



**POSITION STATEMENT
BY THE MICHIGAN SOCIETY FOR RESPIRATORY CARE**

CONTINUING EDUCATION FOR LICENSED RESPIRATORY THERAPISTS

Approved on August 9, 2019
As Reviewed on October 8, 2023

The Michigan Society for Respiratory Care (MSRC), a chartered affiliate of the American Association for Respiratory Care, is committed to ensuring that the quality of respiratory care provided in the State of Michigan will conform to the highest standards of clinical practice based upon evidence-based medicine, and that the art and practice of respiratory care will comply with both the language and intent of the statute enabling licensure of respiratory therapists.

It further the position of the MSRC that in order to ensure these standards are met, that licensed respiratory care personnel obtain biennial continuing education prior to subsequent licensure cycles and upon any audits, submit proof to the department that the holder has satisfactorily completed the number of hours of continuing education required by the public health code, department, or Board of Respiratory Care.

The MSRC advocates continuing education to include the following content requirements:

- (1) An applicant for license renewal complete a minimum of fifteen contact hours of relevant continuing education every two years, beginning with the license renewal date and ending on the license expiration date established under this section unless a waiver is granted by the Board under of this rule. Continuing education contact hours earned for license renewal should include the following content requirement:
 - (a) One time contact hour of continuing education on Michigan Human Trafficking training or its successor training requirements as set forth by Administrative Rules 338.1751a; and
 - (b) Required contact hours to include content relating to the provision of clinical respiratory care as defined by the Public Health Code and the Board of Respiratory Care, and may include indirectly related content, including, but not limited to, activities relevant to specialized aspects of respiratory care, such as education, supervision, management, health care cost containment, cost management, health quality standards, disease prevention, health promotion, or abuse reporting.; and
 - (c) At least 7.5 contact hours are to include "live", in person seminars/conferences/presentations.



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- (d) Continuing education sponsors include but not exclusively, American Association for Respiratory Care and its affiliates, American Heart Association ("AHA"), American Medical Association ("AMA") and its affiliates, Accreditation Council for Continuing Medical Education (ACCME) and its affiliates, American Nurses Association ("ANA") and its affiliates, and other organizations who provide continuing education contact hours for cardiopulmonary and sleep disorders, testing, and therapeutic intervention.
- (2) In lieu of completing contact hours, applicants may submit proof of successfully passing any written professional examination administered by the National Board for Respiratory Care (NBRC), including the written registry examination for advanced respiratory therapists, the re-credentialing examination for certified respiratory therapists, the written examination for certified pulmonary function technologists, the written examination for registered pulmonary function technologists, or the written examination for perinatal/pediatric respiratory care. The registered polysomnographic technologist examination administered by the board of registered polysomnographic technologists (BRPT) and the certified asthma educator examination administered by the national asthma certification board (NACB) are also accepted written examinations.
- (3) If applicable, the application form for license renewal should include a section for recording continuing education compliance. Licensees or limited permit holders shall complete the section to certify the completion of the required contact hours for the current renewal period.
- (5) For the licensee to maintain and keep all continuing education records to serve as documentation for any audits by the department or Board of Respiratory Care. Records should be maintained for a period of four years or two renewal periods for the holders of a license issued under this section and for a period of three years or three renewal periods for the holders of a limited permit issued under this section. Legible copies should be sent to the board only in response to an audit by the department or Board of Respiratory Care.

The MSRC further advocates to exclude continuing education activities:

- (1) Basic life support (hereafter referred to as BLS) and cardiopulmonary resuscitation (hereafter referred to as CPR) provider courses;
- (2) Repetition of any educational activity with identical objectives and content within the same reporting period;
- (3) Employer specific orientation or inservice programs which do not significantly enhance the practice of respiratory care or related technologies;
- (4) Self-directed independent study such as reading of texts or journal articles which have not been approved by the department or Board of Respiratory Care;



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- (5) Participation in clinical practice or research that is not part of an approved continuing education contact hours activity;
- (6) Personal development activities not taken for the purpose of meeting continuing education requirements;
- (7) Professional meetings and conventions except for those portions designated as approved continuing education activities;
- (8) Community service and volunteer practice;
- (9) Membership in a professional organization;
- (10) Continuing education contact hours ordered by the board or the department, above and beyond the prescribed contact hours, as set forth under this section.