

Office of Professional Licensure Review Amendments

2026 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Evan J. Vickers

House Sponsor: Jason B. Kyle

LONG TITLE**Committee Note:**

The Business and Labor Interim Committee recommended this bill.

Legislative Vote: 11 voting for 5 voting against 4 absent

General Description:

This bill modifies the scope of practice requirements for health professions.

Highlighted Provisions:

This bill:

- defines terms;
- provides that a physical therapist may prescribe durable medical equipment;
- expands the medical imaging a physical therapist may order;
- allows a physical therapist assistant to perform limited joint mobilization;
- provides the conditions under which a physical therapist may order diagnostic lab testing;
- replaces the certification requirement for a medication aide with a license requirement;
- provides a certified registered nurse anesthetist prescriptive authority immediately before and after a procedure;
- extends the amount of time a student may work as a registered nurse apprentice;
- requires a minimum level of registered nursing experience before licensure as a nurse practitioner;
- clarifies collaboration requirements between an athletic trainer and a physician;
- allows an occupational therapist to prescribe durable medical equipment and adaptive devices;
- moves supervision ratios for an occupational therapist to rule;
- replaces the license requirement for a hearing instrument specialist with a certification requirement;
- aligns the unprofessional conduct standards of a hearing instrument specialist with the unprofessional conduct standards of audiologists;
- directs the division to create and issue a respiratory care apprentice license;

- reduces the number of hours required for a physician assistant to work without a collaborative agreement;
- allows an acupuncturist to delegate a low-risk task to an unlicensed aide under specified conditions;
- changes the training requirements for an acupuncturist performing injection therapy;
- expands what substances an acupuncturist may inject;
- clarifies the titles an acupuncturist may use;
- provides the conditions under which an acupuncturist may order clinical laboratory testing; and
- makes technical and conforming changes.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:**AMENDS:**

- 26B-2-801 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, First Special Session, Chapter 11
- 26B-4-203 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 392
- 26B-8-201 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 240
- 58-1-401 (Effective 05/06/26)**, as last amended by Laws of Utah 2021, Chapter 404
- 58-1-510 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 324
- 58-1-602 (Effective 05/06/26)**, as enacted by Laws of Utah 2022, Chapter 317
- 58-1-603 (Effective 05/06/26)**, as enacted by Laws of Utah 2023, Chapter 2
- 58-24b-102 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 219
- 58-24b-402 (Effective 05/06/26)**, as enacted by Laws of Utah 2009, Chapter 220
- 58-24b-403 (Effective 05/06/26)**, as enacted by Laws of Utah 2009, Chapter 220
- 58-31b-103 (Effective 05/06/26)**, as last amended by Laws of Utah 2011, Chapter 303
- 58-31b-301 (Effective 05/06/26)**, as last amended by Laws of Utah 2022, Chapter 277
- 58-31b-303 (Effective 05/06/26)**, as last amended by Laws of Utah 2022, Chapters 277, 415
- 58-31b-304 (Effective 05/06/26)**, as last amended by Laws of Utah 2022, Chapter 277
- 58-31b-306.1 (Effective 05/06/26)**, as last amended by Laws of Utah 2024, Chapter 173
- 58-31b-401 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 329

65 **58-31b-501 (Effective 05/06/26)**, as last amended by Laws of Utah 2006, Chapter 291
66 **58-31b-502 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 392
67 **58-31b-601 (Effective 05/06/26)**, as last amended by Laws of Utah 2022, Chapter 382
68 **58-31b-803 (Effective 05/06/26)**, as last amended by Laws of Utah 2023, Chapter 223
69 **58-31d-102 (Effective 05/06/26)**, as repealed and reenacted by Laws of Utah 2022,
70 Chapter 438
71 **58-40a-102 (Effective 05/06/26)**, as enacted by Laws of Utah 2006, Chapter 206
72 **58-40a-201 (Effective 05/06/26)**, as enacted by Laws of Utah 2006, Chapter 206
73 **58-40a-303 (Effective 05/06/26)**, as enacted by Laws of Utah 2006, Chapter 206
74 **58-42a-102 (Effective 05/06/26)**, as last amended by Laws of Utah 2025, Chapter 219
75 **58-42a-306 (Effective 05/06/26)**, as last amended by Laws of Utah 2015, Chapter 432
76 **58-46a-102 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
77 2020, Chapter 154
78 **58-46a-301 (Effective 05/06/26) (Repealed 07/01/33)**, as enacted by Laws of Utah 1994,
79 Chapter 28
80 **58-46a-302 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
81 2020, Chapter 339
82 **58-46a-302.5 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of
83 Utah 2023, Chapter 303
84 **58-46a-303 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
85 2023, Chapter 303
86 **58-46a-305 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
87 2019, Chapter 349
88 **58-46a-307 (Effective 05/06/26) (Repealed 07/01/33)**, as enacted by Laws of Utah 1994,
89 Chapter 28
90 **58-46a-401 (Effective 05/06/26) (Repealed 07/01/33)**, as enacted by Laws of Utah 1994,
91 Chapter 28
92 **58-46a-501 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
93 2020, Chapter 154
94 **58-46a-502 (Effective 05/06/26) (Repealed 07/01/33)**, as last amended by Laws of Utah
95 2020, Chapter 154
96 **58-46a-503 (Effective 05/06/26) (Repealed 07/01/33)**, as enacted by Laws of Utah 1998,
97 Chapter 249
98 **58-47b-201 (Effective 05/06/26) (Repealed 07/01/34)**, as last amended by Laws of Utah

2024, Chapter 507

58-54-303 (Effective 05/06/26), as last amended by Laws of Utah 2018, Chapter 242

58-70a-307 (Effective 05/06/26), as enacted by Laws of Utah 2021, Chapter 312 and last amended by Coordination Clause, Laws of Utah 2021, Chapters 313, 344

58-72-102 (Effective 05/06/26), as last amended by Laws of Utah 2024, Chapter 507

58-72-302 (Effective 05/06/26), as last amended by Laws of Utah 2020, Chapter 339

58-72-501 (Effective 05/06/26), as last amended by Laws of Utah 2008, Chapter 250

58-72-701 (Effective 05/06/26), as enacted by Laws of Utah 2019, Chapter 485

58-88-201 (Effective 05/06/26), as last amended by Laws of Utah 2025, Chapter 276

REPEALS AND REENACTS:

58-31b-102 (Effective 05/06/26), as last amended by Laws of Utah 2024, Chapter 507

58-31b-302 (Effective 05/06/26), as last amended by Laws of Utah 2025, Chapter 443

RENUMBERS AND AMENDS:

58-57-101 (Effective 05/06/26), (Renumbered from 58-57-2, as last amended by Laws of Utah 2006, Chapter 106)

58-57-102 (Effective 05/06/26), (Renumbered from 58-57-3, as last amended by Laws of Utah 1993, Chapter 297)

58-57-103 (Effective 05/06/26), (Renumbered from 58-57-4, as last amended by Laws of Utah 2020, Chapter 339)

58-57-104 (Effective 05/06/26), (Renumbered from 58-57-5, as last amended by Laws of Utah 2006, Chapter 106)

58-57-105 (Effective 05/06/26), (Renumbered from 58-57-6, as repealed and reenacted by Laws of Utah 1993, Chapter 297)

58-57-106 (Effective 05/06/26), (Renumbered from 58-57-7, as last amended by Laws of Utah 2024, Chapter 147)

58-57-107 (Effective 05/06/26), (Renumbered from 58-57-8, as repealed and reenacted by Laws of Utah 1993, Chapter 297)

58-57-108 (Effective 05/06/26), (Renumbered from 58-57-10, as last amended by Laws of Utah 2006, Chapter 106)

58-57-109 (Effective 05/06/26), (Renumbered from 58-57-12, as last amended by Laws of Utah 2006, Chapter 106)

58-57-110 (Effective 05/06/26), (Renumbered from 58-57-14, as last amended by Laws of Utah 2022, Chapter 415)

REPEALS:

58-40a-103 (Effective 05/06/26), as enacted by Laws of Utah 2006, Chapter 206
58-41-1 (Effective 05/06/26) (Repealed 07/01/29), as last amended by Laws of Utah
 1989, Chapter 207
58-41-3 (Effective 05/06/26) (Repealed 07/01/29), as last amended by Laws of Utah
 2020, Chapter 424
58-41-6 (Effective 05/06/26) (Repealed 07/01/29), as last amended by Laws of Utah
 1993, Chapter 297
58-46a-101 (Effective 05/06/26) (Repealed 07/01/33), as enacted by Laws of Utah 1994,
 Chapter 28
58-46a-304 (Effective 05/06/26) (Repealed 07/01/33), as enacted by Laws of Utah 1994,
 Chapter 28
58-57-1 (Effective 05/06/26), as enacted by Laws of Utah 1990, Chapter 208
58-57-11 (Effective 05/06/26), as last amended by Laws of Utah 2006, Chapter 106

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26B-2-801** is amended to read:

26B-2-801 (Effective 05/06/26). Definitions for part.

As used in this part:

- (1) "Adult" means an individual who is:
 - (a) at least 18 years old; or
 - (b) under 18 years old and is emancipated.
- (2) "APRN" means an individual who is:
 - (a) certified or licensed as an advance practice registered nurse under Subsection [~~58-31b-301(2)(e)~~ 58-31b-301(2)];
 - (b) an independent practitioner; and
 - (c) acting within the scope of practice for that individual, as provided by law, rule, and specialized certification and training in that individual's area of practice.
- (3) "Capacity" means the same as that term is defined in Section 75A-9-101.
- (4) "Emergency medical services provider" means a person that is licensed, designated, or certified under Title 53, Chapter 2d, Emergency Medical Services Act.
- (5) "Health care" means the same as that term is defined in Section 75A-9-101.
- (6) "Health care provider" means the same as that term is defined in Section 78B-3-403, except that "health care provider" does not include an emergency medical services provider.

- (7)(a) "Life sustaining care" means any medical intervention, including procedures, administration of medication, or use of a medical device, that maintains life by sustaining, restoring, or supplanting a vital function.
- (b) "Life sustaining care" does not include care provided for the purpose of keeping an individual comfortable.
- (8) "Minor" means an individual who:
- (a) is under 18 years old; and
- (b) is not emancipated.
- (9) "Order for life sustaining treatment" means an order related to life sustaining treatment, on a form designated by the Department of Health and Human Services under Section 26B-2-802, that gives direction to health care providers, health care facilities, and emergency medical services providers regarding the specific health care decisions of the individual to whom the order relates.
- (10) "Parent" means the same as that term is defined in Section 75-1-201.
- (11) "Physician" means a physician and surgeon or osteopathic surgeon licensed under Title 58, Chapter 67, Utah Medical Practice Act or Chapter 68, Utah Osteopathic Medical Practice Act.
- (12) "Physician assistant" means an individual licensed as a physician assistant under Title 58, Chapter 70a, Utah Physician Assistant Act.
- (13) "Sign" means the same as that term is defined in Section 75-1-201.
- (14) "Substituted judgment" means the standard to be applied by a surrogate when making a health care decision for an adult who previously had the capacity to make health care decisions, which requires the surrogate to consider:
- (a) specific preferences expressed by the adult:
- (i) when the adult had the capacity to make health care decisions; and
- (ii) at the time the decision is being made;
- (b) the surrogate's understanding of the adult's health care preferences;
- (c) the surrogate's understanding of what the adult would have wanted under the circumstances; and
- (d) to the extent that the preferences described in Subsections (14)(a) through (c) are unknown, the best interest of the adult.
- (15) "Surrogate" means the same as that term is defined in Section 75A-9-101.

Section 2. Section **26B-4-203** is amended to read:

26B-4-203 (Effective 05/06/26). Qualifying condition.

- (1) By designating a particular condition under Subsection (2) for which the use of medical cannabis to treat symptoms is decriminalized, the Legislature does not conclusively state that:
- (a) current scientific evidence clearly supports the efficacy of a medical cannabis treatment for the condition; or
 - (b) a medical cannabis treatment will treat, cure, or positively affect the condition.
- (2) For the purposes of this part, each of the following conditions is a qualifying condition:
- (a) HIV or acquired immune deficiency syndrome;
 - (b) Alzheimer's disease;
 - (c) amyotrophic lateral sclerosis;
 - (d) cancer;
 - (e) cachexia;
 - (f) persistent nausea that is not significantly responsive to traditional treatment, except for nausea related to:
 - (i) pregnancy;
 - (ii) cannabis-induced cyclical vomiting syndrome; or
 - (iii) cannabinoid hyperemesis syndrome;
 - (g) Crohn's disease or ulcerative colitis;
 - (h) epilepsy or debilitating seizures;
 - (i) multiple sclerosis or persistent and debilitating muscle spasms;
 - (j) post-traumatic stress disorder that is being treated and monitored by a licensed mental health therapist, as that term is defined in Section 58-60-102, and that:
 - (i) has been diagnosed by a healthcare provider or mental health provider employed or contracted by the United States Veterans Administration, evidenced by copies of medical records from the United States Veterans Administration that are included as part of the recommending medical provider's pre-treatment assessment and medical record documentation; or
 - (ii) has been diagnosed or confirmed, through face-to-face or telehealth evaluation of the patient, by a provider who is:
 - (A) a licensed board-eligible or board-certified psychiatrist;
 - (B) a licensed psychologist with a master's-level degree;
 - (C) a licensed clinical social worker with a master's-level degree;
 - (D) a licensed advanced practice registered nurse who is qualified to practice within the psychiatric mental health nursing specialty and who has completed

- 235 the clinical practice requirements in psychiatric mental health nursing,
236 including in psychotherapy[, in accordance with Subsection 58-31b-302(5)(g)];
237 or
238 (E) a licensed physician assistant who is qualified to specialize in mental health
239 care under Section 58-70a-501.1;
- 240 (k) autism;
- 241 (l) a terminal illness when the patient's remaining life expectancy is less than six months;
- 242 (m) a condition resulting in the individual receiving hospice care;
- 243 (n) a rare condition or disease that:
- 244 (i) affects less than 200,000 individuals in the United States, as defined in Section
245 526 of the Federal Food, Drug, and Cosmetic Act; and
- 246 (ii) is not adequately managed despite treatment attempts using:
- 247 (A) conventional medications other than opioids or opiates; or
- 248 (B) physical interventions;
- 249 (o) pain lasting longer than two weeks that is not adequately managed, in the
250 recommending medical provider's opinion, despite treatment attempts using:
- 251 (i) conventional medications other than opioids or opiates; or
- 252 (ii) physical interventions;
- 253 (p) pain that is expected to last for two weeks or longer for an acute condition, including
254 a surgical procedure, for which a medical professional may generally prescribe
255 opioids for a limited duration, subject to Subsection 26B-4-213(5)(c); and
- 256 (q) a condition that the Compassionate Use Board approves under Section 26B-1-421,
257 on an individual, case-by-case basis.

258 Section 3. Section **26B-8-201** is amended to read:

259 **26B-8-201 (Effective 05/06/26). Definitions.**

260 As used in this part:

- 261 (1) "Dead body" means the same as that term is defined in Section 26B-8-101.
- 262 (2)(a) "Death by violence" means death that resulted by the decedent's exposure to
263 physical, mechanical, or chemical forces.
- 264 (b) "Death by violence" includes death that appears to have been due to homicide, death
265 that occurred during or in an attempt to commit rape, mayhem, kidnapping, robbery,
266 burglary, housebreaking, extortion, or blackmail accompanied by threats of violence,
267 assault with a dangerous weapon, assault with intent to commit any offense
268 punishable by imprisonment for more than one year, arson punishable by

imprisonment for more than one year, or any attempt to commit any of the foregoing offenses.

(3) "Immediate relative" means an individual's spouse, child, parent, sibling, grandparent, or grandchild.

(4) "Health care professional" means any of the following while acting in a professional capacity:

(a) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;

(b) a physician assistant licensed under Title 58, Chapter 70a, Utah Physician Assistant Act; or

(c) an advance practice registered nurse licensed under Subsection ~~[58-31b-301(2)(e)]~~ 58-31b-301(2)(a) through (c).

(5) "Medical examiner" means the state medical examiner appointed pursuant to Section 26B-8-202 or a deputy appointed by the medical examiner.

(6) "Medical examiner record" means:

(a) all information that the medical examiner obtains regarding a decedent;

(b) reports that the medical examiner makes regarding a decedent; and

(c) all administrative forms and correspondence related to a decedent's case.

(7) "Regional pathologist" means an American Board of Pathology certified pathologist licensed to practice medicine and surgery in the state, appointed by the medical examiner pursuant to Subsection 26B-8-202(3).

(8) "Sudden death while in apparent good health" means apparently instantaneous death without obvious natural cause, death during or following an unexplained syncope or coma, or death during an acute or unexplained rapidly fatal illness.

(9) "Sudden unexpected infant death" means the death of a child who was thought to be in good health or whose terminal illness appeared to be so mild that the possibility of a fatal outcome was not anticipated.

(10) "Suicide" means death caused by an intentional and voluntary act of an individual who understands the physical nature of the act and intends by such act to accomplish self-destruction.

(11) "Unattended death" means a death that occurs more than 365 days after the day on which a health care professional examined or treated the deceased individual for any purpose, including writing a prescription.

(12)(a) "Unavailable for postmortem investigation" means that a dead body is:

- (i) transported out of state;
- (ii) buried at sea;
- (iii) cremated;
- (iv) processed by alkaline hydrolysis; or
- (v) otherwise made unavailable to the medical examiner for postmortem investigation or autopsy.

(b) "Unavailable for postmortem investigation" does not include embalming or burial of a dead body pursuant to the requirements of law.

(13) "Within the scope of the decedent's employment" means all acts reasonably necessary or incident to the performance of work, including matters of personal convenience and comfort not in conflict with specific instructions.

Section 4. Section **58-1-401** is amended to read:

58-1-401 (Effective 05/06/26). Grounds for denial of license -- Disciplinary proceedings -- Time limitations -- Sanctions.

- (1) The division shall refuse to issue a license to an applicant and shall refuse to renew or shall revoke, suspend, restrict, place on probation, or otherwise act upon the license of a licensee who does not meet the qualifications for licensure under this title.
- (2) The division may refuse to issue a license to an applicant and may refuse to renew or may revoke, suspend, restrict, place on probation, issue a public reprimand to, or otherwise act upon the license of a licensee for the following reasons:
 - (a) subject to the provisions of Subsection (7), the applicant or licensee has engaged in unprofessional conduct, as defined by statute or rule under this title;
 - (b) the applicant or licensee has engaged in unlawful conduct as defined by statute under this title;
 - (c) the applicant or licensee has been determined to be mentally incompetent by a court of competent jurisdiction; or
 - (d) subject to Subsections [~~58-31b-401(7)~~] 58-31b-401(6), 58-60-108(2), 58-61-401(2), 58-67-401(2), 58-68-401(2), 58-70a-401(2), and Section 58-81-105, the applicant or licensee is unable to practice the occupation or profession with reasonable skill and safety because of illness, drunkenness, excessive use of drugs, narcotics, chemicals, or other type of material, or as a result of a mental or physical condition, when the condition demonstrates a threat or potential threat to the public health, safety, or welfare.
- (3) A licensee whose license to practice an occupation or profession regulated by this title

has been suspended, revoked, placed on probation, or restricted may apply for reinstatement of the license at reasonable intervals and upon compliance with conditions imposed upon the licensee by statute, rule, or terms of the license suspension, revocation, probation, or restriction.

(4) The division may issue cease and desist orders to:

- (a) a licensee or applicant who may be disciplined under Subsection (1) or (2);
- (b) a person who engages in or represents that the person is engaged in an occupation or profession regulated under this title; and
- (c) a person who otherwise violates this title or a rule adopted under this title.

(5) The division may impose an administrative penalty in accordance with Section 58-1-502.

(6)(a) The division may not take disciplinary action against a person for unprofessional or unlawful conduct under this title, unless the division enters into a stipulated agreement or initiates an adjudicative proceeding regarding the conduct within four years after the conduct is reported to the division, except under Subsection (6)(b).

(b)(i) The division may not take disciplinary action against a person for unprofessional or unlawful conduct more than 10 years after the occurrence of the conduct, unless the proceeding is in response to a civil or criminal judgment or settlement and the proceeding is initiated within one year following the judgment or settlement.

(ii) Notwithstanding Subsection (6)(b)(i), the division may refuse to issue a license due to unprofessional or unlawful conduct that occurred more than 10 years before a request or application for licensure is made.

