

AN ACT

**Bill 20-232**  
**Act 20-220**  
**Effective**  
**November 26,**  
**2013**

**Codification**  
**District of**  
**Columbia**  
**Official Code**  
**2001 Edition**

**Trauma**  
**Technologists**  
**Licensure**  
**Amendment**  
**Act of 2013**

*To amend the District of Columbia Health Occupations Revision Act of 1985 to require trauma technologists to be licensed, to establish an Advisory Committee on Trauma Technologists, and to establish the minimum qualifications for licensure of trauma technologists.*

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Trauma Technologists Licensure Amendment Act of 2013”.

Sec. 2. The District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1201.01 *et seq.*), is amended as follows:

(a) The table of contents is amended as follows:

(1) Strike the phrase “Sec. 203. Board of Medicine; Advisory Committees on Acupuncture, Anesthesiologist Assistants, Naturopathic Medicine, Physician Assistants, Polysomnography, and Surgical Assistants.” and insert the phrase “Sec. 203. Board of Medicine; Advisory Committees on Acupuncture, Anesthesiologist Assistants, Naturopathic Medicine, Physician Assistants, Polysomnography, Surgical Assistants, and Trauma Technologists.” in its place.

(2) Add the following after the phrase “Sec. 643. Transition.”:

“TITLE VI-D.

“TRAUMA TECHNOLOGISTS; SCOPE OF PRACTICE;

“LICENSE RENEWAL; TRANSITION.

“Sec. 651. Scope of practice.

“Sec. 652. License renewal.

“Sec. 653. Transition.”.

(b) Section 102 (D.C. Official Code § 3-1201.02) is amended by adding a new paragraph (21) to read as follows:

**Amend**  
**§ 3-1201.02**

“(21) “Practice by trauma technologists” means the provision of emergency medical care to trauma patients in a Level 1 trauma facility as designated by the Director of the Department of Health pursuant to Chapters 27 and 28 of Subtitle B of Title 22 of the District of Columbia Municipal Regulations (22-B DCMR § 2700 *et seq.* and § 2800 *et seq.*), under either the direct or indirect supervision of a physician licensed to practice medicine in the District of Columbia.”.

(c) Section 203 (D.C. Official Code § 3-1202.03) is amended as follows:

**Amend**  
**§ 3-1202.03**

(1) The section heading is amended by striking the phrase “and Surgical Assistants.” and inserting the phrase “Surgical Assistants, and Trauma Technologists.” in its place.

(2) Subsection (a) is amended as follows:

(A) Paragraph (2) is amended by striking the phrase “the practice of surgical assistants with the advice of the Advisory Committee on Surgical Assistants, and the practice by physicians-in-training” and inserting the phrase “the practice of surgical assistants with the advice of the Advisory Committee on Surgical Assistants, the practice by physicians-in-training, and the practice of trauma technologists with the advice of the Advisory Committee on Trauma Technologists” in its place.

(B) Paragraph (8) is amended as follows:

(i) Subparagraph (D) is amended by striking the word “and”.

(ii) Subparagraph (E) is amended by striking the period and inserting the phrase “; and” in its place.

(iii) A new subparagraph (F) is added to read as follows:

“(F) The practice of trauma technologists in accordance with guidelines approved by the Advisory Committee on Trauma Technologists.”.

(3) A new subsection (d-3) is added to read as follows:

“(d-3)(1) There is established an Advisory Committee on Trauma Technologists to consist of 3 members appointed by the Mayor.

“(2) The Advisory Committee on Trauma Technologists shall develop and submit to the Board guidelines for the licensing and regulation of trauma technologists in the District. The guidelines shall set forth the actions that may be performed by trauma technologists under both the direct supervision and indirect supervision of a licensed physician who shall be responsible for the overall medical direction of the care and treatment of emergency patients.

“(3) Of the members of the Advisory Committee on Trauma Technologists, 2 shall be emergency room physicians licensed in the District with experience working with trauma technologists, and one shall be a trauma technologist who shall be deemed to be and shall become licensed in the District.

“(4) The Advisory Committee on Trauma Technologists shall submit initial guidelines to the Board within 180 days of the effective date of the Trauma Technologists Licensure Amendment Act of 2013, passed on 2<sup>nd</sup> reading on November 5, 2013 (Enrolled version of Bill 20-232), and shall subsequently meet at least annually to review the guidelines and make necessary revisions for submission to the Board.”.

(4) Subsection (e) is amended by striking the phrase “and Surgical Assistants,” and inserting the phrase “Surgical Assistants, and Trauma Technologists,” in its place.

(5) Subsection (f) is amended to read as follows:

“(f) Upon request by the Board, the Advisory Committees on Acupuncture, Anesthesiologist Assistants, Physician Assistants, Surgical Assistants, and Trauma Technologists shall, respectively, review applications for licensure to practice acupuncture or to practice as an anesthesiologist assistant, a physician assistant, a surgical assistant, or a trauma technologist and shall forward recommendations to the Board for action.”.

