver would have to be granted if the entity demonstrated that it had made a diligent and thorough effort to employ eligible surgical technologists. A waiver would be valid for six months and could be renewed once, for a total waiver period of 12 months.

House Bill 6418 would also add a new section to the Public Health Code (MCL 333.20174a). Under the bill, a surgical technologist meeting the education requirements of House Bill 6419 would have to complete 15 hours of continuing education annually to remain qualified for and retain his or her employment, contract, or clinical privileges in a hospital, surgical outpatient facility, or other entity.

The employing entity would have to verify that the surgical technologist met the continuing education requirements and maintained certification by the national certifying agency referenced in House Bill 6419. Further, nothing in either bill would prohibit a licensed health professional from performing surgical technology if he or she were acting within the scope of his or her license.

FISCAL IMPACT:

House Bill 6418 has no fiscal implications for the state and local units of government.

House Bill 6419 may result in minimal administrative costs for the Department of Community Health as the director would be required to grant a waiver, up to 1 year, to a hospital, freestanding surgical outpatient facility, or other entity if those entities demonstrate that they are unable to employ a sufficient number of surgical technologists who meet certain educational and training requirements.

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