(7) When the division is determining whether to refuse to issue a license to an applicant, or to refuse to renew the license of a licensee, based solely on the criminal conviction of an applicant or licensee, the division shall:

- (a) provide individualized consideration to the applicant or licensee;
- (b) determine whether the criminal conviction bears a substantial relationship to the applicant's or licensee's ability to safely or competently practice the occupation or profession; and
- (c) consider the applicant's or licensee's current circumstances, which may include any of the following:
 - (i) the age of the applicant or licensee when the applicant or licensee committed the offense;
 - (ii) the time that has elapsed since the applicant or licensee committed the offense;

- (iii) whether the applicant or licensee has completed the applicant's or licensee's criminal sentence;
- (iv) whether the applicant has completed or is actively participating in rehabilitative drug or alcohol treatment;
- (v) any testimonials or recommendations from other individuals provided by the applicant or licensee, including a progress report from the applicant's or licensee's probation or parole officer;
- (vi) other evidence of rehabilitation provided by the applicant or licensee;
- (vii) the education and training of the applicant or licensee;
- (viii) the employment history of the applicant or licensee; and
- (ix) other relevant information provided by the applicant or licensee.

Section 5. Section **58-1-510** is amended to read:

58-1-510 (Effective 05/06/26). Anesthesia and sedation requirements --

Unprofessional conduct -- Whistleblower protection.

(1) As used in this section:

- (a) "Anesthesia or sedation provider" means an individual who is licensed:
 - (i) under Chapter 5a, Podiatric Physician Licensing Act;
 - (ii) under Subsection [58-31b-301(2)(e)] 58-31b-301(2)(b);
 - (iii) under Chapter 67, Utah Medical Practice Act;
 - (iv) under Chapter 68, Utah Osteopathic Medical Practice Act; or
 - (v) as a dentist under Chapter 69, Dentist and Dental Hygienist Practice Act, and who has obtained the appropriate permit established by the division under Subsection 58-69-301(4).
- (b) "Deep sedation" means a drug-induced depression of consciousness where an individual:
 - (i) cannot be easily aroused;
 - (ii) responds purposefully following repeated or painful stimulation;
 - (iii) may not be able to independently maintain ventilatory function;
 - (iv) may require assistance in maintaining a patent airway; and
 - (v) usually maintains cardiovascular function.
- (c) "General anesthesia" means a drug-induced loss of consciousness where an individual:
 - (i) cannot be aroused, even by painful stimulation;
 - (ii) is often unable to maintain ventilatory function;

(iii) often requires assistance in maintaining a patent airway and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function; and

(iv) may not be able to maintain cardiovascular function.

(d) "General anesthetic" means a drug identified as a general anesthetic by the federal Food and Drug Administration.

(e) "Minimal sedation" means a drug-induced state where an individual:

(i) responds normally to verbal commands;

(ii) may have reduced cognitive function and physical coordination; and

(iii) maintains airway reflexes, ventilatory function, and cardiovascular function.

(f) "Moderate sedation" means a drug-induced depression of consciousness where an individual:

(i) responds purposefully to verbal commands, either alone or accompanied by light tactile stimulation;

(ii) maintains a patent airway;

(iii) maintains spontaneous ventilation; and

(iv) usually maintains cardiovascular function.

(2) An anesthesia or sedation provider may not cause a patient to undergo moderate sedation, deep sedation, or general anesthesia, in an outpatient setting that is not an emergency department without:

(a) first providing the following information in writing and verbally:

(i) the level of anesthesia or sedation being administered;

(ii) the identity, type of license, and training of the provider who is performing the procedure for which the anesthesia or sedation will be administered;

(iii) the identity, type of license, and a description of the training described in Subsection (4) of the anesthesia or sedation provider who will be administering the anesthesia or sedation; and

(iv) a description of the monitoring that will occur during the sedation or anesthesia, including descriptions related to the monitoring of the patient's oxygenation, ventilation, and circulation;

(b) after complying with Subsection (2)(a), obtaining the patient's written and verbal consent regarding the procedure;

(c) having the training described in Subsection (4);

(d) directly supervising the patient;

- (e) if the patient is a minor, having a current pediatric advanced life support certification;
- (f) if the patient is an adult, having a current advanced cardiovascular life support certification;
- (g)(i) having at least one individual in the procedure room who has advanced airway training and the knowledge and skills to recognize and treat airway complications and rescue a patient who entered a deeper than intended level of sedation; or
- (ii) if the anesthesia or sedation provider is administering ketamine for a non-anesthetic purpose, having at least one individual on site and available who has advanced airway training and the knowledge and skills to recognize and treat airway complications and rescue a patient who entered a deeper than intended level of sedation;
- (h) having access during the procedure to an advanced cardiac life support crash cart in the office with equipment that:
 - (i) is regularly maintained according to guidelines established by the American Heart Association; and
 - (ii) includes:
 - (A) a defibrillator;
 - (B) administrable oxygen;
 - (C) age appropriate airway equipment;
 - (D) positive pressure ventilation equipment; and
 - (E) unexpired emergency and reversal medications including naloxone for opioid sedation and flumazenil for benzodiazepine sedation;
- (i) using monitors that meet basic standards set by the American Society of Anesthesiologists and continually monitoring ventilatory function with capnography unless precluded or invalidated by the nature of the patient, procedure, or equipment; and
- (j) entering appropriate information into the patient's chart or medical record, which shall include:
 - (i) the patient's name;
 - (ii) the route and site the anesthesia or sedation was administered;
 - (iii) the time of anesthesia or sedation administration and the dosage;
 - (iv) the patient's periodic vital signs during the procedure; and
 - (v) the name of the individual who monitored the patient's oxygenation and ventilation.

- 473 (3)(a) An anesthesia or sedation provider who violates Subsection (2) or ~~[any] a rule [~~
 474 ~~created by the division]~~ the division makes in accordance with Title 63G, Chapter 3,
 475 Utah Administrative Rulemaking Act, to implement this section commits
 476 unprofessional conduct.
- 477 (b) An individual commits unprofessional conduct if the individual administers
 478 anesthesia or sedation for which the individual is not appropriately trained.
- 479 (4)(a) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
 480 the division shall make rules to create training and safety standards regarding the
 481 inducing of general anesthesia, deep sedation, and moderate sedation:
- 482 (i) for each license described in Subsection (1)(a);
 483 (ii) that are based on standards created by nationally recognized organizations, such
 484 as the American Society of Anesthesiologists, the American Dental Association,
 485 or the American Association of Oral and Maxillofacial Surgeons; and
 486 (iii) that include safety standards for general anesthetic use that are consistent with
 487 federal Food and Drug Administration guidance.
- 488 (b) For making rules described in Subsection (4)(a), the division shall consult with the
 489 applicable licensing boards and a board described in Sections 58-67-201, ~~[58-68-201,]~~
 490 and 58-69-201.
- 491 (5) The requirements of Subsection (2) do not apply to the practice of inducing minimal
 492 sedation.
- 493 (6) An employer may not take an adverse employment action against an employee if:
 494 (a) the employee notifies the division of:
 495 (i) a violation of this section; or
 496 (ii) a violation of ~~[any rule created by the division to implement this section]~~ a rule the
 497 division makes in accordance with Title 63G, Chapter 3, Utah Administrative
 498 Rulemaking Act, to implement this section; and
 499 (b) the employment action is based on the individual notifying the division of the
 500 violation.
- 501 Section 6. Section **58-1-602** is amended to read:
 502 **58-1-602 (Effective 05/06/26). Auricular detoxification certification.**
 503 (1) As used in this section:
 504 (a) "Health care provider" means an individual who is licensed under:
 505 (i) Subsection ~~[58-31b-301(2)(a), (b), (d), or (e)]~~ 58-31b-301(2)(a), (2)(b), (2)(c),
 506 (2)(d), (2)(f), or (2)(g);

- 507 (ii) Chapter 60, Mental Health Professional Practice Act;
- 508 (iii) Chapter 61, Part 3, Licensing; or
- 509 (iv) Chapter 70a, Utah Physician Assistant Act.
- 510 (b)(i) "NADA protocol" means:
- 511 (A) a protocol developed by the National Acupuncture Detoxification
- 512 Association; and
- 513 (B) an adjunctive therapy using one to five invariant ear acupuncture or
- 514 acupressure points for the adjunctive treatment and prevention of substance use
- 515 disorders or to provide support for individuals who have experienced physical
- 516 or emotional trauma.
- 517 (ii) "NADA protocol" does not include the stimulation of other auricular or distal
- 518 acupuncture points.
- 519 (2) A health care provider may perform the NADA protocol if the health care provider:
- 520 (a) obtains a certification from the National Acupuncture Detoxification Association to
- 521 perform the NADA protocol; and
- 522 (b) provides the division proof of obtaining the certification.
- 523 (3) A health care provider may perform a protocol substantially similar to the NADA
- 524 protocol if:
- 525 (a) the division has determined the protocol is substantially similar to the NADA
- 526 protocol; and
- 527 (b) the individual has met each requirement the division has created to perform the
- 528 protocol.
- 529 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
- 530 division may make rules for implementing Subsection (3).
- 531 Section 7. Section **58-1-603** is amended to read:
- 532 **58-1-603 (Effective 05/06/26). Hormonal transgender treatment on minors --**
- 533 **Requirements.**
- 534 (1) As used in this section:
- 535 (a) "Approved organization" means an organization with expertise regarding transgender
- 536 health care for minors that is approved by the division.
- 537 (b) "Biological sex at birth" means an individual's sex, as being male or female,
- 538 according to distinct reproductive roles as manifested by sex and reproductive organ
- 539 anatomy, chromosomal makeup, and endogenous hormone profiles.
- 540 (c) "Disorder of sexual development" means a sexual development disorder where an

individual:

(i) is born with external biological sex characteristics that are irresolvably ambiguous;

(ii) is born with 46, XX chromosomes with virilization;

(iii) is born with 46, XY chromosomes with undervirilization;

(iv) has both ovarian and testicular tissue; or

(v) has been diagnosed by a physician, based on genetic or biochemical testing, with abnormal:

(A) sex chromosome structure;

(B) sex steroid hormone production; or

(C) sex steroid hormone action for a male or female.

(d) "Health care provider" means:

(i) a physician;

(ii) a physician assistant licensed under Chapter 70a, Utah Physician Assistant Act; or

(iii) an advanced practice registered nurse licensed under [Subsection

~~58-31b-301(2)(e)] Subsections 58-31b-301(2)(a) through (c).~~

(e)(i) "Hormonal transgender treatment" means administering, prescribing, or

supplying for effectuating or facilitating an individual's attempted sex change:

(A) to an individual whose biological sex at birth is female, a dose of testosterone

or other androgens at levels above those normally found in an individual whose biological sex at birth is female;

(B) to an individual whose biological sex at birth is male, a dose of estrogen or a

synthetic compound with estrogenic activity or effect at levels above those

normally found in an individual whose biological sex at birth is male; or

(C) a puberty inhibition drug.

(ii) "Hormonal transgender treatment" does not include administering, prescribing, or

supplying a substance described in Subsection (1)(e)(i) to an individual if the

treatment is medically necessary as a treatment for:

(A) precocious puberty;

(B) endometriosis;

(C) a menstrual, ovarian, or uterine disorder;

(D) a sex-hormone stimulated cancer; or

(E) a disorder of sexual development.

(f) "Mental health professional" means any of the following:

(i) a physician who is board certified for a psychiatry specialization recognized by the

- 575 American Board of Medical Specialists or the American Osteopathic Association's
576 Bureau of Osteopathic Specialists;
- 577 (ii) a psychologist licensed under Chapter 61, Psychologist Licensing Act;
578 (iii) a clinical social worker licensed under Chapter 60, Part 2, Social Worker
579 Licensing Act;
- 580 (iv) a marriage and family therapist licensed under Chapter 60, Part 3, Marriage and
581 Family Therapist Licensing Act; or
- 582 (v) a clinical mental health counselor licensed under Chapter 60, Part 4, Clinical
583 Mental Health Counselor Licensing Act.
- 584 (g) "Minor" means an individual who is less than 18 years old.
- 585 (h) "Physician" means an individual licensed under:
- 586 (i) Chapter 67, Utah Medical Practice Act; or
587 (ii) Chapter 68, Utah Osteopathic Medical Practice Act.
- 588 (i) "Puberty inhibition drug" means any of the following alone or in combination with
589 aromatase inhibitors:
- 590 (i) gonadotropin-releasing hormone agonists; or
591 (ii) androgen receptor inhibitors.
- 592 (j) "Transgender treatment certification" means a certification described in Subsection (2).
- 593 (2)(a) The division shall create a transgender treatment certification on or before July 1,
594 2023.
- 595 (b) The division may issue the transgender treatment certification to an individual if the
596 individual:
- 597 (i) is a health care provider or a mental health professional; and
598 (ii) has completed at least 40 hours of education related to transgender health care for
599 minors from an approved organization.
- 600 (c) The division may renew a transgender treatment certification:
- 601 (i) at the time an individual renews the individual's license; and
602 (ii) if the individual has completed at least 20 hours of continuing education related
603 to transgender health care for minors from an approved organization during the
604 individual's continuing education cycle.
- 605 (d) Beginning January 1, 2024, providing a hormonal transgender treatment to a minor
606 without a transgender treatment certification is unprofessional conduct.
- 607 (3)(a) A health care provider may provide a hormonal transgender treatment to a minor
608 only if the health care provider has been treating the minor for gender dysphoria for

609 at least six months.

610 (b) Beginning July 1, 2023, before providing a hormonal transgender treatment to a
611 minor described in Subsection (3)(a), a health care provider shall:

612 (i) determine if the minor has other physical or mental health conditions, identify and
613 document any condition, and consider whether treating those conditions before
614 treating the gender dysphoria would provide the minor the best long-term outcome;

615 (ii) consider whether an alternative medical treatment or behavioral intervention to
616 treat the minor's gender dysphoria would provide the minor the best long-term
617 outcome;

618 (iii) document in the medical record that:

619 (A) the health care provider has complied with Subsections (3)(b)(i) and (ii); and

620 (B) providing the hormonal transgender treatment will likely result in the best
621 long-term outcome for the minor;

622 (iv) obtain written consent from:

623 (A) the minor; and

624 (B) the minor's parent or guardian unless the minor is emancipated;

625 (v) discuss with the minor:

626 (A) the risks of the hormonal transgender treatment;

627 (B) the minor's short-term and long-term expectations regarding the effect that the
628 hormonal transgender treatment will have on the minor; and

629 (C) the likelihood that the hormonal transgender treatment will meet the
630 short-term and long-term expectations described in Subsection (3)(b)(v)(B);

631 (vi) unless the minor is emancipated, discuss with the minor's parent or guardian:

632 (A) the risks of the hormonal transgender treatment;

633 (B) the minor's short-term and long-term expectations regarding the effect that the
634 hormonal transgender treatment will have on the minor;

635 (C) the parent or guardian's short-term and long-term expectations regarding the
636 effect that the hormonal transgender treatment will have on the minor; and

637 (D) the likelihood that the hormonal transgender treatment will meet the
638 short-term and long-term expectations described in Subsections (3)(b)(vi)(B)
639 and (C);

640 (vii) document in the medical record that the health care provider has provided the
641 information described in Subsections (3)(b)(viii) and (ix);

642 (viii) provide the minor the following information if providing the minor a puberty

- 643 inhibition drug:
- 644 (A) puberty inhibition drugs are not approved by the FDA for the treatment of
- 645 gender dysphoria;
- 646 (B) possible adverse outcomes of puberty blockers are known to include
- 647 diminished bone density, pseudotumor cerebri and long term adult sexual
- 648 dysfunction;
- 649 (C) research on the long-term risks to children of prolonged treatment with
- 650 puberty blockers for the treatment of gender dysphoria has not yet occurred;
- 651 and
- 652 (D) the full effects of puberty blockers on brain development and cognition are
- 653 unknown;
- 654 (ix) provide the minor the following information if providing a cross-sex hormone as
- 655 described in Subsection (1)(e)(i)(A) or (B):
- 656 (A) the use of cross-sex hormones in males is associated with risks that include
- 657 blood clots, gallstones, coronary artery disease, heart attacks, tumors of the
- 658 pituitary gland, strokes, elevated levels of triglycerides in the blood, breast
- 659 cancer, and irreversible infertility; and
- 660 (B) the use of cross-sex hormones in females is associated with risks of
- 661 erythrocytosis, severe liver dysfunction, coronary artery disease, hypertension,
- 662 and increased risk of breast and uterine cancers; and
- 663 (x) upon the completion of any relevant information privacy release, obtain a mental
- 664 health evaluation of the minor as described in Subsection (4).
- 665 (4) The mental health evaluation shall:
- 666 (a) be performed by a mental health professional who:
- 667 (i) beginning January 1, 2024, has a current transgender treatment certification; and
- 668 (ii) is not the health care provider that is recommending or providing the hormonal
- 669 transgender treatment;
- 670 (b) contain a determination regarding whether the minor suffers from gender dysphoria
- 671 in accordance with the fifth edition of the Diagnostic and Statistical Manual of
- 672 Mental Disorders;
- 673 (c) confirm that the minor and the mental health professional have had at least three
- 674 therapy sessions; and
- 675 (d) document all of the minor's mental health diagnoses and any significant life events
- 676 that may be contributing to the diagnoses.

(5) A violation of Subsection (3) is unprofessional conduct.

Section 8. Section **58-24b-102** is amended to read:

58-24b-102 (Effective 05/06/26). Definitions.

As used in this chapter:

[(1) "Animal physical therapy" means practicing physical therapy or physiotherapy on an animal.]

[(2)] (1) "Board" means the Physical Therapies Licensing Board, created in Section 58-24b-201.

[(3)] (2) "Consultation by telecommunication" [~~means the provision of expert or professional advice by a physical therapist who is licensed outside of Utah to a licensed physical therapist or a health care provider by telecommunication or electronic communication~~] means a health care provider receiving professional advice through electronic communication from a physical therapist who is licensed outside of the state.

(3) "Dry needling" means a skilled intervention using a filiform needle to penetrate the skin and underlying tissue for the evaluation, management, and prevention of a disability, a movement impairment, a neuromusculoskeletal condition, or pain.

[(4) "General supervision" means supervision and oversight of an individual by a licensed physical therapist when the licensed physical therapist is immediately available in person, by telephone, or by electronic communication to assist the individual.]

[(5)] (4) "Licensed physical therapist" means an individual licensed under this chapter to engage in the practice of physical therapy.

[(6)] (5) "Licensed physical therapist assistant" means an individual licensed under this chapter to engage in the practice of physical therapy, subject to the provisions of Subsection 58-24b-401(2)(a).

[(7)] (6) "Licensing examination" means a nationally recognized physical therapy examination that [~~is approved by the division, in consultation with the board~~] the division approves by rule the division makes in consultation with the board and with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

[(8) "On-site supervision" means supervision and oversight of an individual by a licensed physical therapist or a licensed physical therapist assistant when the licensed physical therapist or licensed physical therapist assistant is:]

[(a) continuously present at the facility where the individual is providing services;]

[(b) immediately available to assist the individual; and]

[(c) regularly involved in the services being provided by the individual.]

[~~(9)~~] (7) "On-site supervision" means the supervision of a licensed physical therapist or a licensed physical therapist assistant when the supervising licensed physical therapist is:

- (a) continuously present at the facility where the licensed physical therapist or licensed physical therapist assistant provides the service;
- (b) immediately available to assist the licensed physical therapist or licensed physical therapist assistant; and
- (c) regularly involved in the service the supervised licensed physical therapist or licensed physical therapist assistant provides.

(8) "Physical impairment" means:

- ~~[(a) a mechanical impairment;]~~
- ~~[(b) a physiological impairment;]~~
- ~~[(c) a developmental impairment;]~~
- ~~[(d) a functional limitation;]~~
- ~~[(e) a disability;]~~
- ~~[(f) a mobility impairment; or]~~
- ~~[(g) a bodily malfunction.]~~
- (a) a bodily malfunction;
- (b) a developmental impairment;
- (c) a disability;
- (d) a functional limitation;
- (e) a mechanical impairment;
- (f) a mobility impairment; or
- (g) a physiological impairment.

[~~(10)~~] (9)(a) "Physical therapy" [~~or "physiotherapy" means:]~~ means examining, evaluating, and testing an individual client who has a physical impairment or injury.