(d) Section 401(b)(2) (D.C. Official Code § 3-1204.01(b)(2)) is amended by striking the phrase “Surgical Assistants,” and inserting the phrase “Surgical Assistants, the trauma technologist member initially appointed to the Advisory Committee on Trauma Technologists,” in its place.

**Amend  
§ 3-1204.01**

(e) Section 501(a) (D.C. Official Code §3-1205.01(a)) is amended by striking the phrase “or surgical assistant in the District,” and inserting the phrase “surgical assistant, or trauma technologist in the District,” in its place.

**Amend  
§ 3-1205.01**

(f) Section 504 (D.C. Official Code § 3-1205.04) is amended by adding a new subsection (r) to read as follows:

**Amend  
§ 3-1205.04**

“(r) An individual applying for a license to practice as a trauma technologist under this act shall establish to the satisfaction of the Board of Medicine that the individual has:

“(1) Successfully completed courses and training in anatomy and physiology, respiratory and cardiac care, wound treatment and closure, treatment of musculoskeletal injuries and burns, and other clinical aspects of emergency medical care from a trauma technology training program approved by the Board;

“(2) Successfully completed the written and practical examinations for trauma technologists within 12 months after completing the trauma technology training program; and

“(3)(A) Successfully completed and provided evidence of course completion of a life support training course, which includes all adult, child, and infant cardiopulmonary resuscitation and airway obstruction skills, from an agency approved by the Board, which teaches these skills in accordance with the current American Heart Association Guidelines for Basic Life Support at the health care provider level;

“(B) Successfully completed and provided evidence of completion of a dedicated training program for trauma technologists in the armed forces and has been performing the functions of trauma technologists for at least 5 years before the date of application for licensure; or

“(C) Demonstrated to the satisfaction of the Board the completion of full-time work experience performed in the United States or Canada under the direct supervision of an emergency room physician licensed in the United States or Canada and consisting of at least 1,300 hours of performance as a trauma technologist in a Level 1 trauma facility as designated by the Director of the Department of Health pursuant to Chapters 27 and 28 of Subtitle B of Title 22 of the District of Columbia Municipal Regulations (22-B DCMR § 2700 *et seq.* and § 2800 *et seq.*), within the 3 years preceding the date of application for licensure.”.

(g) A new Title VI-D is added to read as follows:

“TITLE VI-D.

“TRAUMA TECHNOLOGISTS; SCOPE OF PRACTICE;

“LICENSE RENEWAL; TRANSITION.

“Sec. 651. Scope of practice.

“(a) An individual shall be licensed by the Board of Medicine before practicing as a trauma technologist in the District of Columbia.

**New  
Subchapter  
VI-D, Chapter  
12, Title 3**

**New  
§ 3-1206.51**

“(b) An individual licensed to practice as a trauma technologist shall have the authority to:

“(1) Identify respiratory emergencies and perform critical interventions with oxygen therapy equipment, including bag valve masks;

“(2) Identify circulatory emergencies and perform critical interventions, including cardiopulmonary resuscitation;

“(3) Identify, assess, and treat, as required, various eye injuries, soft tissue injuries, ligament and tendon injuries, musculoskeletal injuries, environmental emergencies, and exposure and reactions to poisons;

“(4) Provide topical application of a local anesthetic,

“(5) Apply tourniquets, casts, immobilizers, and surgical dressings;

“(6) Perform phlebotomy and insert intravenous catheters; and

“(7) Suture lacerations and provide wound care.

“(c) A trauma technologist shall not:

“(1) Perform any surgical procedure independently;

“(2) Have prescriptive authority; or

“(3) Write any progress notes or orders on hospitalized patients.

“(d) Telecommunication by a physician licensed to practice in the District of Columbia may suffice as a means for directing delegated acts for a trauma technologist who is under the indirect supervision of that physician.

“Sec. 652. License renewal.

New  
§ 3-1206.52

“The Board of Medicine shall renew the license of a trauma technologist who, in addition to meeting the requirements of section 504(r), has submitted to the Board, along with an application for renewal, documentation of successful completion of 50 hours of Board-approved continuing medical education within 2 years before the date the license expires. Continuing medical education may consist of critiques, didactic session, practical drills, workshops, seminars, or other Board-approved means.

“Sec. 653. Transition.

New  
§ 3-1206.53

“For a period of 12 months following the effective date of the Trauma Technologists Licensure Amendment Act of 2013, passed on 2<sup>nd</sup> reading on November 5, 2013 (Enrolled version of Bill 20-232), all references in this act to “trauma technologists” shall be deemed to refer to persons meeting the requirements for licensure in the District, regardless of whether they are licensed in fact.”.

(h) Section 1003 (D.C. Official Code § 3-1210.03) is amended by adding a new subsection (ee) to read as follows:

Amend  
§ 3-1210.03

“(ee) Unless authorized to practice as a trauma technologist under this act, a person shall not use or imply the use of the words or terms “trauma technologist,” or “trauma tech,” or any similar title or description of services with the intent to represent that the person practices as a trauma technologist.”.

Sec. 3. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).

Sec. 4. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of Congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.