~~[(i) examining, evaluating, and testing an individual who has a physical impairment or injury]~~

(b) "Physical therapy" includes:

(i) ordering:

(A) imaging in accordance with Section 58-54-303; and

(B) laboratory testing in accordance with Section 58-24b-403;

(ii) identifying or labeling a physical impairment or injury;

(iii) formulating a therapeutic intervention plan for the treatment of a physical impairment, injury, or pain;

- 745 (iv) assessing the ongoing effects of therapeutic intervention for the treatment of a
 746 physical impairment or injury;
- 747 (v) treating or alleviating a physical impairment by designing, modifying, or
 748 implementing a therapeutic intervention;
- 749 (vi) reducing the risk of an injury or physical impairment;
- 750 (vii) providing instruction on the use of physical measures, activities, or devices for
 751 preventative and therapeutic purposes;
- 752 (viii) promoting and maintaining health and fitness;
- 753 (ix) ~~[the administration of]~~ administering a prescription drug ~~[pursuant to]~~ in
 754 accordance with Section 58-24b-403;
- 755 (x) applying dry needling to enhance a client's physical performance if the physical
 756 therapy practitioner has the necessary training the division requires by rule the
 757 division makes in consultation with the board and in accordance with Title 63G,
 758 Chapter 3, Utah Administrative Rulemaking Act;
- 759 ~~[(x)]~~ (xi) subject to Subsection 58-28-307(12)(b), engaging in the functions described
 760 in Subsections (10)(a)(i) through (ix) in relation to an animal, in accordance with
 761 the requirements of Section 58-24b-405; or
- 762 ~~[(xi)]~~ (xii) ~~[engaging in administration, consultation, education, and research relating~~
 763 ~~to]~~ administering, consulting, educating, and researching the practices described in
 764 this Subsection [(10)(a); or] (9)(a).
- 765 ~~[(xii) applying dry needling to enhance an individual's physical performance if the~~
 766 ~~physical therapy practitioner has received the necessary training as determined by~~
 767 ~~division rule in collaboration with the board.]~~
- 768 ~~[(b)]~~ (c) "Physical therapy" ~~[or "physiotherapy"]~~ does not include:
- 769 ~~[(i) diagnosing disease;]~~
- 770 ~~[(ii) performing surgery;]~~
- 771 ~~[(iii) performing acupuncture;]~~
- 772 ~~[(iv) taking x-rays; or]~~
- 773 ~~[(v) prescribing or dispensing a drug, as defined in Section 58-37-2.]~~
- 774 (i) diagnosing a disease;
- 775 (ii) dispensing or prescribing a drug as defined in Section 58-37-2;
- 776 (iii) performing acupuncture;
- 777 (iv) performing surgery; or
- 778 (v) taking x-rays.

779 [(11)] (10) "Physical therapy aide" means an individual who:

- 780 (a) ~~[is trained, on-the-job, by]~~ receives on-the-job training from a licensed physical
781 therapist; and
- 782 (b) provides routine assistance to a licensed physical therapist or licensed physical
783 therapist assistant, while the licensed physical therapist or licensed physical therapist
784 assistant practices physical therapy~~[- within the scope of the licensed physical~~
785 ~~therapist's or licensed physical therapist assistant's license]~~.

786 [(12)] (11) "Recognized accreditation agency" means an accreditation agency that~~[-]~~ the
787 division approves in consultation with the board.

788 ~~[(a) grants accreditation, nationally, in the United States of America; and]~~

789 ~~[(b) is approved by the division, in consultation with the board.]~~

790 [(13)] (12)(a) "Testing" means a standard method or technique used to gather data
791 regarding a patient that is generally and nationally accepted by physical therapists for
792 the practice of physical therapy.

793 (b) "Testing" includes measurement or evaluation of:

- 794 (i) muscle strength, force, endurance, or tone;
795 (ii) cardiovascular fitness;
796 (iii) physical work capacity;
797 (iv) joint motion, mobility, or stability;
798 (v) reflexes or autonomic reactions;
799 (vi) movement skill or accuracy;
800 (vii) sensation;
801 (viii) perception;
802 (ix) peripheral nerve integrity;
803 (x) locomotor skills, stability, and endurance;
804 (xi) the fit, function, and comfort of prosthetic, orthotic, or other assistive devices;
805 (xii) posture;
806 (xiii) body mechanics;
807 (xiv) limb length, circumference, and volume;
808 (xv) thoracic excursion and breathing patterns;
809 (xvi) activities of daily living related to physical movement and mobility;
810 (xvii) ~~[functioning]~~ physical movement and mobility functions in the physical
811 environment at home or work~~[- as it relates to physical movement and mobility]~~;
812 and

(xviii) neural muscular responses.

~~[(14)(a) "Trigger point dry needling" means the stimulation of a trigger point using a dry needle to treat neuromuscular pain and functional movement deficits.]~~

~~[(b) "Trigger point dry needling" does not include the stimulation of auricular or distal points.]~~

~~[(15)]~~ (13) "Therapeutic intervention" includes:

(a) therapeutic exercise, with or without the use of a device;

(b) ~~[functional training in]~~ physical movement and mobility training for functional self-care~~[, as it relates to physical movement and mobility];~~

(c) physical movement and mobility for community or work integration~~[, as it relates to physical movement and mobility];~~

(d) manual therapy, including:

(i) soft tissue mobilization;

(ii) therapeutic massage; or

(iii) joint mobilization, as ~~[defined by the division, by rule]~~ the division defines by rule the division makes in consultation with the board and in accordance with

Title 63G, Chapter 3, Utah Administrative Rulemaking Act;

(e) ~~[prescribing, applying, or fabricating an assistive, adaptive, orthotic, prosthetic, protective, or supportive device]~~ prescription, application, fabrication, or training for an assistive technology, an adaptive device, an orthotic device, or a prosthetic device;

(f) prescription of durable medical equipment to a patient with or without requesting a prescription from a licensed physician;

~~[(f)]~~ (g) airway clearance techniques, including postural drainage;

~~[(g)]~~ (h) integumentary protection and repair techniques;

~~[(h)]~~ (i) wound debridement, cleansing, and dressing;

~~[(i)]~~ (j) the application of a physical agent, including:

(i) light;

(ii) heat;

(iii) cold;

(iv) water;

(v) air;

(vi) sound;

(vii) compression;

(viii) electricity; and

- (ix) electromagnetic radiation;
- ~~[(j)]~~ (k) mechanical or electrotherapeutic modalities;
- ~~[(k)]~~ (l) positioning;
- ~~[(l)]~~ (m) instructing or training a patient in locomotion or other functional activities, with or without an assistive device;
- ~~[(m)]~~ (n) manual or mechanical traction; and
- ~~[(n)]~~ (o) correction of posture, body mechanics, or gait~~[-and]~~ .
- ~~[(o) trigger point dry needling, under the conditions described in Section 58-24b-505.]~~

Section 9. Section **58-24b-402** is amended to read:

58-24b-402 (Effective 05/06/26). Patient care and management.

- (1) ~~[In practicing physical therapy, a]~~ A licensed physical therapist shall:
 - (a) manage ~~[all aspects of]~~ the physical therapy of a patient under the licensed physical therapist's care;
 - (b) perform the initial evaluation and documentation for each patient;
 - (c) perform periodic reevaluation and documentation for each patient;
 - (d) perform a physical therapy [interventions] intervention that ~~[require]~~ requires immediate and continuous ~~[examination and]~~ evaluation throughout the intervention;
 - (e) perform on a patient all therapeutic intervention ~~[on a patient]~~ that is outside of the ~~[standard]~~ scope of practice of a licensed physical therapist assistant or a physical therapy aide;
 - (f) determine the therapeutic intervention ~~[to be performed by]~~ a licensed physical therapist assistant ~~[under the on-site supervision or general supervision of the licensed physical therapist]~~ performs while under the licensed physical therapist's on-site supervision or while the licensed physical therapist is immediately available in person, by telephone, or by electronic communication to ensure that the therapeutic intervention is safe, effective, efficient, and within the scope of practice of the licensed physical therapist assistant;
 - (g) conduct the discharge of each patient and document ~~[for each patient,]~~ each patient's response to therapeutic intervention at the time of discharge~~[-the patient's response to therapeutic intervention]~~; and
 - (h) provide accurate documentation of the billing and services provided.
- (2) A licensed physical therapist assistant or a physical therapy aide may not:
 - (a) perform a physical therapy evaluation or assessment;
 - (b) identify or label a physical impairment or injury;

- (c) design a plan of care for a patient;
- ~~[(d) perform the joint mobilization component of manual therapy; or]~~
- ~~[(e)] (d) perform the sharp selective debridement component of wound management; or~~
- (e) perform high-velocity thrust joint mobilization.

~~[(3) Subsection (2)(d) does not apply to:]~~

- ~~[(a) simple joint distraction techniques or stretching; or]~~
- ~~[(b) a stretch or mobilization that can be given as part of a home exercise program.]~~
- (3) A licensed physical therapy aide may not perform or assist in any joint mobilization component of manual therapy except:
 - (a) a simple joint distraction technique or stretching; or
 - (b) a stretch or a mobilization that is a part of a home exercise program.

Section 10. Section **58-24b-403** is amended to read:

58-24b-403 (Effective 05/06/26). Administration of a prescription drug --

Ordering laboratory testing -- Reporting laboratory results -- Referral.

- (1) A licensed physical therapist may purchase, store, and administer topical and aerosol medications that require a prescription~~[-only]~~ as provided in this section.
- (2) A licensed physical therapist may purchase, store, and administer:
 - (a) ~~[topically applied medicinal agents, including steroids and analgesics;]~~ a topical medication for wound care and for musculoskeletal treatment, using iontophoresis or phonophoresis; and
 - (b) ~~[aerosols]~~ an aerosol medication for pulmonary hygiene in an institutional setting, if a licensed respiratory therapist is not available ~~[in, or]~~ within a 10 mile radius of[,] the institution.
- (3) A licensed physical therapist ~~[may only-]~~ shall purchase, store, or administer a medication described in this section ~~[pursuant to]~~ in accordance with a written prescription issued by a practitioner who is licensed to prescribe that medication.
- (4) This section does not authorize a licensed physical therapist to dispense a prescription drug.
- (5) A licensed physical therapist may order a laboratory test if the licensed physical therapist:
 - (a) is trained on the best practices for ordering a laboratory test;
 - (b) is ordering the laboratory test that is relevant to the practice of physical therapy and treatment of a musculoskeletal disorder; and
 - (c) is in a physical therapist-patient relationship with the patient for whom there is a

clinical need for the order.

(6) Within seven days after the day on which a licensed physical therapist receives the results of a test that the licensed physical therapist orders, the licensed physical therapist shall:

(a) report the results to:

(i) the patient's health care provider of record, if designated; or

(ii) the referring health care provider, if designated; or

(b) provide the patient a referral to an appropriate health care provider if:

(i) the patient does not provide a health care provider of record or a referring health care provider; and

(ii) the licensed physical therapist has reasonable cause to believe that the patient may have a symptom or condition that requires a service beyond the licensed physical therapist's scope of practice.

Section 11. Section **58-31b-102** is repealed and reenacted to read:

58-31b-102 (Effective 05/06/26). Definitions.

As used in this chapter:

(1) "Administrative penalty" means a monetary fine or citation that the division imposes:

(a) for an act or an omission that the division determines is unprofessional or unlawful conduct;

(b) in accordance with a fine schedule the division makes by rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act; and

(c) as the result of an adjudicative proceeding the division conducts in accordance with Title 63G, Chapter 4, Administrative Procedures Act.

(2) "Applicant" means an individual who applies for licensure or certification under this chapter by submitting a completed application for licensure or certification and the required fees to the department.

(3) "Approved education program" means a nursing education program that meets the requirements of Section 58-31b-601.

(4) "Board" means the Board of Nursing and Certified Nurse Midwives created in Section 58-31b-201.

(5) "Diagnosis" means the identification of and discrimination between physical and psychosocial signs and symptoms essential to the effective execution and management of health care.

(6) "Examinee" means an individual who applies to take or does take any examination

required under this chapter for licensure.

(7)(a) "License" means a license the division issues in accordance with this chapter.

(b) "License" includes a certification until the earlier of:

(i) the renewal; or

(ii) May 6, 2028.

(8)(a) "Licensee" means an individual who is licensed under this chapter.

(b) "Licensee" includes an individual who is certified until the earlier of:

(i) renewal; or

(ii) May 6, 2028.

(9) "Long-term care facility" means the following facilities the Department of Health and Human Services licenses under Title 26B, Chapter 2, Part 2, Health Care Facility Licensing and Inspection:

(a) a nursing care facility;

(b) a small health care facility;

(c) an intermediate care facility for people with an intellectual disability;

(d) an assisted living facility Type I or II; or

(e) a designated swing bed unit in a general hospital.

(10) "Practice of nurse anesthesia" means:

(a) in accordance with Section 58-31b-803, prescribing or administering of a Schedule II-V controlled substance;

(b) preanesthesia preparation and evaluation, including:

(i) performing a preanesthetic assessment of the patient; and

(ii) ordering and evaluating appropriate lab and other studies to determine the health of the patient;

(c) anesthesia induction, maintenance, and emergence, including:

(i) selecting and initiating the planned anesthetic technique;

(ii) selecting and administering anesthetics and adjunct drugs and fluids; and

(iii) administering general, regional, and local anesthesia;

(d) post anesthesia follow-up care, including evaluating the patient's response to anesthesia and implementing corrective actions; and

(e) other related services related to an activity described in Subsections (10)(a) through (10)(d), including:

(i) providing emergency airway management;

(ii) providing advanced cardiac life support; and

- 983 (iii) establishing peripheral, central, and arterial invasive lines.
- 984 (11) "Practice of nursing" means assisting a patient to maintain or attain optimal health,
985 implementing a strategy of care to accomplish defined goals and evaluating responses to
986 care and treatment, and requires substantial specialized or general knowledge, judgment,
987 and skill based upon principles of the biological, physical, behavioral, and social
988 sciences.
- 989 (12) "Registered nursing clinical practice experience" means providing nursing care to
990 patients as:
- 991 (a) a registered nurse; or
992 (b) a student in an approved education program as the division determines by rule the
993 division makes in accordance with Title 63G, Chapter 3, Utah Administrative
994 Rulemaking Act.
- 995 (13) "Routine medication" means an established medication that:
- 996 (a) is administered to a medically stable patient as determined by a licensed health care
997 provider or in consultation with a licensed health care provider; and
998 (b) is administered by the following routes:
- 999 (i) buccal;
1000 (ii) ear;
1001 (iii) eye;
1002 (iv) inhalation:
- 1003 (A) of a premeasured medication delivered by aerosol or nebulizer; or
1004 (B) of a medication delivered by a metered hand-held inhaler;
- 1005 (v) nasal;
1006 (vi) oral;
1007 (vii) rectal;
1008 (viii) sublingual;
1009 (ix) topical, including a skin ointment or a transdermal patch; or
1010 (x) vaginal.
- 1011 (14) "Unlawful conduct" means the same as that term is defined in Sections 58-1-501 and
1012 58-31b-501.
- 1013 (15) "Unlicensed assistive personnel" means an unlicensed individual, regardless of title,
1014 who is delegated a task by a licensed registered nurse as the division permits by rule the
1015 division makes in accordance with Title 63G, Chapter 3, Utah Administrative
1016 Rulemaking Act, and the standards of the profession.

(16) "Unprofessional conduct" means the same as that term is defined in Sections 58-1-501 and 58-31b-502 and as the division may define by rule the division makes in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

Section 12. Section **58-31b-103** is amended to read:

58-31b-103 (Effective 05/06/26). Nurse Education and Enforcement Account.

- (1) There is created a restricted account within the General Fund known as the "Nurse Education and Enforcement Account."
- (2) The restricted account shall consist of:
 - (a) administrative penalties imposed under Section 58-31b-503; and
 - (b) interest earned on money in the account.
- (3) Money in the account may be appropriated by the Legislature for the following purposes:
 - (a) education and training of licensees or potential licensees under this chapter;
 - (b) enforcement of this chapter by:
 - (i) investigating unprofessional or unlawful conduct;
 - (ii) providing legal representation to the division when legal action is taken against a person engaging in unprofessional or unlawful conduct; and
 - (iii) monitoring compliance of renewal requirements;
 - (c) survey nursing education programs throughout the state;
 - (d) education and training of board members; and
 - (e) establish and review [and approve nursing education programs and medication aide certified training programs] approved education programs.

Section 13. Section **58-31b-301** is amended to read:

58-31b-301 (Effective 05/06/26). License required -- Classifications.

- (1) [A] Except as provided in Sections 58-1-307 and 58-31b-308, a license is required to engage in the practice of nursing[; except as specifically provided in Sections 58-1-307 and 58-31b-308].
- (2) The division shall issue to an individual who qualifies under this chapter a license~~[or certification]~~ in the classification of:
 - ~~[(a) licensed practical nurse;]~~
 - ~~[(b) registered nurse apprentice;]~~
 - ~~[(c) registered nurse;]~~
 - ~~[(d) advanced practice registered nurse intern;]~~
 - ~~[(e) advanced practice registered nurse;]~~

~~[(f) advanced practice registered nurse - CRNA without prescriptive practice; and]
[(g) medication aide certified.]~~

(a) advanced practice registered nurse;

(b) advanced practice registered nurse - certified registered nurse anesthetist with
prescriptive authority;

(c) advanced practice registered nurse - without prescriptive practice license;

(d) advanced practice registered nurse intern;

(e) medication aide;

(f) practical nurse;

(g) registered nurse; or

(h) registered nurse apprentice.

(3)(a) ~~[An individual]~~ The division shall issue an advanced practice registered nurse -
without prescriptive practice license to an individual holding an advanced practice
registered nurse license as of July 1, 1998, and who cannot document the successful
completion of advanced course work in patient assessment, diagnosis and treatment,
and pharmacotherapeutics[, may not prescribe and shall be issued an "APRN-
without prescriptive practice" license].

(b) An individual who has an advanced practice registered nurse - without prescriptive
practice license may not prescribe medication.

(4) The division shall grant an advanced practice registered nurse license to [any] a licensed
advanced practice registered nurse currently holding prescriptive authority under [any] a
predecessor act.

~~[(5) An individual holding a certified registered nurse anesthetist license as of July 1, 2007,
shall be issued an "APRN - CRNA - without prescriptive practice" license.]~~

Section 14. Section **58-31b-302** is repealed and reenacted to read:

**58-31b-302 (Effective 05/06/26). Qualifications for licensure -- Scope of practice
-- Criminal background checks.**

(1) 6

(a) Each applicant for licensure under this chapter, except an applicant under Subsection
58-31b-301(2)(e), shall:

(i) consent to, and complete, a criminal background check, described in Section
58-1-301.5;

(ii) meet the standards that the division makes by rule in accordance with Title 63G,
Chapter 3, Utah Administrative Rulemaking Act, related to the criminal

background check described in Section 58-1-301.5; and

(iii) disclose the criminal history the division requests on a form the division approves.

(b) If an individual has been charged with a violent felony, as defined in Subsection 76-3-203.5(1)(c), and, as a result, the individual has been convicted, entered a plea of guilty or nolo contendere, or entered a plea of guilty or nolo contendere held in abeyance pending the successful completion of probation, the division shall act upon the license as required under Section 58-1-401.

(c) If an individual has been charged with a felony other than a violent felony, as defined in Subsection 76-3-203.5(1)(c), and, as a result, the individual has been convicted, entered a plea of guilty or nolo contendere, or entered a plea of guilty or nolo contendere held in abeyance pending the successful completion of probation, the division shall determine whether the felony disqualifies the individual for licensure under this chapter and act upon the license, as required, in accordance with Section 58-1-401.

(2)(a) An applicant for licensure as an advanced practice registered nurse shall:

(i) submit to the division an application on a form the division approves;

(ii) pay to the division a fee determined under Section 63J-1-504;

(iii) have the physical and mental health to safely perform the activities described in Subsection (2)(c);

(iv)(A) receive a graduate degree from an approved education program in advanced practice registered nursing or a related area of specialized knowledge as the division determines appropriate by rule the division makes in collaboration with the board and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act; or

(B) have completed a nurse anesthesia program in accordance with Subsection (2)(v)(B);

(v) have completed:

(A) course work in patient assessment, diagnosis and treatment, and pharmacotherapeutics from an approved education program; or

(B) a nurse anesthesia program that is approved by the Council on Accreditation of Nurse Anesthesia Educational Programs;

(vi) except as provided in Subsection (2)(b), provide evidence to the division, in a manner the division approves by rule the division makes in collaboration with the

- 1119 board and in accordance with Title 63G, Chapter 3, Utah Administrative
1120 Rulemaking Act, of at least 6,000 hours of registered nursing clinical practice
1121 experience;
- 1122 (vii) hold a current registered nurse license in good standing issued by the state or be
1123 qualified as a registered nurse;
- 1124 (viii) to practice within the psychiatric mental health nursing specialty, demonstrate,
1125 as the division requires by rule the division makes in accordance with Title 63G,
1126 Chapter 3, Utah Administrative Rulemaking Act, that the applicant is in the
1127 process of completing the applicant's clinical practice requirements in psychiatric
1128 mental health nursing, including psychotherapy;
- 1129 (ix) have passed the examinations the division requires by rule the division makes in
1130 collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
1131 Administrative Rulemaking Act; and
- 1132 (x) meet with the board, if the board requests, to determine the applicant's
1133 qualifications for licensure.
- 1134 (b)(i) Subsection (2)(a)(vi) does not apply to an applicant seeking licensure:
- 1135 (A) as an advanced practice registered nurse - certified registered nurse anesthetist
1136 with prescriptive authority; or
- 1137 (B) before July 1, 2028.
- 1138 (ii) The division may grant an exception to the requirements of Subsection (2)(a)(vi)
1139 before July 1, 2030, through rules the division makes in accordance with Title
1140 63G, Chapter 3, Utah Administrative Rulemaking Act.
- 1141 (c) A licensed advanced practice registered nurse may:
- 1142 (i) maintain and promote health and prevention of disease;
- 1143 (ii) diagnose, treat, correct, consult, and provide a referral;
- 1144 (iii) prescribe or administer prescription drugs or devices, including:
- 1145 (A) local anesthesia; and
- 1146 (B) a Schedule II-V controlled substance in accordance with Section 58-31b-803;
- 1147 (iv) if a licensed advanced practice registered nurse - certified registered nurse
1148 anesthetist, engage in the practice of nurse anesthesia; and
- 1149 (v) engage in other activities that are within the practice of advanced practice
1150 registered nursing as the division defines by rule the division makes in accordance
1151 with Title 63G, Chapter 3, Utah Administrative Rulemaking Act:
- 1152 (A) within the generally recognized scope and standards of advanced practice

1153 registered nursing; and

1154 (B) consistent with professionally recognized preparation and education standards
1155 of an advanced practice registered nurse.

1156 (d) The division may only define an activity as within the practice of advanced practice
1157 registered nursing if the activity is:

1158 (i) within the generally recognized scope of practice for a licensed advanced practice
1159 registered nurse; and

1160 (ii) consistent with professionally recognized standards.

1161 (3)(a) An applicant for licensure as a medication aide shall:

1162 (i) submit an application to the division on a form the division approves;

1163 (ii) pay a fee to the division as determined under Section 63J-1-504;

1164 (iii) have a high school diploma or the equivalent;

1165 (iv) have a current certification as a nurse aide, in good standing, from the
1166 Department of Health and Human Services;

1167 (v)(A) have a minimum of 2,000 hours of experience within the two years before
1168 the day on which the applicant submits the application, working as a certified
1169 nurse aide in a long-term care facility or another health care facility that the
1170 division designates by rule the division makes in collaboration with the board
1171 and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking
1172 Act; and

1173 (B) have a minimum of 60 hours of classroom training and 40 hours of practical
1174 training in administering a routine medication to a patient or a resident of a
1175 long-term care facility that the division or another health care facility that the
1176 division designates by rule the division makes in collaboration with the board
1177 and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking
1178 Act;

1179 (vi) obtain letters of recommendation from a health care facility administrator and a
1180 registered nurse familiar with the applicant's work practices as a certified nurse
1181 aide;

1182 (vii) have the physical and mental health to safely perform the activities described in
1183 Subsection (3)(b);

1184 (viii) have completed an approved education program for a medication aide or an
1185 equivalent the division determines by rule the division makes in collaboration
1186 with the board and in accordance with Title 63G, Chapter 3, Utah Administrative

- 1187 Rulemaking Act;
- 1188 (ix) have passed the examinations the division requires by rule the division makes in
- 1189 collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
- 1190 Administrative Rulemaking Act; and
- 1191 (x) meet with the board, if requested, to determine the applicant's qualifications for
- 1192 licensure.
- 1193 (b) While under the supervision of a licensed registered nurse, a licensed medication
- 1194 aide may:
- 1195 (i) provide routine patient care that requires minimal or limited specialized or general
- 1196 knowledge, judgment, and skill, to a patient who:
- 1197 (A) is ill, injured, infirm, or is physically, mentally, developmentally, or
- 1198 intellectually disabled; and
- 1199 (B) is in a regulated long-term care facility;
- 1200 (ii) administer a routine medication to a patient in accordance with a formulary and
- 1201 protocol the division defines by rule the division makes in accordance with Title
- 1202 63G, Chapter 3, Utah Administrative Rulemaking Act; and
- 1203 (iii) engage in other activities that are within the practice of a medication aide as the
- 1204 division defines by rule the division makes in accordance with Title 63G, Chapter
- 1205 3, Utah Administrative Rulemaking Act:
- 1206 (A) within the generally recognized scope and standards of a medication aide; and
- 1207 (B) consistent with professionally recognized preparation and education standards
- 1208 of a medication aide.
- 1209 (c) The division may only define an activity as within the practice of a medication aide if
- 1210 the activity is:
- 1211 (i) within the generally recognized scope of practice for a licensed medication aide;
- 1212 and
- 1213 (ii) consistent with professionally recognized standards.
- 1214 (d) A licensed medication aide may not assist a resident of a long-term care facility to
- 1215 self-administer a medication that the Department of Health and Human Services
- 1216 regulates by rule made in accordance with Title 63G, Chapter 3, Utah Administrative
- 1217 Rulemaking Act.
- 1218 (4)(a) An applicant for licensure as a licensed practical nurse shall:
- 1219 (i) submit to the division an application in a form the division approves;
- 1220 (ii) pay to the division a fee determined under Section 63J-1-504;

- 1221 (iii) have a high school diploma or the equivalent;
1222 (iv) have the physical and mental health to safely perform the activities described in
1223 Subsection (4)(b);
1224 (v) have completed an approved education program for practical nursing or an
1225 equivalent that the board approves;
1226 (vi) have passed the examinations the division requires by rule the division makes in
1227 collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
1228 Administrative Rulemaking Act; and
1229 (vii) meet with the board, if requested, to determine the applicant's qualifications for
1230 licensure.
- 1231 (b) A licensed practical nurse may, while under the direction of a licensed registered
1232 nurse, licensed physician, or other health care professional the division specifies by
1233 rule the division makes in accordance with Title 63G, Chapter 3, Utah Administrative
1234 Rulemaking Act:
- 1235 (i) contribute to the assessment of the health status of a patient;
1236 (ii) participate in the development and modification of the strategy of care;
1237 (iii) implement appropriate aspects of the strategy of care;
1238 (iv) maintain safe and effective nursing care rendered to a patient directly or
1239 indirectly;
1240 (v) participate in the evaluation of responses to interventions;
1241 (vi) perform other activities that are within the generally recognized scope of practice
1242 of a licensed practical nurse as the division defines by rule the division makes in
1243 accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act; and
1244 (vii) engage in practice of practical nursing, as the division defines by rule the
1245 division makes in accordance with Title 63G, Chapter 3, Utah Administrative
1246 Rulemaking Act, that is:
- 1247 (A) within the generally recognized scope and standards of practical nursing; and
1248 (B) consistent with professionally recognized preparation and education standards
1249 of a practical nurse.
- 1250 (c) The division may only define an activity as within the practice of practical nursing if
1251 the activity is:
- 1252 (i) within the generally recognized scope of practice for a licensed practical nurse; and
1253 (ii) consistent with professionally recognized standards.
- 1254 (5)(a) An applicant for licensure as a registered nurse shall:

- 1255 (i) submit to the division an application form the division approves;
1256 (ii) pay to the division a fee determined under Section 63J-1-504;
1257 (iii) have a high school diploma or the equivalent;
1258 (iv) have the physical and mental health to safely perform the activities described in
1259 Subsection (5)(b);
1260 (v) complete an approved education program for registered nursing that the division
1261 approves;
1262 (vi) have passed the examinations the division requires by rule the division makes in
1263 collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
1264 Administrative Rulemaking Act; and
1265 (vii) meet with the board, if the board requests, to determine the applicant's
1266 qualifications for licensure.
1267 (b) A licensed registered nurse may:
1268 (i) assess the health status of a patient;
1269 (ii) identify health care needs;
1270 (iii) establish goals to meet identified health care needs;
1271 (iv) plan a strategy of care;
1272 (v) prescribe nursing interventions to implement the strategy of care;
1273 (vi) implement the strategy of care;
1274 (vii) render safe and effective nursing care to a patient directly or indirectly;
1275 (viii) evaluate responses to nursing interventions;
1276 (ix) teach the theory and practice of nursing;
1277 (x) manage and supervise the practice of nursing;
1278 (xi) engage in other activities that are within the practice of a licensed registered
1279 nurse as the division defines by rule the division makes in accordance with Title
1280 63G, Chapter 3, Utah Administrative Rulemaking Act, that is:
1281 (A) within the generally recognized scope and standards of registered nursing; and
1282 (B) consistent with professionally recognized preparation and education standards
1283 of a registered nurse.
1284 (c) The division may only define an activity as within the practice of a licensed
1285 registered nurse if the activity is:
1286 (i) within the generally recognized scope of practice for a licensed registered nurse;
1287 and
1288 (ii) consistent with professionally recognized standards.

- (6)(a) An applicant for licensure as a registered nurse apprentice shall:
- (i) submit to the division an application form the division approves;
 - (ii) pay to the division a fee determined under Section 63J-1-504;
 - (iii) have a high school diploma or the equivalent;
 - (iv) have sufficient physical and mental health to safely perform the activities described in Subsection (6)(b);
 - (v) as determined by an approved education program, be:
 - (A) in good standing with the approved education program; and
 - (B) in the last two semesters, quarters, or competency experiences of the program;
 - (vi) have written permission from the program in which the applicant is enrolled; and
 - (vii) meet with the board, if requested, to determine the applicant's qualifications for licensure.
- (b) A licensed registered nurse apprentice may engage in the practice of a registered nurse that:
- (i) the division defines by rule the division makes that is:
 - (A) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
 - (B) within the generally recognized scope and standards of registered nursing; and
 - (C) consistent with professionally recognized preparation and education standards of a registered nurse;
 - (ii) the registered nurse apprentice performs under the indirect supervision of an individual licensed in accordance with:
 - (A) Subsection 58-31b-301(2)(a), (2)(b), (2)(c), or (2)(g);
 - (B) Chapter 67, Utah Medical Practice Act; or
 - (C) Chapter 68, Utah Osteopathic Medical Practice Act.

Section 15. Section **58-31b-303** is amended to read:

58-31b-303 (Effective 05/06/26). Qualifications for licensure -- Graduates of nonapproved nursing programs.

An applicant for licensure as a practical nurse or registered nurse who is a graduate of a nursing education program not approved by the division in collaboration with the board must comply with the requirements of this section.

(1) An applicant for licensure as a licensed practical nurse shall:

- (a) meet all requirements of Subsection ~~[58-31b-302(2)]~~ 58-31b-302(4), except Subsection ~~[58-31b-302(2)(e)]~~ 58-31b-302(4)(v); and

(b) produce evidence acceptable to the division and the board that the nursing education program completed by the applicant is equivalent to the minimum standards established by the division in collaboration with the board for an approved licensed practical nursing education program.

(2) An applicant for licensure as a registered nurse shall:

(a) meet all requirements of Subsection ~~[58-31b-302(4)]~~ 58-31b-302(5), except Subsection ~~[58-31b-302(4)(e)]~~ 58-31b-302(5)(iii); and

(b)(i) pass the Commission on Graduates of Foreign Nursing Schools (CGFNS) Examination; or

(ii) produce evidence acceptable to the division and the board that the applicant is currently licensed as a registered nurse in one of the states, territories, or the District of Columbia of the United States or in Canada and has passed the NCLEX-RN examination in English.

Section 16. Section **58-31b-304** is amended to read:

58-31b-304 (Effective 05/06/26). Qualifications for admission to the examinations.

(1) To be admitted to the examinations required for ~~[certification]~~ licensure as a ~~[medication aide-certified]~~ medication aide, an individual shall:

(a) submit an application on a form ~~[prescribed by the division]~~ the division approves;

(b) pay a fee as determined by the division under Section 63J-1-504; and

(c) meet all requirements of Subsection ~~[58-31b-302(1)]~~ 58-31b-302(3)(a), except Subsection ~~[(1)(i)]~~ (3)(a)(ix).

(2) To be admitted to the examinations required for licensure as a practical nurse, an individual shall:

(a) ~~[submit an application form prescribed by the division]~~ submit an application on a form the division approves;

(b) pay a fee as determined by the division under Section 63J-1-504; and

(c) meet all requirements of Subsection ~~[58-31b-302(2)]~~ 58-31b-302(4)(a), except Subsection ~~[(2)(f)]~~ (4)(a)(vi).

(3) To be admitted to the examinations required for licensure as a registered nurse, an individual shall:

(a) ~~[submit an application form prescribed by the division]~~ submit an application on a form the division approves;

(b) pay a fee as determined by the division under Section 63J-1-504; and

(c) meet all the requirements of Subsection ~~[58-31b-302(4)]~~ 58-31b-302(5)(a), except

Subsection~~[(4)(f)]~~ (5)(a)(vi).

Section 17. Section **58-31b-306.1** is amended to read:

58-31b-306.1 (Effective 05/06/26). Registered nurse apprentice license.

- (1) The division shall issue a registered nurse apprentice license to an individual who meets the qualifications under Subsection ~~[58-31b-302(3)]~~ 58-31b-302(6).
- (2) Unless the division extends the license for a specified period of time by written notification provided to the individual, the license expires on the earlier of:
 - (a) one year from the day on which the license is issued;
 - (b) 75 days after the day on which the division receives notice from the examination agency that the individual failed to take or pass the examinations described in Subsection ~~[58-31b-302(4)(f)]~~ 58-31b-302(5)(a)(vi); or
 - (c) the day on which the division issues the individual a license as a registered nurse.
- (3) A license described in Subsection (1) is:
 - (a) valid only in Utah; and
 - (b) not an eligible license under Chapter 31e, Nurse Licensure Compact - Revised.
- (4) The division may make rules to administer the license described in Subsection (1) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

Section 18. Section **58-31b-401** is amended to read:

58-31b-401 (Effective 05/06/26). Grounds for denial of licensure and disciplinary proceedings.

- ~~[(1)(a) As used in this section, "licensed" or "license" includes certified or certification under this chapter.]~~
- ~~[(b) A term or condition applied to the word "nurse" under this section applies to a medication aide certified.]~~
- ~~[(2)]~~ (1) Grounds for refusal to issue a license to an applicant, for refusal to renew the license of a licensee, to revoke, suspend, restrict, or place on probation the license of a licensee, to issue a public or private reprimand to a licensee, and to issue cease and desist orders shall be in accordance with Section 58-1-401.
- ~~[(3)]~~ (2)(a)(i) Subject to Subsection ~~[(7)]~~ (6), if a court ~~[of competent]~~ with jurisdiction determines a ~~[nurse]~~ licensee is incapacitated, as defined in Section 75-1-201 or that the ~~[nurse]~~ licensee has a mental illness, as defined in Section 26B-5-301, and is unable to safely engage in the practice of nursing, the director shall immediately suspend the license of the ~~[nurse]~~ licensee upon the entry of the judgment of the court, without further proceedings under Title 63G, Chapter 4, Administrative

Procedures Act, regardless of whether an appeal from the court's ruling is pending.

(ii) The director shall promptly notify the [nurse] licensee in writing of a suspension under Subsection ~~[(3)(a)(i)]~~ (2)(a)(i).

(b)(i) Subject to Subsection ~~[(7)]~~ (6), if the division and the majority of the board find reasonable cause to believe a [nurse] licensee who is not determined judicially to be an incapacitated person or to have a mental illness, is incapable of practicing nursing with reasonable skill regarding the safety of patients, because of illness, excessive use of drugs or alcohol, or as a result of any mental or physical condition, the board shall recommend that the director file a petition with the division, and cause the petition to be served upon the [nurse] licensee with a notice of hearing on the sole issue of the capacity of the [nurse] licensee to competently, safely engage in the practice of nursing.

(ii) Except as provided in Subsection ~~[(4)]~~ (3), the hearing described in Subsection ~~[(3)(b)(i)]~~ (4)(a) shall be conducted under Section 58-1-109 and Title 63G, Chapter 4, Administrative Procedures Act.

~~[(4)]~~ (3)(a) Every [nurse] licensee who accepts the privilege of being licensed under this chapter gives consent to:

(i) ~~[submitting-]~~ submit to an immediate mental or physical examination, at the [nurse] licensee's expense and by a division-approved [practitioner] health care provider selected by the [nurse] licensee when directed in writing by the division and a majority of the board to do so; and

(ii) ~~[the admissibility of-]~~ admit the reports of the examining [practitioner] health care provider's testimony or examination~~[-]~~; and

(iii) ~~[waives-]~~ waive all objections on the ground the reports constitute a privileged communication.

(b) ~~[The examination may be ordered by the-]~~ The division, with the consent of a majority of the board, may order an examination only upon a finding of reasonable cause to believe:

(i) the [nurse] licensee has a mental illness, is incapacitated, or otherwise is unable to practice nursing with reasonable skill and safety; and

(ii) immediate action by the division and the board is necessary to prevent harm to the [nurse] licensee's patients or the general public.

(c)(i) ~~[Failure of a nurse to submit to the examination ordered under this section is a ground for the division's immediate suspension of the nurse's license by written~~

~~order of the director]~~ By written order of the director, the division may immediately suspend a licensee's license if the licensee fails to submit an examination the division requires in accordance with this section.

(ii) ~~[The division may enter the order of suspension without further compliance with Title 63G, Chapter 4, Administrative Procedures Act, unless the division finds the failure to submit to the examination ordered under this section was due to circumstances beyond the control of the nurse and was not related directly to the illness or incapacity of the nurse]~~ The division may issue an order of suspension without further complying with Title 63G, Chapter 4, Administrative Procedures Act, unless the division determines that the licensee failed to submit to the examination the division requires due to circumstances beyond the licensee's control and unrelated to the licensee's health or capacity.

~~[(5)]~~ (4)(a) A ~~[nurse]~~ licensee whose license is suspended under Subsection ~~[(3) or (4)(e)]~~ (2) or (3)(c) has the right to a hearing to appeal the suspension within 10 days after the license is suspended.

(b) The hearing held under this Subsection ~~[(5)]~~ (4) shall be conducted in accordance with Sections 58-1-108 and 58-1-109 for the sole purpose of determining if sufficient basis exists for the continuance of the order of suspension in order to prevent harm to the ~~[nurse]~~ licensee's patients or the general public.

~~[(6)]~~ (5) A ~~[nurse]~~ licensee whose license is revoked, suspended, or in any way restricted under this section may request the division and the board to consider, at reasonable intervals, evidence presented by the ~~[nurse]~~ licensee, under procedures ~~[established by division rule]~~ the division makes by rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, regarding any change in the ~~[nurse]~~ licensee's condition, to determine whether:

(a) the ~~[nurse]~~ licensee is or is not able to safely and competently engage in the practice of nursing; and

(b) the ~~[nurse]~~ licensee is qualified to have the ~~[nurse]~~ licensee's license to practice under this chapter restored completely or in part.

~~[(7)]~~ (6) The division may not refuse, revoke, suspend, or in any way restrict an applicant or licensee's license under this chapter solely because the applicant or licensee seeks or participates in mental health or substance abuse treatment.

~~[(8)]~~ (7) Section 63G-2-206 may not be construed as limiting the authority of the division to report current significant investigative information to the coordinated licensure

information system for transmission to party states as required of the division by Article VII of the Nurse Licensure Compact [~~-Revised-~~] revised in Section 58-31e-102.

Section 19. Section **58-31b-501** is amended to read:

58-31b-501 (Effective 05/06/26). Unlawful conduct.

"Unlawful conduct" includes:

- (1) using the following titles, names or initials, if the user is not properly licensed [~~or certified-~~]under this chapter:
 - (a) nurse;
 - (b) licensed practical nurse, practical nurse, or L.P.N.;
 - (c) [~~medication aide certified, or M.A.C.;~~] licensed medication aide, or L.M.A.;
 - (d) registered nurse or R.N.;
 - (e) registered nurse practitioner, N.P., or R.N.P.;
 - (f) registered nurse specialist, N.S., or R.N.S.;
 - (g) registered psychiatric mental health nurse specialist;
 - (h) advanced practice registered nurse;
 - (i) nurse anesthetist, certified nurse anesthetist, certified registered nurse anesthetist, or C.R.N.A.; or
 - (j) other generally recognized names or titles used in the profession of nursing;
- (2)(a) using any other name, title, or initials that would cause a reasonable person to believe the user is licensed [~~or certified-~~]under this chapter if the user is not properly licensed [~~or certified-~~]under this chapter; and
- (b) [~~for purposes of Subsection (2)(a), it is unlawful conduct for a medication aide certified to use the term]~~ using the word "nurse" as a part of a title when licensed as a medication aide; and
- (3) conducting a nursing education program in the state for the purpose of qualifying individuals to meet requirements for licensure under this chapter without the program having been approved under Section 58-31b-601.

Section 20. Section **58-31b-502** is amended to read:

58-31b-502 (Effective 05/06/26). Unprofessional conduct.

- (1) "Unprofessional conduct" includes:
 - (a) failure to safeguard a patient's right to privacy as to the patient's person, condition, diagnosis, personal effects, or any other matter about which the licensee is privileged to know because of the licensee's [~~or person with a certification's-~~]position or practice as a [~~nurse or practice as a medication aide certified]~~ licensee;

- (b) failure [~~to provide nursing service or service as a medication aide certified~~] of a licensee to provide licensed service in a manner that demonstrates respect for the patient's human dignity and unique personal character and needs without regard to the patient's race, religion, ethnic background, socioeconomic status, age, sex, or the nature of the patient's health problem;
- (c) engaging in sexual relations with a patient during any:
- (i) period when a generally recognized professional relationship exists between the person licensed or certified under this chapter and the patient; or
 - (ii) extended period when a patient has reasonable cause to believe a professional relationship exists between [~~the person licensed or certified under the provisions of this chapter~~] a licensee and the patient;
- (d)(i) as a result of any circumstance [~~under~~] described in Subsection (1)(c), exploiting or using information about a patient or exploiting the licensee's [~~or the person with a certification's~~] professional relationship between the licensee [~~or holder of a certification under this chapter~~] and the patient; or
- (ii) exploiting the patient by use of the licensee's [~~or person with a certification's~~] knowledge of the patient obtained while acting as a [~~nurse or a medication aide certified~~] licensee;
- (e) unlawfully obtaining, possessing, or using any prescription drug or illicit drug;
- (f) unauthorized taking or personal use of nursing supplies from an employer;
- (g) unauthorized taking or personal use of a patient's personal property;
- (h) unlawful or inappropriate delegation of nursing care;
- (i) failure to exercise appropriate supervision of persons providing patient care services under supervision of the licensed nurse;
- (j) employing or aiding and abetting the employment of an unqualified or unlicensed person to practice as a nurse;
- (k) failure to file or record any medical report as required by law, impeding or obstructing the filing or recording of such a report, or inducing another to fail to file or record such a report;
- (l) breach of a statutory, common law, regulatory, or ethical requirement of confidentiality with respect to a person who is a patient, unless ordered by a court;
- (m) failure to pay a penalty imposed by the division;
- (n) violating Section 58-31b-801;
- (o) violating the dispensing requirements of Section 58-17b-309 or Chapter 17b, Part 8,

- 1527 Dispensing Medical Practitioner and Dispensing Medical Practitioner Clinic
1528 Pharmacy, if applicable;
- 1529 (p) performing or inducing an abortion in violation of the requirements of Section
1530 76-7-302 or Section 76-7a-201, regardless of whether ~~[the person licensed or~~
1531 ~~certified under the provisions of this chapter is]~~ the licensee is found guilty of a crime
1532 in connection with the violation;
- 1533 (q) falsely making an entry in, or altering, a medical record with the intent to conceal:
1534 (i) a wrongful or negligent act or omission of ~~[an individual licensed under this~~
1535 ~~chapter]~~ a licensee or an individual under the direction or control of ~~[an individual~~
1536 ~~licensed under this chapter]~~ a licensee; or
1537 (ii) conduct described in Subsections (1)(a) through (n) or Subsection 58-1-501(1);
- 1538 (r) violating the requirements of Title 26B, Chapter 4, Part 2, Cannabinoid Research and
1539 Medical Cannabis; or
- 1540 (s) for an advance practice registered nurse, designating a child as do not resuscitate
1541 without parental consent.
- 1542 (2) "Unprofessional conduct" does not include, in accordance with Title 26B, Chapter 4,
1543 Part 2, Cannabinoid Research and Medical Cannabis, when acting as a recommending
1544 medical provider, as that term is defined in Section 26B-4-201, recommending the use
1545 of medical cannabis.
- 1546 (3) Notwithstanding Subsection (2), the division, in consultation with the board and in
1547 accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, shall
1548 define unprofessional conduct for an advanced practice registered nurse~~[- described in~~
1549 ~~Subsection (2)]~~.
- 1550 Section 21. Section **58-31b-601** is amended to read:
- 1551 **58-31b-601 (Effective 05/06/26). Minimum standards for nursing programs to**
1552 **qualify graduates -- Temporary approval to qualify graduates for licensure -- Minimum**
1553 **standards for medication aide training to qualify individuals for licensure.**
- 1554 (1) Except as provided in Subsections (2) and (3), to qualify as an approved education
1555 program for the purpose of qualifying graduates for licensure under this chapter, a
1556 nursing education program shall be accredited by an accrediting body for nursing
1557 education that is recognized by the United States Department of Education.
- 1558 (2)(a) The division, in consultation with the board, may approve ~~[a nursing]~~ an education
1559 program for up to five years~~[- for the purpose of qualifying graduates for licensure~~
1560 ~~under this chapter,]~~ if the program:

- 1561 (i) holds candidacy or is in the process of applying for candidacy for the accreditation
 1562 described in Subsection (1);
 1563 (ii) has been denied initial accreditation after holding candidacy for the accreditation
 1564 described in Subsection (1); or
 1565 (iii) is no longer accredited under Subsection (1); and
 1566 (b) has not previously received a term of approval granted by the division.
- 1567 (3)(a) For a nursing education program that has previously received a term of approval
 1568 granted under Subsection (2), the division may reapprove the nursing education
 1569 program ~~[for the purpose of qualifying graduates for licensure]~~if:
 1570 (i) the reapproval is for a period that does not exceed five years; and
 1571 (ii) a minimum of 12 months has passed since the day on which the previous term of
 1572 approval expired.
- 1573 (b) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
 1574 division, in consultation with the board, shall make rules to implement Subsection
 1575 (3)(a).
- 1576 (4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, and the
 1577 provisions of this chapter, the division shall make rules defining the minimum standards
 1578 for a ~~[medication aide certified]~~ medication aide training program to qualify a person for [
 1579 certification] licensure under this chapter as a ~~[medication aide certified]~~ medication aide.
- 1580 Section 22. Section **58-31b-803** is amended to read:
- 1581 **58-31b-803 (Effective 05/06/26). Advanced practice registered nurse prescriptive**
 1582 **authority.**
- 1583 (1) ~~[Except as provided in]~~ Subject to Subsection (2), a licensed advanced practice
 1584 registered nurse may prescribe or administer a Schedule II-V controlled substance.
- 1585 (2) ~~[This section does not apply to an]~~ A licensed advanced practice registered nurse [
 1586 specializing as a] - certified registered nurse anesthetist [under Subsection
 1587 58-31b-102(11)(d).] in accordance with Subsection 58-31b-302(2) may prescribe only as
 1588 follows:
- 1589 (a) prescribe up to a five-day supply of Schedule II-V controlled substances immediately
 1590 before a procedure if:
- 1591 (i) the licensed advanced practice registered nurse - certified registered nurse
 1592 anesthetist will participate in the procedure;
- 1593 (ii) the licensed advanced practice registered nurse - certified registered nurse
 1594 anesthetist has established a patient record for the patient receiving the

- 1595 prescription; and
- 1596 (iii) the prescribed controlled substance is related to the procedure; or
- 1597 (b) prescribe up to a five-day supply of Schedule II-V controlled substances immediately
- 1598 following a procedure if:
- 1599 (i) the licensed advanced practice registered nurse - certified registered nurse
- 1600 anesthetist participated in the procedure;
- 1601 (ii) the licensed advanced practice registered nurse - certified registered nurse
- 1602 anesthetist has established a patient record for the patient receiving the
- 1603 prescription; and
- 1604 (iii) the prescribed controlled substance is related to the procedure.

1605 Section 23. Section **58-31d-102** is amended to read:

1606 **58-31d-102 (Effective 05/06/26). Division rulemaking.**

- 1607 (1) The division shall make rules in accordance with Title 63G, Chapter 3, Utah
- 1608 Administrative Rulemaking Act, to implement Section 58-31d-101.
- 1609 (2) For purposes of Section 58-31d-101, "role" as defined in Article II(17) includes an
- 1610 individual who is:
- 1611 (a) licensed to practice under [~~Subsection 58-31b-301(2)(d) or (e)~~] Subsections
- 1612 58-31b-301(2)(a) through (c); or
- 1613 (b) licensed to practice under Section 58-44a-301.
- 1614 (3) Notwithstanding any provision in Section 58-31d-101, Section 58-31d-101 does not
- 1615 supersede state law related to an individual's scope of practice under this title.
- 1616 (4) Once the compact comes into effect as described in Section 58-31d-101, Article X(1),
- 1617 the division shall provide a notice that the compact is in effect:
- 1618 (a) to an individual licensed under:
- 1619 (i) Subsection 58-31b-301(2)(d) or (e);
- 1620 (ii) Section 58-44a-301; and
- 1621 (b) to the Health and Human Services Interim Committee; and
- 1622 (c) on the division's website with information for potential applicants.

1623 Section 24. Section **58-40a-102** is amended to read:

1624 **58-40a-102 (Effective 05/06/26). Definitions.**

1625 [~~In addition to the definitions in Section 58-1-102, as]~~ As used in this chapter:

- 1626 (1) "Adequate records" means legible records that contain, at a minimum:
- 1627 (a) the athletic training service plan or protocol;
- 1628 (b) an evaluation of objective findings;

(c) the plan of care and the treatment records; ~~[or]~~ and

(d) written orders.

(2) "Athlete" means an individual~~[-referee, coach, or athletic staff member]~~ who participates ~~[in exercises, sports, or games requiring]~~ in or performs an exercise, a sport, a game, or an occupation that requires physical strength, agility, flexibility, range of motion, speed, or stamina, and the ~~[exercises, sports, or games are]~~ exercise, sport, game, or occupation is of a type generally conducted in association with an educational institution or professional, amateur, or recreational sports club or organization.

(3) "Athletic injury" means:

(a) an injury ~~[sustained by]~~ an athlete sustains that affects the ~~[individual's]~~ athlete's participation or performance in ~~[sports, games, recreation, or exercise]~~ an exercise, a sport, a game, or an occupation; or

(b) a condition that is within the scope of practice ~~[of an athletic trainer identified by a]~~ for athletic training that a directing physician or a licensed physical therapist identifies as benefitting from an athletic training ~~[services]~~ service.

(4) "Athletic trainer" means an individual who is licensed under this chapter and ~~[carries out the practice of]~~ performs within the scope of practice for athletic training.

(5) "Board" means the Athletic Trainers Licensing Board created in Section 58-40a-201.

(6) ~~["Directing physician"]~~ "Collaborating physician" means a licensed physician who works in collaboration with an athletic trainer and is:

(a) a physician and surgeon licensed under Section 58-67-301[;];

(b) an osteopathic physician and surgeon licensed under Section 58-68-301[;];

(c) a chiropractic physician licensed under Chapter 73, Chiropractic Physician Practice Act[;];

(d) a naturopathic physician licensed under Chapter 71, Naturopathic Physician Practice Act[;]; or

(e) a dentist licensed under Section 58-69-301~~[-who, within the licensee's scope of practice and individual competency, is responsible for the athletic training services provided by the athletic trainer and oversees the practice of athletic training by the athletic trainer, as established by board rule].~~

(7) "Collaboration" means the consultation, correspondence, or direction by order, or referral between a licensed athletic trainer and a licensed physician.

~~[(7) The "practice of athletic training" means the application by a licensed and certified athletic trainer of principles and methods of:]~~

- 1663 ~~[(a) prevention of athletic injuries;]~~
- 1664 ~~[(b) recognition, evaluation, and assessment of athletic injuries and conditions;]~~
- 1665 ~~[(c) immediate care of athletic injuries, including common emergency medical situations;]~~
- 1666 ~~[(d) rehabilitation and reconditioning of athletic injuries;]~~
- 1667 ~~[(e) athletic training services administration and organization; and]~~
- 1668 ~~[(f) education of athletes.]~~

1669 Section 25. Section **58-40a-201** is amended to read:

1670 **58-40a-201 (Effective 05/06/26). Board composition -- Duties and responsibilities.**

- 1671 (1) There is created the Athletic Trainers Licensing Board consisting of:
 - 1672 (a) four licensed athletic trainers[;] ;
 - 1673 (b) one member representative of the ~~[directing]~~ collaborating physicians referred to in
 - 1674 Subsection 58-40a-102(6)[;] ; and
 - 1675 (c) one member of the general public who has never been authorized to practice a
 - 1676 healing art and never had a substantial personal, business, professional, or pecuniary
 - 1677 connection with a healing art or with a medical education or health care facility,
 - 1678 except as a client or potential client.
- 1679 (2) The board shall be appointed and serve in accordance with Section 58-1-201.
- 1680 (3) The board shall carry out the duties and responsibilities in Sections 58-1-202 and
- 1681 58-1-203[;] and shall designate one of [its] the board's members on a permanent or
- 1682 rotating basis to:
 - 1683 (a) assist the division in reviewing complaints concerning the unlawful or unprofessional
 - 1684 conduct of a licensee under this chapter; and
 - 1685 (b) advise the division ~~[of its]~~ in the division's investigation of these complaints.
- 1686 (4) A board member who has, under Subsection (3), reviewed a complaint or advised in [its]
- 1687 the complaint's investigation may be disqualified from participating with the board when
- 1688 the board serves as a presiding officer in an adjudicative proceeding concerning the
- 1689 complaint.

1690 Section 26. Section **58-40a-303** is amended to read:

1691 **58-40a-303 (Effective 05/06/26). Scope of practice.**

- 1692 (1) An athletic trainer may:
 - 1693 ~~[(+)]~~ (a) prevent injuries by:
 - 1694 ~~[(a)]~~ (i) designing and implementing physical conditioning programs, which may
 - 1695 include:
 - 1696 ~~[(+)]~~ (A) strength and range of motion testing;

- 1697 [(ii)] (B) nutritional advisement; and
- 1698 [(iii)] (C) psychosocial intervention and referral;
- 1699 [(b)] (ii) performing preparticipation screening;
- 1700 [(e)] (iii) fitting protective equipment;
- 1701 [(d)] (iv) designing and constructing protective products; and
- 1702 [(e)] (v) continuously monitoring changes in the environment;
- 1703 [(2)] (b) recognize and evaluate injuries by:
- 1704 [(a)] (i) obtaining a history of the injury;
- 1705 [(b)] (ii) inspecting an injured body part and associated structures;
- 1706 [(e)] (iii) palpating bony landmarks and soft tissue structures; and
- 1707 [(d)] (iv) performing clinical tests to determine the extent of an injury;
- 1708 [(3)] (c) provide immediate care of injuries by:
- 1709 [(a)] (i) initiating cardiopulmonary resuscitation;
- 1710 [(b)] (ii) administering basic or advanced first aid;
- 1711 [(e)] (iii) removing athletic equipment; and
- 1712 [(d)] (iv) immobilizing and transporting an injured athlete;
- 1713 [(4)] (d) determine whether an athlete may return to participation or, if the injury requires
- 1714 further definitive care, refer the athlete to the appropriate directing physician;
- 1715 [(5)] (e) rehabilitate and recondition an injury by administering therapeutic exercise and
- 1716 therapeutic and physical modalities, including cryotherapy, thermotherapy, and
- 1717 intermittent compression, electrical stimulation, ultra sound, traction devices, or
- 1718 mechanical devices~~[-as directed by established, written athletic training service plans~~
- 1719 ~~or protocols or upon the order of a directing physician];~~
- 1720 [(6)] (f) provide athletic training services administration, including:
- 1721 [(a)] (i) implementing athletic training service plans or protocols;
- 1722 [(b)] (ii) writing organizational policies and procedures;
- 1723 [(e)] (iii) complying with governmental and institutional standards; and
- 1724 [(d)] (iv) maintaining records to document services rendered; and
- 1725 [(7)] (g) educate athletes to facilitate physical conditioning and reconditioning by
- 1726 designing and implementing appropriate programs to minimize the risk of injury.
- 1727 (2) A licensed athletic trainer shall collaborate with a licensed physician when the athletic
- 1728 injury:
- 1729 (a) is beyond the athletic trainer's scope of practice or expertise;
- 1730 (b) is a suspected head or traumatic brain injury, including concussion; or

(c) is unresponsive to treatment.

(3) An athletic trainer shall record collaboration with a physician regarding an athlete or athletic injury.

(4) Nothing in this section prevents a physician from employing, directing, supervising, establishing protocols for, or assisting an athletic trainer in performing within the scope of practice for athletic training consistent with the scope of practice and professional standards of each practitioner.

Section 27. Section **58-42a-102** is amended to read:

58-42a-102 (Effective 05/06/26). Definitions.

As used in this chapter:

(1) "Board" means the Physical Therapies Licensing Board created in Section 58-24b-201.

(2)(a) "Individual treatment plan" means a written record ~~[composed for each client by the individual licensed under this chapter to engage]~~ an individual engaging in the practice of occupational therapy composes for each client.

(b) "Individual treatment plan" includes:

(i) planning and directing specific exercises and programs to improve sensory integration and motor functioning at the level of performance neurologically appropriate for the ~~[individual's]~~ client's stage of development;

(ii) establishing a program of instruction to teach a client skills, behaviors, and attitudes necessary for the client's independent productive, emotional, and social functioning;

(iii) analyzing, selecting, and adapting functional exercises to achieve and maintain the client's optimal functioning in activities of daily living and to prevent further disability; and

(iv) planning and directing specific programs to evaluate and enhance a client's perceptual, motor, and cognitive skills.

(3) "Occupational therapist" means an individual licensed under this chapter to practice occupational therapy.

(4) "Occupational therapy aide" means an individual who is not licensed under this chapter ~~[but who]~~ but provides supportive services under the supervision of an occupational therapist or occupational therapy assistant.

(5) "Occupational therapy assistant" means an individual licensed under this chapter to practice occupational therapy under the supervision of an occupational therapist as described in Sections 58-42a-305 and 58-42a-306.

- (6)(a) "Practice of occupational therapy" means the therapeutic use of everyday life activities with ~~[an individual]~~ a client who:
- (i) ~~[that]~~has or is at risk of developing an illness, injury, disease, disorder, condition, impairment, disability, activity limitation, or participation restriction; and
 - (ii) ~~[to develop or restore the individual's]~~ needs assistance developing or restoring the ability to engage in everyday life activities by addressing physical, cognitive, mental wellness, psychosocial, sensory, or other aspects of the ~~[individual's]~~ client's performance.
- (b) "Practice of occupational therapy" includes:
- (i) establishing, remediating, or restoring an undeveloped or impaired skill or ability of ~~[an individual]~~ a client;
 - (ii) modifying or adapting an activity or environment to enhance ~~[an individual's]~~ a client's performance;
 - (iii) maintaining and improving ~~[an individual's]~~ a client's capabilities to avoid declining performance in everyday life activities;
 - (iv) promoting health and wellness to develop or improve ~~[an individual's]~~ a client's performance in everyday life activities;
 - (v) performance-barrier prevention for ~~[an individual]~~ a client, including ~~[disability prevention]~~ preventing a disability;
 - (vi) evaluating factors that affect ~~[an individual's]~~ a client's activities of daily living in educational, work, play, leisure, and social situations, including:
 - (A) body functions and structures;
 - (B) habits, routines, roles, and behavioral patterns;
 - (C) cultural, physical, environmental, social, virtual, and spiritual contexts and activity demands that affect performance; and
 - (D) motor, process, communication, interaction, and other performance skills;
 - (vii) providing interventions and procedures to promote or enhance ~~[an individual's]~~ a client's safety and performance in activities of daily living in educational, work, and social situations, including:
 - (A) ~~[the therapeutic use of]~~ using therapeutic occupations and exercises;
 - (B) training in self-care, self-management, home-management, and community and work reintegration;
 - (C) ~~[the development, remediation, or compensation of]~~ developing, remediating, or compensating behavioral skills and physical, cognitive, neuromuscular, and

1799 sensory functions;

1800 (D) ~~[the education]~~ educating and training of ~~[an individual's]~~ a client's family
1801 members and caregivers;

1802 (E) ~~[care coordination]~~ coordinating care, case management, and transition
1803 services;

1804 (F) providing a consulting ~~[services to groups, programs, organizations, or~~
1805 ~~communities,]~~ service to a group, a program, an organization, or a community;

1806 (G) modifying the environment and adapting ~~[processes]~~ a process, including the
1807 application of ergonomic principles;

1808 (H) assessing, designing, fabricating, applying, fitting, and providing training in
1809 assistive technology, adaptive devices, orthotic devices, and prosthetic devices;

1810 (I) prescribing durable medical equipment or an adaptive device to a patient
1811 without requesting a prescription from a licensed physician;

1812 ~~[(H)]~~ (J) assessing, recommending, and training ~~[an individual]~~ a client in [
1813 ~~techniques]~~ a technique to enhance functional mobility, including wheelchair
1814 management;

1815 ~~[(J)]~~ (K) providing driver rehabilitation and community mobility;

1816 ~~[(K)]~~ (L) enhancing eating and feeding performance;

1817 ~~[(L)]~~ (M) applying a physical agent ~~[modalities]~~ modality, managing wound care,
1818 dry needling, [and] or using a manual therapy ~~[techniques]~~ technique to enhance [
1819 ~~an individual's]~~ a client's performance skills, if the occupational therapist has
1820 received the necessary training as ~~[determined by]~~ the division determines by
1821 rule made in collaboration with the board and in accordance with Title 63G,
1822 Chapter 3, Utah Administrative Rulemaking Act; or

1823 ~~[(M)]~~ (N) applying dry needling to enhance ~~[an individual's]~~ a client's occupational
1824 performance if the occupational therapy practitioner has received the necessary
1825 training ~~[as determined by]~~ as the division determines by rule the division
1826 makes in collaboration with the board and in accordance with Title 63G,
1827 Chapter 3, Utah Administrative Rulemaking Act.

1828 (7) "Unlawful conduct" means the same as that term is defined in Sections 58-1-501 and
1829 58-42a-501.

1830 (8) "Unprofessional conduct" means the same as that term is defined in Sections 58-1-501
1831 and 58-42a-502.

1832 Section 28. Section **58-42a-306** is amended to read:

58-42a-306 (Effective 05/06/26). Supervision requirements.

An occupational therapist who is supervising an occupational therapy assistant shall:

- (1) write or contribute to an individual treatment plan before referring a client to [a supervised] the occupational therapy assistant for treatment;
- (2) approve and cosign on all modifications to the individual treatment plan;
- (3) meet face to face with the [supervised-]occupational therapy assistant as often as necessary but at least once every two weeks in person or by video conference, and at least one time every month in person, to adequately provide consultation, advice, training, and direction to the occupational therapy assistant;
- (4) meet with each client who has been referred to [a-supervised] the occupational therapy assistant at least once each month, to further assess the patient, evaluate the treatment, and modify the individual's treatment plan, except that if the interval of client care occurs one time per month or less, the occupational therapist shall meet with the client at least once every four visits;
- (5) ~~[supervise no more than two full-time occupational therapy assistants at one time, or four part-time occupational therapy assistants if the combined work hours of the assistants do not exceed 40 hours per week, unless otherwise approved by the division in collaboration with the board]~~ supervise occupational therapy assistants in accordance with rules the division makes in collaboration with the board and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
- (6) remain responsible for client treatment provided by the occupational therapy assistant; and
- (7) fulfill any other supervisory responsibilities as determined by division rule.

Section 29. Section **58-46a-102** is amended to read:

58-46a-102 (Effective 05/06/26) (Repealed 07/01/33). Definitions.

~~[In addition to the definitions in Section 58-1-102, as]~~ As used in this chapter:

- (1)(a) "Certified individual" means an individual who is:
 - (i) certified under this chapter; or
 - (ii) licensed under this chapter before May 6, 2026, if the license is not expired, suspended, or revoked.
- (b) "Certified individual" means the same as a licensed individual for purposes of credentialing, paneling, insurance, reimbursement, portability, and compacts.
- ~~[(4)]~~ (2) "Direct supervision" means [that] supervision where the supervising audiologist or supervising hearing instrument specialist is present in the same facility as is the [person]

individual being supervised and is available for immediate in person consultation.

[(2) "Hearing instrument" or "hearing aid" means any device designed or offered to be worn on or by an individual to enhance human hearing, including the device's specialized parts, attachments, or accessories.]

(3)(a) "Hearing instrument" means a wearable device offered to compensate for human hearing loss, including the device's parts, attachments, or accessories.

(b) "Hearing instrument" does not include a device that is surgically implanted in the cochlea or under the skin near the ear.

[(3)] (4) "Hearing instrument intern" means [a person-licensed] an individual certified under this chapter who is obtaining education and experience in the practice of a hearing instrument specialist under the supervision of a supervising hearing instrument specialist or supervising audiologist.

(5) "Hearing instrument specialist" means an individual who:

(a) establishes a place of business to practice as a hearing instrument specialist;

(b) tests the hearing of a human patient over 17 years old for the sole purpose of determining whether the use of a hearing instrument will improve hearing loss sufficiently to justify prescribing and selling the hearing instrument and whether that hearing instrument will be in the best interest of the patient;

(c) provides the patient a written statement of prognosis regarding the need for or usefulness of a hearing instrument for the patient's condition;

(d) prescribes an appropriate hearing instrument;

(e) makes impressions or ear molds for the fitting of a hearing instrument;

(f) sells and professionally places the hearing instrument on a patient;

(g) evaluates the hearing loss overcome by the installation of the hearing instrument and evaluates the hearing recovery against the representations the hearing instrument specialist made to the patient;

(h) intervening to produce satisfactory hearing recovery results from a hearing instrument; or

(i) instructing the patient on the use and care of the hearing instrument.

[(4)] (6) "Indirect supervision" means [that] supervision where the supervising hearing instrument specialist or supervising audiologist is not required to be present in the same facility as [is the person] the individual being supervised, but is available for voice to voice contact by telephone, radio, or other means at the initiation of the [person-being-] supervised individual.

- 1901 ~~[(5) "Practice of a hearing instrument specialist" means:]~~
- 1902 ~~[(a) establishing a place of business to practice as a hearing instrument specialist;]~~
- 1903 ~~[(b) testing the hearing of a human patient over the age of 17 for the sole purpose of~~
- 1904 ~~determining whether a hearing loss will be sufficiently improved by the use of a~~
- 1905 ~~hearing instrument to justify prescribing and selling the hearing instrument and~~
- 1906 ~~whether that hearing instrument will be in the best interest of the patient;]~~
- 1907 ~~[(c) providing the patient a written statement of prognosis regarding the need for or~~
- 1908 ~~usefulness of a hearing instrument for the patient's condition;]~~
- 1909 ~~[(d) prescribing an appropriate hearing instrument;]~~
- 1910 ~~[(e) making impressions or earmolds for the fitting of a hearing instrument;]~~
- 1911 ~~[(f) sale and professional placement of the hearing instrument on a patient;]~~
- 1912 ~~[(g) evaluating the hearing loss overcome by the installation of the hearing instrument~~
- 1913 ~~and evaluating the hearing recovery against the representations made to the patient by~~
- 1914 ~~the hearing instrument specialist;]~~
- 1915 ~~[(h) necessary intervention to produce satisfactory hearing recovery results from a~~
- 1916 ~~hearing instrument; or]~~
- 1917 ~~[(i) instructing the patient on the use and care of the hearing instrument.]~~
- 1918 ~~(7) "Supervising audiologist" means an audiologist who:~~
- 1919 ~~(a) holds a license and maintains good standing with the division;~~
- 1920 ~~(b) practices full-time as an audiologist and has done so for at least two years; and~~
- 1921 ~~(c) submits a request to the division on a form the division approves and receives~~
- 1922 ~~approval from the division to supervise a hearing instrument intern.~~
- 1923 ~~[(6)] (8) "Supervising hearing instrument specialist" means a hearing instrument specialist~~
- 1924 ~~who:~~
- 1925 ~~[(a) is licensed by and in good standing with the division;]~~
- 1926 ~~[(b) has practiced full-time as a hearing instrument specialist for not less than two years;~~
- 1927 ~~and]~~
- 1928 ~~[(c) is approved as a supervisor by the division.]~~
- 1929 ~~(a) holds certification and maintains good standing with the division;~~
- 1930 ~~(b) practices full-time as a hearing instrument specialist and has done so for at least two~~
- 1931 ~~years; and~~
- 1932 ~~(c) submits a request to the division on a form the division approves and receives~~
- 1933 ~~approval from the division to supervise a hearing instrument intern.~~
- 1934 ~~[(7)] (9) "Unlawful conduct" means the same as that term is defined in Section 58-1-501.~~

~~[(8)]~~ (10) "Unprofessional conduct" means the same as that term is defined in Sections 58-1-501 and 58-46a-501.

Section 30. Section **58-46a-301** is amended to read:

58-46a-301 (Effective 05/06/26) (Repealed 07/01/33). Certification required -- Certification classifications.

(1) A [license] certificate is required to engage in the practice of hearing instrument specialist or hearing instrument intern, except as specifically provided in Section 58-1-307 or 58-46a-305.

(2) The division shall issue to an individual qualified under the provisions of this chapter a [license] certificate in the classification of:

- (a) hearing instrument specialist; or
- (b) hearing instrument intern.

Section 31. Section **58-46a-302** is amended to read:

58-46a-302 (Effective 05/06/26) (Repealed 07/01/33). Qualifications for certification.

(1) Each applicant for [license] certification as a hearing instrument specialist shall:

- (a) ~~[submit to the division an application in a form prescribed by the division]~~ submit an application to the division on a form the division approves;
- (b) ~~[pay a fee as determined by the division pursuant to Section 63J-1-504]~~ pay a fee to the division as determined under Section 63J-1-504;
- (c) pass an appropriate entry-level examination the division makes by rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
- (d) complete at least six months of training with a supervising hearing instrument specialist or supervising audiologist;
- ~~[(e) have qualified for and currently hold board certification by the National Board for Certification - Hearing Instrument Sciences, or an equivalent certification approved by the division;]~~
- ~~[(d)]~~ (e) ~~[have passed]~~ pass the ~~[Utah Law and Rules Examination for Hearing Instrument Specialists]~~ Utah Hearing Instrument Specialists Law and Rule Examination; and
- ~~[(e)]~~ (f) if the applicant holds a hearing instrument intern [license] certificate, surrender the hearing instrument intern [license] certificate at the time of [license] certification as a hearing instrument specialist.

(2) Each applicant for [license] certification as a hearing instrument intern shall:

- (a) ~~[submit to the division an application in a form prescribed by the division]~~ submit an

- 1969 application to the division on a form the division approves;
- 1970 (b) ~~[pay a fee as determined by the division pursuant to Section 63J-1-504;]~~ pay a fee to
- 1971 the division as determined under Section 63J-1-504;
- 1972 (c) ~~[have passed-]~~ pass the Utah Law and Rules Examination for Hearing Instrument
- 1973 Specialists; and
- 1974 (d) present evidence acceptable to the division that the applicant, when ~~[licensed]~~ certified,
- 1975 will practice as a hearing instrument intern~~[-only]~~ under the supervision of a
- 1976 supervising hearing instrument specialist or supervising audiologist in accordance
- 1977 with~~[:]~~ Section 58-46a-302.5.
- 1978 ~~[(i) Section 58-46a-302.5; and]~~
- 1979 ~~[(ii) the supervision requirements for obtaining board certification by the National~~
- 1980 ~~Board for Certification - Hearing Instrument Sciences, or an equivalent~~
- 1981 ~~certification approved by the division.]~~

1982 Section 32. Section **58-46a-302.5** is amended to read:

1983 **58-46a-302.5 (Effective 05/06/26) (Repealed 07/01/33). Supervision requirements**

1984 **-- Hearing instrument interns.**

- 1985 (1) Except as provided in Subsection (2), a hearing instrument intern may~~[-only]~~ practice as
- 1986 a hearing instrument intern only under the direct supervision of a ~~[licensed]~~ supervising
- 1987 hearing instrument specialist or supervising audiologist.
- 1988 (2) A hearing instrument intern may practice under the indirect supervision of a ~~[licensed]~~
- 1989 supervising hearing instrument specialist if the hearing instrument ~~[specialist]~~ intern:
- 1990 (a) receives a passing score on a practical examination demonstrating acceptable skills in
- 1991 the area of hearing testing ~~[as approved by the division]~~ the division requires by rule [
- 1992 ~~made]~~ the division makes in accordance with Title 63G, Chapter 3, Utah
- 1993 Administrative Rulemaking Act; and
- 1994 (b) completes ~~[the National Institute for Hearing instrument studies]~~ an education and
- 1995 examination program~~[-]~~ or an equivalent college level program ~~[as approved by]~~ that
- 1996 the division approves by rule ~~[made]~~ the division makes in accordance with Title 63G,
- 1997 Chapter 3, Utah Administrative Rulemaking Act.

1998 Section 33. Section **58-46a-303** is amended to read:

1999 **58-46a-303 (Effective 05/06/26) (Repealed 07/01/33). Term of certification --**

2000 **Expiration -- Renewal of specialist and intern licenses.**

- 2001 (1)(a)(i) ~~[The division shall issue a license for a hearing instrument specialist in~~
- 2002 ~~accordance with a two-year renewal cycle established by rule made in accordance~~

with Title 63G, Chapter 3, Utah Administrative Rulemaking Act] Each certification issued under this chapter shall be issued in accordance with a five-year renewal cycle established by rule the division makes in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(ii) The division may extend or shorten the renewal period by as much as one year to maintain established renewal cycles or to change an established renewal cycle.

~~[(ii) The division may by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, extend or shorten a renewal period by as much as one year to stagger the renewal cycles the division administers.]~~

~~[(b) At the time of renewal, the licensed hearing instrument specialist shall demonstrate satisfactory evidence of each of the following:]~~

~~[(i) current certification by the National Board for Certification Hearing Instrument Sciences, or other acceptable certification approved by the division by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;]~~

~~[(ii) calibration of all appropriate technical instruments used in practice; and]~~

~~[(iii) completion of continuing professional education required in Section 58-46a-304.]~~

~~[(c)]~~ (b) As a condition for renewal or reinstatement of certification, the applicant shall attest that the applicant will:

(i) maintain competence and safe practices; and

(ii) provide evidence as the division determines by rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, documenting competence at the division's request.

(c) A hearing instrument specialist license automatically expires on the expiration date shown on the [license unless renewed by the licensee in accordance with Section 58-1-308 or surrendered in accordance with Section 58-1-306] certificate.

(2)(a) The division shall issue a license for a hearing instrument intern for a term of three years.

(b) The division may renew a license for a hearing instrument intern for a term of three years for good cause shown, as determined by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

Section 34. Section **58-46a-305** is amended to read:

58-46a-305 (Effective 05/06/26) (Repealed 07/01/33). Exemptions from certification.

In addition to the exemptions ~~[from licensure]~~ in Section 58-1-307, the following [

~~persons]~~ individuals may engage in ~~[acts and practices]~~ an act or practice included within the definition of ~~[practice as a]~~ hearing instrument specialist or hearing instrument intern~~[-subject to their professional licensure authorization and restrictions,]~~ without being ~~[licensed]~~ certified under this chapter:

- (1) an audiologist licensed under the provisions of Chapter 41, Speech-Language Pathology and Audiology Licensing Act;
- (2) a physician and surgeon licensed under the provisions of Chapter 67, Utah Medical Practice Act, or osteopathic physician licensed under the provisions of Chapter 68, Utah Osteopathic Medical Practice Act; and
- (3) a physician assistant licensed under the provisions of Chapter 70a, Utah Physician Assistant Act.

Section 35. Section **58-46a-307** is amended to read:

58-46a-307 (Effective 05/06/26) (Repealed 07/01/33). Certified individual required to prove certification to commence or maintain action.

A person may not commence or maintain an action in any court of the state for collection or compensation in any amount resulting from performance of acts or practices for which ~~[a license]~~ certification is required under this chapter unless that person was properly ~~[licensed]~~ certified under this chapter as a hearing instrument specialist at the time there was an agreement made to perform the regulated acts and practices, when the regulated acts and practices were performed, and when the alleged cause of action arose.

Section 36. Section **58-46a-401** is amended to read:

58-46a-401 (Effective 05/06/26) (Repealed 07/01/33). Grounds for denial of certification -- Disciplinary proceedings.

~~[Grounds for refusing to issue a license to an applicant, for refusing to renew the license of a licensee, for revoking, suspending, restricting, or placing on probation the license of a licensee, for issuing a public or private reprimand to a licensee, and for issuing a cease and desist order shall be in accordance with Section 58-1-401.]~~

(1) The division may:

- (a) refuse to issue a certificate to an applicant;
- (b) refuse to renew a certificate;
- (c) revoke, suspend, restrict, or place a certificate on probation;
- (d) issue a public or private reprimand to a certified individual; or
- (e) issue a cease and desist order.

(2) The division shall perform an act listed in Subsection (1) in accordance with Section

2071 58-1-401.

2072 Section 37. Section **58-46a-501** is amended to read:

2073 **58-46a-501 (Effective 05/06/26) (Repealed 07/01/33). Unprofessional conduct.**

2074 "Unprofessional conduct" includes:

- 2075 (1) testing the hearing of a patient for any purpose other than to determine whether a
2076 hearing loss will be improved by ~~[the use of]~~ using a hearing instrument;
- 2077 (2) failing to make an appropriate referral to a qualified health care provider with respect to
2078 a condition ~~[detected]~~ a certified individual detects in a patient ~~[examined by a licensee~~
2079 ~~under this chapter]~~ if the condition is generally recognized in the profession as one ~~[that~~
2080 ~~should be referred]~~ the certified individual should refer;
- 2081 (3) designating a hearing instrument for a patient whose hearing will not be sufficiently
2082 improved to justify prescribing and selling ~~[of]~~ the hearing instrument;
- 2083 (4) making false, misleading, deceptive, fraudulent, or exaggerated claims with respect to
2084 practice under this chapter and specifically with respect to the benefits of a hearing
2085 instrument or the degree to which a hearing instrument will benefit a patient;
- 2086 (5) failing to exercise caution in providing a patient a prognosis to assure the patient is not
2087 led to expect results that cannot be accurately predicted;
- 2088 (6) failing to provide appropriate follow-up care and consultation with respect to a patient
2089 to whom a hearing instrument has been prescribed and sold upon being informed by the
2090 patient that the hearing instrument does not produce the results ~~[represented by the~~
2091 ~~licensee]~~ the certified individual represented;
- 2092 (7) failing to disclose in writing to the patient the charge for all services and hearing
2093 instruments prescribed and sold to a patient ~~[prior to]~~ before providing the services or
2094 hearing instrument;
- 2095 (8) failing to refund fees paid by a patient for a hearing instrument and all accessories, upon
2096 a determination by the division that the patient has not obtained the recovery of hearing [
2097 ~~represented by the licensee]~~ the certified individual represented in writing ~~[prior to~~
2098 ~~designation and]~~ before the sale of the hearing instrument;
- 2099 (9) paying ~~[any]~~ a professional ~~[person]~~ individual any consideration of any kind for referral
2100 of a patient;
- 2101 (10) failing, when acting as a supervising hearing instrument specialist or supervising
2102 audiologist, to provide supervision and training in hearing instrument sciences in
2103 accordance with Section 58-46a-302.5;
- 2104 (11) engaging in the practice as a hearing instrument intern when not under the supervision

- 2105 of a supervising hearing instrument specialist or supervising audiologist in accordance
 2106 with Section 58-46a-302.5;
- 2107 (12) failing to describe [~~the circuitry~~] in any advertisement, presentation, purchase, or trial
 2108 agreement, the circuitry of a hearing instrument as being either "digital" or "analog" [;] or
 2109 other acceptable terms [~~as determined by the division~~] the division determines;
- 2110 (13) failing to follow the guidelines or policies of the United States Federal Trade
 2111 Commission in any advertisement;
- 2112 (14) failing to adhere to the rules and regulations prescribed by the United States Food and
 2113 Drug Administration as [they] the rules and regulations pertain to the hearing instrument
 2114 specialist;
- 2115 (15) failing to maintain all equipment used in the practice of a hearing instrument specialist
 2116 properly calibrated and in good working condition; and
- 2117 (16) failing to comply with any of the requirements set forth in Section 58-46a-502 or
 2118 58-46a-503.

2119 Section 38. Section **58-46a-502** is amended to read:

2120 **58-46a-502 (Effective 05/06/26) (Repealed 07/01/33). Additional requirements**
 2121 **for practicing as a hearing instrument specialist.**

2122 [~~A person~~] An individual engaging in the practice of a hearing instrument specialist shall:

- 2123 (1) have a regular place or places of business from which the [person] individual conducts
 2124 business as a hearing instrument specialist and the place or places of business shall be
 2125 represented to a patient and others with whom business is conducted by the street
 2126 address at which the place of business is located;
- 2127 (2) include in all advertising or other representation the street address at which the business
 2128 is located and the telephone number of the business at that street address;
- 2129 (3) provide as part of each transaction between a [licensee] certified individual and a patient
 2130 related to testing for hearing loss and selling of a hearing instrument written
 2131 documentation provided to the patient that includes:
- 2132 (a) identification of [~~all services and products~~] a service or a product provided to the
 2133 patient by the hearing instrument specialist and the charges for each service or
 2134 product;
- 2135 (b) a statement whether [any] a hearing instrument provided to a patient is "new," "used,"
 2136 or "reconditioned" and the terms and conditions of any warranty or guarantee that
 2137 applies to each instrument; and
- 2138 (c) the identity and [license] certification number of each hearing instrument specialist or

- 2139 hearing instrument intern who provided services or products to the patient;
- 2140 (4) before providing services or products to a patient:
- 2141 (a) advise the patient regarding services and products offered to the patient, including
- 2142 the expected results of the services and products;
- 2143 (b) inform each patient who is being offered a hearing instrument about hearing
- 2144 instruments that work with assistive listening systems that are compliant with the
- 2145 ADA Standards for Accessible Design adopted by the United States Department of
- 2146 Justice in accordance with the Americans with Disabilities Act, 42 U.S.C. Sec. 12101
- 2147 et seq.; and
- 2148 (c) obtain written informed consent from the patient regarding offered services,
- 2149 products, and the expected results of the services and products in a form ~~[approved~~
- 2150 ~~by the division]~~ the division approves;
- 2151 (5) refer ~~[all individuals]~~ an individual under ~~[the age of 18]~~ 18 years old who ~~[seek testing~~
- 2152 ~~of hearing]~~ seeks a hearing test to a physician~~[-or]~~ , surgeon, osteopathic physician,
- 2153 physician assistant, or audiologist, licensed or certified under the provisions of this title,
- 2154 and shall dispense a ~~[hearing aid]~~ hearing instrument to that individual only on
- 2155 prescription ~~[of]~~ from a physician~~[-or]~~ , surgeon, osteopathic physician, physician
- 2156 assistant, or audiologist;
- 2157 (6) obtain the patient's informed consent and agreement to purchase the hearing instrument
- 2158 based on that informed consent either by the hearing instrument specialist or the hearing
- 2159 instrument intern, before designating an appropriate hearing instrument; and
- 2160 (7) if a hearing instrument does not substantially enhance the patient's hearing consistent
- 2161 with the representations of the hearing instrument specialist at the time informed consent
- 2162 was given ~~[prior to]~~ before the sale and fitting of the hearing instrument, provide:
- 2163 (a) necessary intervention to produce satisfactory hearing recovery results consistent
- 2164 with representations made; or
- 2165 (b) for the refund of fees paid by the patient for the hearing instrument to the hearing
- 2166 instrument specialist within a reasonable time after finding that the hearing
- 2167 instrument does not substantially enhance the patient's hearing.

2168 Section 39. Section **58-46a-503** is amended to read:

2169 **58-46a-503 (Effective 05/06/26) (Repealed 07/01/33). Testing period for a hearing**

2170 **instrument.**

- 2171 (1)(a) ~~[Any person licensed under this chapter who sells a hearing aid]~~ A person that sells
- 2172 a hearing instrument to a consumer shall provide a written receipt or a written

contract to the consumer.

(b) The written receipt or the written contract shall provide the consumer with a 30-day right to cancel the purchase if ~~[the consumer finds that the hearing aid]~~ the hearing instrument does not function adequately for the consumer~~[-and to]~~ .

(c) ~~[obtain]~~ A person that sells a hearing instrument shall provide a refund to the consumer if the consumer returns the [hearing aid] hearing instrument to the [seller] person in the same condition as when purchased, excluding ordinary wear and tear [excluded, as when purchased] within the 30-day right to cancel described in Subsection (1)(b).

(d) The written receipt or the written contract shall notify the consumer of the 30-day right to cancel in at least ~~[10]~~ 12 point [type] font.

(e) The 30-day right to cancel period shall commence from ~~[either]~~ the later of the day on which:

(i) ~~[the date the hearing aid]~~ the hearing instrument is originally delivered to the consumer~~[-or]~~ ;

(ii) ~~[the date]~~ the written receipt is dated; or

(iii) the contract is delivered to the consumer~~[-, whichever is later].~~

(f) ~~[The 30-day period shall be tolled for any period during which the hearing aid seller, dealer, or fitter has possession or control of the hearing aid after its original delivery]~~
The 30-day period is paused while the hearing instrument specialist possesses or controls the hearing instrument after the hearing instrument's original delivery.

(2)(a) Upon exercise of the right to cancel a ~~[hearing aid]~~ hearing instrument purchase, the ~~[seller of the hearing aid is entitled to a]~~ hearing instrument specialist may collect from the purchaser a cancellation fee [not to exceed] of up to 15% of all fees charged to the consumer, including testing, fitting, counseling, and the purchase price of the [hearing aid] hearing instrument.

(b) ~~[The exact amount of the cancellation fee shall be stated in the]~~ The written receipt or the written contract provided to the consumer shall state the exact amount of the cancellation fee.

Section 40. Section **58-47b-201** is amended to read:

58-47b-201 (Effective 05/06/26) (Repealed 07/01/34). Board.

(1) There is created the Board of Massage Therapy and Acupuncture consisting of:

(a) four massage therapists;

(b) two ~~[licensed acupuncturists as defined in Section 58-72-102]~~ acupuncturists; and

(c) one member of the general public.

(2) The board shall be appointed and serve in accordance with Section 58-1-201.

(3)(a) The board shall perform the duties and responsibilities described in Sections 58-1-202 and 58-1-203 with respect to this chapter and Chapter 72, Acupuncture Licensing Act.

(b) In addition, the board shall designate one of [its] the board's members on a permanent or rotating basis to:

(i) assist the division in reviewing complaints concerning the conduct of an individual licensed under this chapter or Chapter 72, Acupuncture Licensing Act; and

(ii) advise the division in [its] the division's investigation of these complaints.

(4) A board member who has, under Subsection (3), reviewed a complaint or advised in [its] the complaint's investigation may be disqualified from participating with the board when the board serves as a presiding officer in an adjudicative proceeding concerning the complaint.

Section 41. Section **58-54-303** is amended to read:

58-54-303 (Effective 05/06/26). Supervision and prescription required -- Imaging ordered by a licensed physical therapist.

~~[(1) The practice of radiologic technology by a radiologic technologist licensed under this chapter shall be under the general supervision of a radiologist or radiology practitioner and may be performed only upon the order of a radiologist or radiology practitioner acting within the scope of the radiologist's or radiology practitioner's license and experience within the scope of practice of a radiology practitioner.]~~

(1) A radiologic technologist certified under this chapter may practice radiologic technology only:

(a) under the general supervision of a radiologist or radiology practitioner; and

(b) upon the order of a radiologist or radiology practitioner acting within the scope of the radiologist's or radiology practitioner's license and experience.

(2)(a) Notwithstanding Subsection (1), a physical therapist licensed under Chapter 24b, Physical Therapy Practice Act, acting within the scope of the physical therapist's license and experience may order ~~[plain radiographs and magnetic resonance-]~~ imaging if:

(i) the licensed physical therapist designates a physician to receive the results of the ~~[plain radiographs or magnetic resonance-]~~imaging; and

- 2241 (ii) the physician designated in Subsection (2)(a)(i) agrees to receive the results of the [
 2242 ~~plain radiographs or magnetic resonance~~] imaging.
- 2243 (b) A licensed physical therapist who orders [~~plain radiographs or magnetic resonance~~]
 2244 imaging under Subsection (2)(a) shall:
- 2245 (i) communicate with the patient's physician to ensure coordination of care; and
- 2246 (ii) refer a patient to an appropriate provider when the findings of the imaging [~~that~~
 2247 ~~was~~] ordered by the licensed physical therapist indicate that the needed services [
 2248 ~~that are needed~~] exceed the licensed physical therapist's experience [~~and~~] or scope
 2249 of practice.
- 2250 (c) A licensed physical therapist is not subject to Subsection (2)(b)(i) if:
- 2251 (i) a radiologist has read the image and has not identified a significant finding;
- 2252 (ii) the patient does not have a primary care physician; and
- 2253 (iii) the patient was not referred to the licensed physical therapist for health care
 2254 services by another health care provider.

2255 Section 42. Section **58-57-101**, which is renumbered from Section 58-57-2 is renumbered
 2256 and amended to read:

2257 **[58-57-2] 58-57-101 (Effective 05/06/26). Definitions.**

2258 [~~In addition to the definitions in Section 58-1-102, as~~] As used in this chapter:

- 2259 (1) "Board" means the Respiratory Care Licensing Board created in Section [58-57-3]
 2260 58-57-102.
- 2261 (2)(a) "Health care facility" means [~~any~~] a facility or institution in which health care
 2262 services are performed or furnished[~~and~~] .
- 2263 (b) "Health care facility" includes a hospital, a clinic, [~~or~~] and an emergency care center.
- 2264 (3)(a) "Limited practice of respiratory care" means the practice of respiratory care on a
 2265 non-critical care patient.
- 2266 (b) "Limited practice of respiratory care" does not include:
- 2267 (i) invasive and noninvasive mechanical ventilation;
- 2268 (ii) arterial line placement; or
- 2269 (iii) high-risk procedures the division defines by rule the division makes in
 2270 collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
 2271 Administrative Rulemaking Act.
- 2272 (4) "Non-critical care patient" means a patient who is not receiving a service from an
 2273 intensive care unit, an emergency department of a hospital, or an ambulance as that term
 2274 is defined in Section 53-2d-101.

2275 [(3)] (5)(a) "Practice of respiratory care"[:]

2276 [(a)] means the treatment, operation of equipment, management, diagnostic testing, and
 2277 care of ~~any~~ a human disease, deficiency, pain, injury, or other physical condition
 2278 associated with the cardiopulmonary system under the qualified medical direction or
 2279 supervision of a practitioner who has training and knowledge in the diagnosis,
 2280 treatment, and assessment of respiratory problems[:]

2281 (b) "Practice of respiratory care" includes:

2282 (i) accepting and carrying out a practitioner's written, verbal, or telephonic
 2283 prescription or order specifically relating to respiratory care in a hospital or other
 2284 health care setting and ~~includes~~ in consultation with ~~licensed nurses~~ a licensed
 2285 nurse, as appropriate;

2286 (ii) administering respiratory care during transportation of a patient and under other
 2287 circumstances where an emergency requires immediate respiratory care;

2288 (iii) serving as a resource to other health care professionals and hospital
 2289 administrators in relation to the technical aspects of, and the safe and effective
 2290 methods for, administering respiratory care;

2291 (iv) functioning in situations of patient contact requiring individual judgment in
 2292 administering respiratory care under the general supervision of a qualified
 2293 practitioner; and

2294 (v) supervising, directing, or teaching personnel in the performance of respiratory
 2295 care modalities as part of ~~a respiratory care~~ an approved education program for
 2296 respiratory care[: and] .

2297 (c) "Practice of respiratory care" does not include:

2298 (i) ~~[a person who delivers, installs, or maintains]~~ the delivery, installation, or
 2299 maintenance of respiratory related durable medical equipment~~[- and]~~ ; or

2300 (ii) ~~[who gives]~~ giving instructions regarding the use of ~~[that equipment]~~ respiratory
 2301 related durable medical equipment as long as ~~[that person]~~ the individual giving
 2302 the instruction does not perform clinical evaluation or treatment of the patient.

2303 [(4)] (6) "Practitioner" means an individual currently licensed, registered, or otherwise
 2304 authorized by the appropriate jurisdiction to prescribe and administer drugs and order
 2305 respiratory care in the course of professional practice.

2306 [(5) "~~Respiratory care practitioner~~" means any person licensed to practice respiratory care
 2307 ~~under this chapter.~~]

2308 [(6)] (7) "Respiratory related durable medical equipment" means:

- 2309 (a) medical grade oxygen;
- 2310 (b) equipment and supplies related to medical gases;
- 2311 (c) apnea monitors;
- 2312 (d) oximeters;
- 2313 (e) noninvasive positive pressure generators, except those with back-up respiratory rate
- 2314 or when used invasively;
- 2315 (f) bilirubin lights;
- 2316 (g) suctioning equipment;
- 2317 (h) large volume nebulizers with compressors, except when used invasively in
- 2318 conjunction with an artificial airway;
- 2319 (i) medication nebulizers;
- 2320 (j) enteral nutrition equipment; and
- 2321 (k) other respiratory related equipment intended for use in the home as ~~[defined by the~~
- 2322 ~~division by rule]~~ the division defines by rule the division makes in accordance with
- 2323 Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
- 2324 ~~[(7)]~~ (8) "Unlawful conduct" ~~[is defined in]~~ means the same as that term is defined in
- 2325 Sections 58-1-501 and ~~[58-57-14]~~ 58-57-110.
- 2326 ~~[(8)]~~ (9)(a) "Unprofessional conduct" ~~[as defined in]~~ means the same as that term is
- 2327 defined in Section 58-1-501 and as ~~[may be further defined by rule]~~ the division may
- 2328 define by rule the division makes in accordance with Title 63G, Chapter 3, Utah
- 2329 Administrative Rulemaking Act.
- 2330 (b) "Unprofessional conduct" includes:
- 2331 ~~[(a)]~~ (i) acting contrary to the instructions of the practitioner responsible for
- 2332 supervising the licensee;
- 2333 ~~[(b)]~~ (ii) knowingly operating ~~[any]~~ respiratory care equipment that is unsafe or not in
- 2334 compliance with standards of condition or operation consistent with the patient's
- 2335 safety;
- 2336 ~~[(c)]~~ (iii) permitting ~~[any person]~~ an individual to operate respiratory care equipment
- 2337 who is not competent or not allowed to operate the equipment;
- 2338 ~~[(d)]~~ (iv) revealing to ~~[any unauthorized person]~~ an unauthorized individual
- 2339 confidential or privileged information about a patient;
- 2340 ~~[(e)]~~ (v) using ~~[any]~~ a controlled substance, unless a practitioner prescribes the
- 2341 controlled substance ~~[is prescribed by a practitioner and used]~~ and the respiratory
- 2342 care practitioner uses the controlled substance in accordance with the practitioner's

instructions; and

[(f)] (vi) making [any] a statement that is incorrect due to negligence, willfulness, or intent to provide false information or entry on [any] a patient record or other record that is used for payment of respiratory care services.

Section 43. Section **58-57-102**, which is renumbered from Section 58-57-3 is renumbered and amended to read:

[58-57-3] 58-57-102 (Effective 05/06/26). Board created -- Membership -- Duties.

(1) There is created a five-member Respiratory Care Licensing Board consisting of the following [persons] individuals:

(a) one physician who is a member of either the American Society of Anesthesiologists, the American College of Chest Physicians, the American Thoracic Society, or the American Academy of Pediatrics;

(b) three licensed respiratory care practitioners who have practiced respiratory care for a period of not less than three years immediately [~~preceding their~~] before appointment to the board; and

(c) one member from the general public.

~~[(2) The board shall be appointed and serve in accordance with Section 58-1-201.]~~

~~(2) The executive director shall appoint the members of the board and the members shall serve in accordance with Section 58-1-201.~~

~~[(3) The duties and responsibilities of the board shall be in accordance with Sections 58-1-202 and 58-1-203.]~~

~~(3) The board shall perform the board's duties and responsibilities as provided in Sections 58-1-202 and 58-1-203.~~

Section 44. Section **58-57-103**, which is renumbered from Section 58-57-4 is renumbered and amended to read:

[58-57-4] 58-57-103 (Effective 05/06/26). Qualifications for a license -- Scope of practice.

(1) ~~[The division shall issue a respiratory care practitioner license to an applicant who meets the requirements specified in this section.]~~ The division shall issue to an individual who meets the requirements specified in this section a license in the classification of:

(a) respiratory care practitioner; or

(b) respiratory care apprentice.

(2)(a) An applicant seeking licensure as a respiratory care practitioner shall:

[(a)] (i) ~~[submit an application on a form prescribed by the division]~~ submit to the

division an application on a form the division approves;

~~[(b)] (ii) [pay a fee as determined by the department pursuant to Section 63J-1-504]~~

pay to the division a fee determined in accordance with Section 63J-1-504;

~~[(e)] (iii) [possess a] have a high school education or [its] the equivalent, as [~~
~~determined by the division in] the division determines by rule the division makes in~~
collaboration with the board and in accordance with Title 63G, Chapter 3, Utah
Administrative Rulemaking Act;

~~[(d)] (iv) [have completed] complete~~ a respiratory care practitioner educational
program that is accredited by a nationally accredited organization acceptable to
the division as defined by rule the division makes in accordance with Title 63G,
Chapter 3, Utah Administrative Rulemaking Act; and

~~[(e)] (v) subject to Section 58-57-104, pass an examination [approved by] the division~~
approves in collaboration with the board.

(b) A respiratory care practitioner may engage in the practice of respiratory care.

(3)(a) An applicant seeking licensure as a respiratory care apprentice shall:

(i) submit to the division an application on a form the division approves;

(ii) pay to the division a fee determined under Section 63J-1-504;

(iii) have a high school education or the equivalent, as the division determines by rule
the division makes in collaboration with the board and in accordance with Title
63G, Chapter 3, Utah Administrative Rulemaking Act;

(iv) submit to the division evidence that the applicant is:

(A) in good standing with an approved education program that the division
approves by rule the division makes in accordance with Title 63G, Chapter 3,
Utah Administrative Rulemaking Act;

(B) in the final year with the approved education program; and

(C) has written permission from the education program in which the applicant is
enrolled to apply for licensure.

(b) A respiratory care apprentice may perform a service in the practice of respiratory
care if the respiratory care apprentice has documented evidence of training for the
service.

Section 45. Section **58-57-104**, which is renumbered from Section 58-57-5 is renumbered
and amended to read:

[58-57-5] 58-57-104 (Effective 05/06/26). Licensure by endorsement.

[If an applicant has completed a respiratory care practitioner education program that is

~~approved by the board and accredited by a nationally accredited organization acceptable to the division, as defined by rule, the board may recommend that the division issue a license without examination to any applicant currently licensed by another state as a respiratory care practitioner or its equivalent, if the requirements for licensing in that state are at least as stringent as the requirements under this chapter.]~~ The board may recommend that the division issue a license without examination to an applicant currently licensed in another state as a respiratory care practitioner, or the equivalent, if that state's licensing requirements are at least as stringent as the requirements under this chapter.

Section 46. Section **58-57-105**, which is renumbered from Section 58-57-6 is renumbered and amended to read:

[58-57-6] 58-57-105 (Effective 05/06/26). Term of license -- Expiration -- Renewal.

(1)(a) ~~[Each license issued under this chapter shall be issued]~~ The division shall issue a respiratory care practitioner license in accordance with a two-year renewal cycle [established by rule] the division makes by rule in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(b) ~~[A]~~ The division may extend or shorten a renewal period [may be extended or shortened] by as much as one year to maintain established renewal cycles or to change [an established] a renewal cycle.

(2) ~~[Each license]~~ A respiratory care practitioner license automatically expires on the expiration date shown on the license[unless renewed by the licensee in accordance with Section 58-1-308].

(3)(a) A respiratory care apprentice license shall expire on the day of the earliest of the following events:

(i) the issuance of a respiratory care practitioner license;

(ii) the denial of a respiratory care practitioner license application; or

(iii) the termination of enrollment at an accredited respiratory care practitioner program.

(b) Notwithstanding Subsection (3)(a)(iii), a respiratory care apprentice license is valid for 60 days after the day on which a respiratory care apprentice graduates from an accredited respiratory care practitioner program.

Section 47. Section **58-57-106**, which is renumbered from Section 58-57-7 is renumbered and amended to read:

[58-57-7] 58-57-106 (Effective 05/06/26). Exemptions from licensure.

- (1)(a) For purposes of Subsection (2)(b), "qualified" means an individual who is a registered polysomnographic technologist or a Diplomate certified by the American Board of Sleep Medicine.
- (b) For purposes of Subsections (2)(f) and (g), "supervision" means one of the following will be immediately available for consultation in person or by phone:
- (i) a practitioner;
 - (ii) a respiratory therapist;
 - (iii) a Diplomate of the American Board of Sleep Medicine; or
 - (iv) a registered polysomnographic technologist.
- (2) In addition to the exemptions from licensure in Section 58-1-307, the following ~~[persons]~~ individuals may engage in the practice of respiratory therapy subject to the stated circumstances and limitations without being licensed under this chapter:
- (a) ~~[any person]~~ an individual who provides gratuitous care for ~~[a member of his immediate family]~~ an immediate family member without representing ~~[himself as]~~ that the individual is a licensed respiratory care practitioner;
 - (b) ~~[any person]~~ an individual who is a licensed or a qualified member of another health care profession, if this practice is consistent with the accepted standards of the profession and if the ~~[person]~~ individual does not represent ~~[himself as]~~ that the individual is a respiratory care practitioner;
 - (c) ~~[any person]~~ an individual who serves in the Armed Forces of the United States or ~~[any other]~~ another agency of the federal government and is ~~[engaged in the performance of his]~~ performing official duties;
 - (d) ~~[any person]~~ an individual who acts under a certification issued ~~[pursuant to]~~ in accordance with Title 53, Chapter 2d, Emergency Medical Services Act, while providing emergency medical services;
 - (e) ~~[any person]~~ except as provided in Subsection (3), an individual who delivers, installs, or maintains respiratory related durable medical equipment ~~[and]~~ or who gives instructions regarding the use of that equipment~~[in accordance with Subsections 58-57-2(3) and (6), except that this exemption does not include any clinical evaluation or treatment of the patient];~~
 - (f) ~~[any person]~~ an individual who ~~[is working]~~ works in a practitioner's office, acting under supervision; and
 - (g) a polysomnographic technician or trainee, acting under supervision, as long as the technician or trainee administers the following only in a sleep lab, sleep center, or

- 2479 sleep facility:
- 2480 (i) oxygen titration; and
- 2481 (ii) positive airway pressure that does not include mechanical ventilation.
- 2482 (3) Subsection (2)(e) does not allow an individual to engage in clinical evaluation or
- 2483 treatment of a patient.

2484 [(3)] (4) Nothing in this chapter permits a respiratory care practitioner to engage in the

2485 unauthorized practice of other health disciplines.

2486 Section 48. Section **58-57-107**, which is renumbered from Section 58-57-8 is renumbered

2487 and amended to read:

2488 **[58-57-8] 58-57-107 (Effective 05/06/26). Grounds for denial of license --**

2489 **Disciplinary proceedings.**

2490 [Grounds for refusal to issue a license to an applicant, for refusal to renew the license of

-2491 a licensee, to revoke, suspend, restrict, or place on probation the license of a licensee, to issue

-2492 a public or private reprimand to a licensee, and to issue cease and desist orders shall be in

-2493 accordance with Section 58-1-401.]

2494 (1) The division may:

- 2495 (a) refuse to issue a license to an applicant;
- 2496 (b) refuse to renew a license;
- 2497 (c) revoke, suspend, restrict, or place a license on probation;
- 2498 (d) issue a public or private reprimand to a licensee; or
- 2499 (e) issue a cease and desist order.

2500 (2) The division shall perform an act listed in Subsection (1) in accordance with Section

2501 58-1-401.

2502 Section 49. Section **58-57-108**, which is renumbered from Section 58-57-10 is renumbered

2503 and amended to read:

2504 **[58-57-10] 58-57-108 (Effective 05/06/26). Use of title or designation.**

2505 (1) Only a respiratory care practitioner may use the following titles or designations[~~in this~~

2506 ~~state~~]:

- 2507 (a) respiratory care practitioner;
- 2508 (b) respiratory therapist; or
- 2509 (c) respiratory technician.

2510 (2) Only a respiratory care apprentice may use the following titles or designations:

- 2511 (a) respiratory care apprentice; or
- 2512 (b) respiratory therapy apprentice.

2513 [(2)] (3) ~~[Any person]~~ An individual who violates this section is guilty of a class A
 2514 misdemeanor.

2515 Section 50. Section **58-57-109**, which is renumbered from Section 58-57-12 is renumbered
 2516 and amended to read:

2517 **[58-57-12] 58-57-109 (Effective 05/06/26). Independent practice prohibited.**

2518 A respiratory care practitioner may not:

- 2519 (1) practice independently of a practitioner or of a health care facility while under the
 2520 supervision of a practitioner; or
 2521 (2) charge a fee~~[for his services]~~ independently of a practitioner or health care facility.

2522 Section 51. Section **58-57-110**, which is renumbered from Section 58-57-14 is renumbered
 2523 and amended to read:

2524 **[58-57-14] 58-57-110 (Effective 05/06/26). Unlawful conduct -- Penalty.**

2525 (1) ~~[Beginning January 1, 2007, "unlawful"]~~ "Unlawful conduct" includes:

2526 (a) using the following titles~~[-names,]~~ or initials~~[-]~~ for the following titles if the user is
 2527 not properly licensed~~[under this chapter]:~~

2528 (i) respiratory care practitioner;

2529 (ii) respiratory therapist; ~~[and]~~

2530 (iii) respiratory technician; ~~[and]~~

2531 (iv) respiratory care apprentice; and

2532 (v) respiratory therapy apprentice; and

2533 (b) using ~~[any other]~~ a name, title, or initials that would cause a reasonable person to
 2534 believe the user is licensed under this chapter if the user is not properly licensed
 2535 under this chapter.

2536 (2) ~~[Any person who]~~ A person that violates ~~[the unlawful conduct provision specifically~~
 2537 ~~defined in]~~ Subsection 58-1-501(1)(a) is guilty of a third degree felony.

2538 ~~[(3) Any person who violates any of the unlawful conduct provisions specifically defined in~~
 2539 ~~Subsections 58-1-501(1)(b) through (f) and Subsection (1) of this section is guilty of a~~
 2540 ~~class A misdemeanor.]~~

2541 ~~[(4) After a proceeding pursuant to Title 63G, Chapter 4, Administrative Procedures Act,~~
 2542 ~~and Title 58, Chapter 1, Division of Professional Licensing Act, the division may assess~~
 2543 ~~administrative penalties for acts of unprofessional or unlawful conduct or any other~~
 2544 ~~appropriate administrative action.]~~

2545 Section 52. Section **58-70a-307** is amended to read:

2546 **58-70a-307 (Effective 05/06/26). Collaboration requirements -- Clinical practice**

experience -- Requirements for independent practice in a new specialty.

- (1) As used in this section, "collaboration" means the interaction and relationship that a physician assistant has with ~~[one or more physicians]~~ a physician in which:
- (a) the physician assistant and physician are cognizant of the physician assistant's qualifications and limitations in caring for ~~[patients]~~ a patient;
 - (b) the physician assistant, while responsible for care that the physician assistant provides, consults with the physician~~[or physicians]~~ regarding patient care; and
 - (c) the physician ~~[or physicians give]~~ gives direction and guidance to the physician assistant.
- (2) A physician assistant with less than ~~[10,000]~~ 8,000 hours of post-graduate clinical practice experience shall:
- (a) practice under written policies and procedures established at a practice level that:
 - (i) describe how collaboration will occur in accordance with this section and Subsections 58-70a-501(2) and (3); and
 - (ii) describe methods for evaluating the physician assistant's competency, knowledge, and skills;
 - (b) provide a copy of the written policies and procedures and documentation of compliance with this Subsection (2) to the board upon the board's request; and
 - (c) except as provided in Subsection 58-70a-501.1(4)(d) for a physician assistant specializing in mental health care, engage in collaboration with a physician for the first 4,000 hours of the physician assistant's post-graduate clinical practice experience.
- (3)(a) Except as provided in Subsection 58-70a-501.1(4)(d) for a physician assistant specializing in mental health care, a physician assistant who has more than 4,000 hours of practice experience and less than ~~[10,000]~~ 8,000 hours of practice experience shall enter into a written collaborative agreement with:
- (i) a physician; or
 - (ii) a licensed physician assistant with more than ~~[10,000]~~ 8,000 hours of practice experience in the same specialty as the physician assistant.
- (b) The collaborative agreement described in Subsection (3)(a) shall:
- (i) describe how collaboration under this section and Subsections 58-70a-501(2) and (3) will occur;
 - (ii) be kept on file at the physician assistant's practice location; and
 - (iii) be provided by the physician assistant to the board upon the board's request.
- (4) A physician assistant who wishes to change specialties to another specialty in which the [

PA] physician assistant has less than 4,000 hours of experience shall engage in collaboration for a minimum of 4,000 hours with a physician who is trained and experienced in the specialty to which the physician assistant is changing.

Section 53. Section **58-72-102** is amended to read:

58-72-102 (Effective 05/06/26). Acupuncture licensing -- Definitions.

[In addition to the definitions in Section 58-1-102, as] As used in this chapter:

(1) "Acupuncture aide" means:

(a) an individual who is not licensed under this chapter but provides a supportive service under the indirect supervision of a licensed acupuncturist who is physically present and available during the performance of a delegated supportive service; and

(b)(i) an individual who holds a certification in clean needle technique from the Council of Colleges of Acupuncture and Herbal Medicine; or

(ii) an individual who completes a course using the Council of Colleges of Acupuncture and Herbal Medicine clean needle technique that the division approves by rule; or

(c) meets the qualifications the division makes by rule.

(2) "Board" means the Board of Massage Therapy and Acupuncture created in Section 58-47b-201.

[(2)] (3)(a) "Injection therapy" means the use of a hypodermic needle, by a licensed acupuncturist [~~who has obtained a clean needle technique certificate from the National Commission for the Certification of Acupuncture and Oriental Medicine (NCCAOM);~~] who satisfies the coursework and supervised experience requirements that the division makes by rule to inject any of the following sterile substances in liquid form into acupuncture points on the body subcutaneously or intramuscularly:

(i) a nutritional substance;

(ii) a local anesthetic;

(iii) autologous blood, if the licensee holds a current phlebotomy certification to draw blood;

(iv) sterile water;

(v) dextrose;

(vi) sodium bicarbonate; [and]

(vii) sterile saline[-];

(viii) sterile herbs;

(ix) vitamins;

- (x) homeopathics; and
- (xi) other substances as defined by the division in rule.
- (b) "Injection therapy" includes using ultrasound guidance to ensure that an injection is only a subcutaneous injection or an intramuscular injection.
- (c) "Injection therapy" does not include injecting a substance into a vein, ~~[joint,]~~ artery, blood vessel, nerve, ~~[tendon,]~~ deep organ, or the spine.
- ~~[(d) "Injection therapy" may not be performed on a pregnant woman or a child under the age of eight.]~~
- ~~[(3) "Licensed acupuncturist," designated as "L.Ac.," means a person who has been licensed under this chapter to practice acupuncture.]~~
- (4) "Moxibustion" means a heat therapy that uses the herb moxa to heat acupuncture points of the body.
- (5)(a) "Practice of acupuncture" means the insertion of acupuncture needles, the use of injection therapy, and the application of moxibustion to specific areas of the body based on traditional oriental medical diagnosis and modern research as a primary mode of therapy.
- (b) ~~[Adjunctive therapies within the scope of the practice]~~ "Practice of acupuncture" may include the following adjunctive therapies:
- (i) applying manual, mechanical, thermal, electrical, light, and electromagnetic treatments based on traditional oriental medical diagnosis and modern research;
- (ii) ~~[the recommendation, administration, or provision of]~~ recommending, administering, or provisioning dietary guidelines, herbs, supplements, homeopathics, and therapeutic exercise based on traditional oriental medical diagnosis and modern research according to practitioner training; ~~[and]~~
- (iii) ~~[the practice]~~ performing an adjunctive therapy described in Subsections (5)(a) and ~~[(b)]~~ (5)(b) on an animal to the extent permitted by:
- (A) Subsection 58-28-307(12);
- (B) the provisions of this chapter; and
- (C) division rule[-] ;
- (iv) delegating a task to an acupuncture aide and supervising the performance of the task; and
- (v) ordering clinical laboratory test to determine the nature of care or to form a basis for referral to other licensed health care professionals.
- (c) "Practice of acupuncture" does not include:

2649 (i) the manual manipulation or adjustment of the joints of the body beyond the elastic
2650 barrier; or

2651 (ii) the "manipulation of the articulation of the spinal column" as defined in Section
2652 58-73-102.

2653 (6)(a) "Supportive services" means the acts that the division defines in rule for which the
2654 acupuncture aide is trained.

2655 (b) "Supportive services" does not include providing:

2656 (i) a diagnosis;

2657 (ii) point location;

2658 (iii) needle insertion;

2659 (iv) electrical stimulation;

2660 (v) advice to a patient; or

2661 (vi) a procedure requiring a similar degree of judgment or skill, or an additional act
2662 the department defines by rule.

2663 ~~[(6)] (7)~~ "Unprofessional conduct" is as defined in Sections 58-1-501 and 58-72-503, and as [
2664 ~~may be further defined by division]~~ the division may define by rule.

2665 Section 54. Section **58-72-302** is amended to read:

2666 **58-72-302 (Effective 05/06/26). Qualifications for licensure.**

2667 (1) An applicant for licensure as [a-licensed] an acupuncturist shall:

2668 ~~[(1)] (a) [submit an application in a form prescribed by the division]~~ submit an application
2669 to the division on a form the division approves;

2670 ~~[(2)] (b) [pay a fee determined by the department under Section 63J-1-504]~~ pay a fee to
2671 the division as determined under Section 63J-1-504;

2672 ~~[(3)] (c)~~ meet the requirements for current active certification in acupuncture under
2673 guidelines ~~[established by the National Commission for the Certification of~~
2674 ~~Acupuncture and Oriental Medicine (NCCAOM)]~~ the National Certification
2675 Commission for Acupuncture and Oriental Medicine establishes as demonstrated
2676 through a current certificate or other appropriate documentation;

2677 ~~[(4)] (d)~~ pass the examination ~~[required by the division]~~ the division requires by rule;

2678 ~~[(5)] (e)~~ establish procedures, as ~~[defined]~~ the division defines by rule, which shall enable
2679 patients to give informed consent to treatment; and

2680 ~~[(6)] (f)~~ meet with the board, if requested, for the purpose of evaluating the applicant's
2681 qualifications for licensure.

2682 (2) A licensed acupuncturist may order clinical laboratory testing if the licensed

acupuncturist:

(a) passes the National Commission for the Certification of Acupuncture and Oriental Medicine biomedicine exam; or

(b) completes training that incorporates the safe and beneficial use of laboratory test findings in the practice of acupuncture and oriental medicine that the division determines by rule.

Section 55. Section **58-72-501** is amended to read:

58-72-501 (Effective 05/06/26). Acupuncture licensee -- Restriction on titles used.

(1)(a) ~~[A person practicing as a]~~ A licensed acupuncturist may not display or ~~[in any way use any]~~ use a title, [words] a word, or an insignia in conjunction with the [person's] licensed acupuncturist's name or practice except [the words]"licensed acupuncturist" or "L.Ac."[:]

(b) Only an acupuncturist licensed under this chapter may use the title "licensed acupuncturist" or "L.Ac."

~~[(b)]~~ (c) When used in conjunction with the [person's] licensed acupuncturist's practice, the term "licensed acupuncturist" or "L.Ac." shall be displayed next to the name of the licensed acupuncturist.

(2)(a) A licensed acupuncturist may not use the term "physician," "physician or surgeon," or "doctor" in conjunction with the acupuncturist's name or practice.

(b) A licensed acupuncturist may use the terms "Doctor of acupuncture["], "Doctor of Oriental Medicine," "Doctor of Acupuncture and Oriental Medicine," "D.O.M.," "D.A.O.M.," or "oriental medical doctor" [may be used-]if the term is commensurate with the degree in acupuncture [received by the practitioner] the practitioner holds.

(3)(a) ~~[Medical doctors or chiropractic physicians who choose to practice acupuncture shall represent themselves as medical doctors or chiropractic physicians practicing acupuncture and not as licensed acupuncturists.]~~ A medical doctor or a chiropractic physician who chooses to practice acupuncture shall provide acupuncture as a medical doctor or chiropractic physician practicing acupuncture.

(b) A medical doctor or a chiropractic physician who chooses to practice acupuncture may not represent that the medical doctor or a chiropractic physician is a licensed acupuncturist.

Section 56. Section **58-72-701** is amended to read:

58-72-701 (Effective 05/06/26). Procurement and administration authority.

(1)(a) A licensee who has received the necessary training, the division requires by rule

the division makes in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to practice injection therapy[, including having obtained a clean needle technique certificate from the National Commission for the Certification of Acupuncture and Oriental Medicine (NCCAOM):] as defined in Section 58-72-102:

[(a)] (i) has authority to procure and administer prescriptive substances described in Subsections [58-72-102(2)(a) and (b)] 58-72-102(3)(a) and (b) for in-office administration only; and

[(b)] (ii) may obtain substances described in Subsection [58-72-102(2)] 58-72-102(3)(a) from a registered prescription drug outlet, registered manufacturer, or registered wholesaler.

(b) A licensee who has received the necessary training to practice injection therapy as defined in Section 58-72-102, may not perform injection therapy on a pregnant woman or a child under eight years old.

(2) An entity that provides any substance to a licensee in accordance with this chapter, and relies in good faith on license information provided by the licensee, is not liable for providing the substance.

Section 57. Section **58-88-201** is amended to read:

58-88-201 (Effective 05/06/26). Definitions.

As used in this part:

(1)(a) "Dispense" means the delivery by a prescriber of a prescription drug or device to a patient, including the packaging, labeling, and security necessary to prepare and safeguard the drug or device for supplying to a patient.

(b) "Dispense" does not include:

(i) prescribing or administering a drug or device; or

(ii) delivering to a patient a sample packaged for individual use by a licensed manufacturer or re-packager of a drug or device.

(2) "Dispensing practitioner" means an individual who:

(a) is currently licensed as:

(i) a physician and surgeon under Chapter 67, Utah Medical Practice Act;

(ii) an osteopathic physician and surgeon under Chapter 68, Utah Osteopathic Medical Practice Act;

(iii) an advanced practice registered nurse under [Subsection 58-31b-301(2)(d)] Subsections 58-31b-301(2)(a) through (b);

(iv) a physician assistant under Chapter 70a, Utah Physician Assistant Act; or

- (v) a dentist under Chapter 69, Dentist and Dental Hygienist Practice Act;
- (b) is authorized by state law to prescribe and administer drugs in the course of professional practice; and
- (c) practices at a licensed dispensing practice.
- (3) "Drug" means the same as that term is defined in Section 58-17b-102.
- (4) "Health care practice" means:
- (a) a health care facility as defined in Section 26B-2-201; or
- (b) the offices of one or more private prescribers, whether for individual or group practice.
- (5) "Licensed dispensing practice" means a health care practice that is licensed as a dispensing practice under Section 58-88-202.

Section 58. **Repealer.**

This bill repeals:

Section **58-40a-103, Duties of directing physician.**

Section **58-41-1, Title of chapter.**

Section **58-41-3, Scope of licenses -- Practicing without license prohibited.**

Section **58-41-6, Board.**

Section **58-46a-101, Title.**

Section **58-46a-304, Continuing professional education.**

Section **58-57-1, Short title.**

Section **58-57-11, Provision for current practitioners.**

Section 59. **Effective Date.**

This bill takes effect on May 6, 2026.